

# Gendering Pandemic: The Impact of COVID-19 on Women

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**Abstract - COVID-19 epidemic beyond the health status of the global society and economy has been experiencing a major challenge. Ensuring that the needs of female nurses and doctors are integrated into each of the response efforts is critical today. Women are constantly undergoing this process as volunteers from different communities, health professionals, scientists, transport, and supply managers and many more. They are most at risk of infection and livelihood. COVID-19 focuses on the global growth of domestic violence in the health crisis and increases gender inequality around the world. Lockdowns and consistent measures around the world have increased women's workload as well as stress as more people have taken care of house arrest, having to unpaid work around six hours a day, and women's responsibilities have increased as children's schools and child care services have closed. It also causes emotional and physical abuse, resulting in fetal death or abnormalities during pregnancy. COVID-19 has also created huge challenges in border management, migration and service issues, making the humanitarian protection of families, adults and asylum-seeking children even more important. As a result of this epidemic, children are being exploited by finding food and money on the streets. However, most studies investigating racial and ethnic discrimination in hospital patients have been focused on. It is not yet known whether such inequalities are driven by smoking and alcohol use, geographical location or urban vs. rural settlements, at least in terms of differences in underlying health conditions.**

## I. INTRODUCTION

COVID-19 has changed the way we live. It has exposed inequality in our world. It has also exposed common human experience. Our health workers are overstretched and working hard to save lives. And we thank them. Women make up to 70% health workers in the front line. They travel home as nurses, in most cases using public transport further exposing them to infection. At home they are caregivers and that too, overstretches them. And they need support to manage

the stress they are under. We have also learned about the spike in gender-based violence. In some cases, the reports from hotlines and law enforcement tells that it is three times more. This, again, needs a swift response. UN Women Executive Director Phumzile Mlambo-Ngcuka highlights the need to place women front and center in the response. She said, "I am making an appeal to leaders to declare the services that address gender-based violence, essential services. These are services that are provided by civil society, by government departments, by churches, and other independent players including grassroots organization. This organizations and institutions also need resources and money to carry this important task at this critical moment".

Now we need to make sure that law enforcement and everyone who is dealing with responding to COVID-19 knows what to do when there is a situation of an abused woman and child. There should be taken responsibility for fighting on the side of women in the respect of solidarity. We need to make sure that the economic support that is being provided has got programs benefits that are targeted to women. Social protection is also targeted to women, especially it's a cash transfer. We also need to make sure that the women in the frontlines who are underpaid and yet overworked are addressed adequately now and for the future.

## II. GENDER-BASED VIOLENCE IN THE PANDEMIC

Lockdowns to prevent the spread of Covid-19 have been closely monitored to find out how many women at home are facing a crisis - whether it is an epidemic, a natural disaster, or an economic downturn. Gender-based violence has escalated into a global emergency. Preliminary results from China prove that domestic violence has increased dramatically. For example, a

police station in Hubei Province, China, recorded three times as many domestic violence reports during the COVID-19 segregation in February 2020.

"Gender policy and the role of equipping women in the field of care put them at the forefront in times of crisis, increasing the risk of their exclusion without developing a response," said Terry McGowan, chairman of the Hill brown Division of Population. Around the world, women do one-third of the unpaid work, including housework, helping family members with disease prevention, and caring for sick relatives. The COVID-19 pandemic is causing untold human suffering and economic devastation around the world. Some domestic violence shelters are closed; others are full. Government should make the prevention and redress of violence against women a key part of their national response plans for COVID-19. Imprisonment, refugee women and girls are expected to increase the risk of intimate partner violence. Even the socio-economic situation of refugee women and girls may worsen when the risk of sexual exploitation of members of other communities as well as humanitarian workers increases.

Nandini Bhattacharya, president of the All Bengal Men's Forum, said men were also victims of domestic violence in the lockdown. According to her, the wife kept the identity card of the office of her husband. As a result, the doctor husband could not go on duty in Corona. His father has even threatened to hang for sexual harassment. A government doctor from Kasba area called them with such a complaint. In such a situation, the doctor is now going to work with the intervention of the police. Mother and daughter are finishing the seven-day market in two days. Daughter is forcibly taking her old father to the market in Corona. His wife is also accompanying him. Allegations of such atrocities have been lodged in the office of the organization during the lockdown. From the end of March to the beginning of August, 60 complaints of domestic violence alone were filed. All of which are from cities and suburbs. This number is more than double than normal.

However, it has been repeatedly said that many more women are victims of domestic violence in the lockdown. It is not clear on what basis that calculation is based. Because, under the domestic violence law of this country, men cannot file a complaint. But just like beating the wife at the hands of the groom, the opposite is also happening at the stage of domestic

violence. In the lockdown episode, the news came that in Salt Lake the groom was beaten at the hands of his wife. Which again proves there are two sides to domestic violence. But one comes in the news, the other is hidden. From birth, the man is either a protector or eater. His helplessness or tears are both a pity and shame in the eyes of society. Therefore, hiding this expression along with it is like expressing masculinity.

Unpublished torture statistics were captured in a recent report by the National Crime Records Bureau (NCRB). The number of suicides among married men in India is more than double that of women every year. Even in the false case of rape, many men have lost respect and family. Countless lives have been lost. All that information has come up in their report. There is a ministry for livestock in this country, there is a law to protect the environment, but there is no place for men to complain. As a result, the allegations remain hidden. They claim that it is possible for those who are working for men's rights to know the facts behind them, but ordinary people cannot think of it.

The same deprivation in the case of child abuse. Although there is a law in this case, we do not want to discuss child abuse. As if only children are being abused. Which is overshadowed by the POKSO Act (Protection of Children from Sexual Offenses). As a result, there are many false cases.

In my opinion, the rights of men and women mean their overall rights. The right to education, health, protection, law and social rights. An independent state is obliged to give everything to both men and women. Girls should also think that if their father, husband, brother, son are in danger, they will not be healthy either. That discomfort collectively pushes many families to the brink of collapse. Remember that men and women complement each other, both are half sky apart from each other.

### III. ECONOMIC IMPACT & UNPAID CARE WORK

The COVID-19 epidemic has made it clear that it is subsidizing women's unpaid housework, public service and private benefits. This epidemic is not only challenging the global health system, it is our commitment to equality and human dignity. With the help of women's interests and rights, we can get rid of this epidemic quickly and create a stable society that

benefits everyone. This work is said to include economic metrics and decision making.

The renowned newspaper “*The Hindu*” published an article- ‘A greater impact on women’ on 30<sup>th</sup> April 2020 written by António Guterres (the Secretary-General of the United Nations). I get some very significant information about the socio-economic situation of every woman. Women are comparatively represented in low-wage jobs without benefits in small-scale services such as domestic workers, casual laborers, street vendors and hairdressers. The International Labor Organization estimates that about 200 million jobs will be lost in just three months - most of them in these sectors. And just as they are losing their paid employment, many women are constantly facing major problems in care due to the extra care of children due to the closure of schools and the increased focus on the elderly in the health system. Women do three times more domestic work than men. This means that they have to accept more hard work and sacrifice to take care of the children if the business is open when schools and creeks are closed or if they are salaried workers. Women in precarious jobs, health insurance, paid sick leave, ranging from childcare, income security and unemployment benefits are talking about the immediate need for basic social protection and inclusion. Cash transfers, credit, and economic stimulus measures such as bailouts is also specifying the target.

Unpaid care work performed by a person who refers to all the work which will have to fill out a – physical, psychological, and developing. Responsibility to care more than men, women are given relatively. Around the world, housework and care-work time spent for both men and women increased, but they are much more in women has risen from the base, the double burden of working women has created unprecedented. In India, new evidence suggests that it is reducing employment opportunities for women, and deeply unequal gender norms context that was large.

The pay-as-you-go economy has slowly taken off because people are not physically allowed to enter the workplace, but many families now need to raise and educate their children without institutional support, which is reducing wage working hours and increasing stress. The unpaid work that every woman does to maintain her daily life for herself and her family depends on her social status and personal family situation - raising children, cooking, doing the dishes,

laundry, cleaning the house, collecting water and wood, elderly relatives and Mental tasks such as taking care of family members, feeding them on time, doing household chores, managing the family, as well as planning schedules and performing mental labor as a barrier to family relationships. Of course, all this work is done by women. Men also ever before are engaged in unpaid work in the household. For example-shopping, home repair etc.

#### IV. WORK FROM HOME AND EDUCATION OF WOMEN

We need to integrate this discussion into a few more dimensions of women's work and broaden the scope of “Work-From-Home” (WFH) opportunities. We need to discuss how pre-existing work systems can be affected by COVID-19. WFH-related discussions about the household work and child care (unpaid domestic work) to work (paid, professional work) focuses on the synthesis of the difficulties, unpaid work and take some time to review links between domestic work worthwhile.

The renowned E-Paper (English edition) “*The Economic Times*” published an article- ‘Five in ten women facing motivational challenges in work-from-home scenario: Survey’ on 20th July, 2020 written by Brinda Sarkar (Editor, The Economic Times). According to this survey, during the domestic household situation, four out of every 10 people face high levels of anxiety and stress, which is a broader career environment for women in India. Remote working and its impact on a total of two and a half hundred women and women professionals across New Delhi, Mumbai, Chennai, Bangalore, Hyderabad, Pune and Kolkata. Given an opportunity for men to share the load in the current worldwide home, however, managers (mostly men) have been sensitive to this approach as a result of creating high stress levels for women. Women's "dual burden syndrome" has been mentioned. With the workload from their office, all the chores around the house have created double stress, the effect of which has caused great anxiety towards their mental side. Additionally, it is mentioned that more than 50% of the WFH scene has faced motivational challenges. Various failures have led to fears that a large portion of women's careers could be lost in their careers and the gender diversity

declared journey to leave behind decades could lead to such a fear.

Most of the government to control the expansion of the virus in the world do not have to be forced to temporarily close the school. The peak of the epidemic, more than one and a half thousand students, or about 90% of the world's pre-primary to higher education students are being hindered. There is an idea that everyone can continue their online education. All eyes are now on digital technology to provide continuity of education, the existing digital system has gradually clarified the gender divide and pushed towards further marginalization of girls. Millions of girls around the world are not online and therefore cannot continue their education in the digital space. Many girls cannot afford expensive data online and those who are trying to survive are being deprived of their families in various ways. This is exactly what happens - even if a house is connected, girls can't even use the internet because their brothers are busy with housework while using the internet.

#### V. HEALTH, PREGNANCY AND PSYCHOLOGICAL IMPACT ON WOMEN

COVID-19 the current outbreak of the first Chinese cities due to the emergence of a newly identified organism was identified Wuhan town and spread quickly across borders and became a threat to global public health. Women can potentially experience stress and anxiety during pregnancy. Adverse maternity outcomes such as fetal death or fetal abnormality. During an outbreak of infectious disease may increase stress and anxiety levels. In the COVID-19 epidemic, women in the first trimester of pregnancy are experiencing higher anxiety and severe emotional distress than in the second or third trimester of pregnancy. This increases the chances of miscarriage. Pregnancy is a sensitive issue where biologically adapted changes in pregnancy can put women at high risk for viral respiratory infections such as influenza, acute respiratory syndrome (SARS) and Middle Eastern respiratory syndrome (MERS). However, sufficiently limited information is available regarding the evaluation and management of COVID-19-infected pregnant women. However, rapid growth of COVID-19 definitely increases stress and anxiety levels in pregnant women. Currently around 10% of pregnant women worldwide suffer from mental

illness, initially depression is its main symptom. If the mental health care of pregnant women during the COVID-19 epidemic is limited, it is more likely to increase. This is a major public health challenge for women giving birth, which necessitates adequate and timely health care. Therefore, pregnant women are at risk not only for treatment-related problems, but also for psychological problems. Stress, anxiety, depressive symptoms, insomnia, denial, anger, and fear are the most common mental health difficulties. Mental abuse is often a precursor to physical and sexual violence in relationships. Women who are stuck in a growing cycle of excitement, strength, and control tend to suffer from a variety of mental health concerns, including depression, anxiety, and trauma. Lack of social support often becomes internal to abuse and increases their sense of incompetence and helplessness as their anger and humiliation towards themselves increases. This causes trauma in them. During epidemics, there is a lack of routine health services in healthcare facilities, leading to problems in women's sexual, reproductive, and maternal health services. Challenges to contraception, safe abortion, and access to medication increase women's health risks.

In my opinion, women have repeatedly proven to be the backbone of society's recovery because they maintain the respect of their family and society in difficult times. So, they need to be included in economic planning, policy decision making and emergency response planning. Families and communities must be sensitive to the effects of COVID-19 on women and focus on eliminating chronic discrimination. Governments should coordinate efforts between local administrations, civil society organizations and mental health organizations to ensure the protection of women.

#### VI. MIGRANTS CRISIS, CHILD ABUSES AND GIRLS TRAFFICKING

The COVID-19 epidemic has claimed lives everywhere, but the ones that have hit the hardest are those who are least affected, refugees and displaced persons. For them, the danger has been mixed. Half of the world's refugees are women and girls. Eighty percent of the 71 million people who have been forcibly displaced have been displaced worldwide. The water, sanitation and health add to the risk of

having to face limited. Hunger, unemployment, and homelessness, mostly on foot, in a seemingly endless journey of the unfortunate deaths of many migrant workers are available. Many of the things the way they died, what they did for a living, their names and other details are often left out. So, it is seen that a part of the expatriate workers remains unseen even in public. In this patriarchal discourse of endurance and suffering, the strength and resilience of immigrant women brings a different dimension to the term 'empowerment'. Even a small child to carry baggage, women and girls have the same role. Lack of hygiene and sanitation, the hungry children in the streets on behalf of migrant workers has become a higher quality problem. Inequality and poverty and the vulgar modern physical appearance, especially in the rural economy and reward the people who will carry the moments of this event emphasizes the migration of crashes.

More than 1.5 billion students worldwide have witnessed sexual harassment as schools close. With the opportunity to stay online unsupervised for a long time, sexual abusers try to exploit children through various forms of sexual assault or sextortion. About 90% of online child abuse content is displayed for accounting. Students come online through smartphones, tablets and laptops via cheap, high speed internet. Among them, children in particular are targeted. Less aware newcomers are often the victims of such dangerous situations.

In the COVID-19 situation, many families are living in extreme poverty, forcing poor children to take to the streets in search of food and income, making them victims of human trafficking and other abusers. Domestic abuse of children at home, this time has become a global disorder. Non-adult girls are trapped at home with abusive relatives can be victims of the sex trade and trafficking of cybersex.

#### VII. DISABILITIES, MINORITIES, DALITS, RACE, ETHNICITIES AND WOMEN

The COVID-19 situation is directly and indirectly affecting Dalits as well as persons with disabilities. People with disabilities include a wide range of human diversity based on caste, gender, religion, geography, vulnerability, and other characteristics. Because of many people with disabilities are infected with an infection such as MRSA (Methicillin-resistant Staphylococcus aureus), their corona virus infection

can become more serious. Lack of accessibility can lead to dire situations as there is no accessibility to quarantine centers. Also, in the case of students, the question that arises is where is the inclusion of persons with disabilities in online education? How many people with disabilities in total or is it possible to take online classes? Are websites equipped to deal with visual impairment? How much do they have to struggle to feed the families of the disabled? When they have no representation in Parliament, how will the government think of them? It points to an invisible big problem. For every political party there is a religious minority cell, a caste house, a female cell but there is no disability rights cell. Social distancing is an advantage for the marginalized but worse for the disabled. In COVID-19 situation reduction of minorities, discrimination, arbitrary denial or adverse negative impact of refugees, asylum seekers, immigrants and stateless people, internally displaced persons and ethnic and religious minorities, and the people on the basis of a low caste, become victims by stigma as well as discrimination.

It is important to address the uniqueness of global prejudice and racism in response to the Coronavirus Disease 2019 (COVID-19) epidemic. We also consider other minorities in the COVID-19 response, our policies have been widely applied to healthcare outcomes of ethnic / racial minorities as well as others. COVID-19 cases and deaths are plentiful, but detailed information on COVID-19 by age, gender, or ethnicity is scarce. Furthermore, national health workers from ethnic minority groups seem to have died in disproportionate numbers in COVID-19 who are at the forefront of the higher NHS of these groups, including healthcare workers, advocates, medical officer and politicians. Ethnic minority groups are seemingly unnecessarily affected by COVID-19 for their socio-economic and environmental reasons and they may be victims of prejudice. The potential underlying causes of COVID-19 complications are related to the fact that ethnic / racial minorities are not yet available worldwide, their interpretation is temporary, but there is a possibility of some variation.

#### VIII. SOCIAL MEDIA AND WOMEN

Undoubtedly, social media was one of the things that kept the people connected to the lockdown in COVID-19. The Facebook group has so far gained a new

dimension of being used for fun and networking. Being united in a virtual, indomitable world, people had the courage to tide with fear, panic, and isolation from health emergencies. In the case of many women, these groups help to overcome such fears. As can be seen, only a few women are founders and administrators of this type of group. During the lockdown, the platform greatly helped people to spend the day. It is a platform where anyone can express their views without judgment. Social media has become a medium for any woman to openly express her thoughts.

At a time when the world is facing the spread of deadly acute respiratory syndrome coronavirus 2 at the same time, massive amounts of health-threat misinformation are spreading at a faster rate than disease. The main proportion of this false rumor is spread through social media in the web-2 era. Therefore, it is therefore important to provide fast, accurate and reliable information to solve serious infection control problems. The positive and negative effects of social media during the coronavirus epidemic on healthcare professionals and the general public are both symptomatic. Used wisely, social media is a powerful tool for the well-being of individuals and public health. With more than 560 million Internet users, India has become the world's second largest online market after China. The most popular social networking sites in India are YouTube and Facebook. In fact, India has the largest Facebook user base in the world. WhatsApp, Instagram, and Facebook Messenger are some of the other famous social networking sites used in India recently. Almost everyone has cell phone and laptop with the connection of internet, so everyone is able to send texts.

Several hospitals, medicine practitioners, health organizations have opened YouTube, Facebook, and Twitter pages to give their patients access. But caution should be exercised before doctors and other individuals post any information on these pages or sites so as not to cause widespread complications as well as loss of life among the general population. To prevent this at some point, many health care organizations have standards for using social media for their doctors and other staff. Referred to as the NHS Foundation Trust's Social Media Policy and Guidance; Refrain from posting, uploading, forwarding, or posting chain mail, junk mail, cartoons,

jokes, or gossip links. The use of social media for any public health crisis is under full consideration. As social media has been able to bring people closer than ever before, it has created special challenges in society, including cyber-threats, public opinion crimes and other forms of manipulation. There is no accountability for the rhetoric that is presented in such a variety of distasteful uncontrolled exchanges to encourage open membership on social media.

In today's world, the media needs to be very careful about reaching out to the general public, especially during times of public health crisis. Fake treatment information due to negligence; similarly, individuals need to be aware of whether false news or rumors are being spread by SMS and WhatsApp messages.

#### IX. PANDEMIC AND QUEER

Coronavirus infects people indiscriminately and affects them individually. The overall effect on COVID-19 women, girls, transgender people, and other non-binary individuals is very different from other people. The effects of COVID-19 on caste, class, different powers, and elements of religion and specific communities are more mixed.

It is imperative that policies and measures in response to the epidemic point to social vulnerability to the economy as well as to their health and livelihoods. They are also a gender.

Transgender and bisexual communities have historically been socially inclusive. Food, shelter, and access to medicines has stepped up to challenge them and lockdown has been reduced by their livelihood's options. People in queer communities go to social media to share experiences of frustration, loneliness, and stigma. People across sexual and gender minorities who have faced widespread stigma due to nationwide lockdowns are deteriorating their mental health. Several media reports have reported people in this community committing suicide or attempted suicide. They have started sharing their experiences of frustration and loneliness on social media. The members of the queer community usually live in isolation and the comfort from violence and persecution due to being isolated from their own community has given them a little peace.

People from the humorous community are locked inside their homes, especially those who face regular stigma and discrimination by family members, by

whom they are often subjected to psychological abuse. They have to face mental health problems due to maintaining social distance. Currently having to fall into fear and uncertainty about their livelihood. Not only do they feel lonely, but they are also at risk of losing their homes due to increased social anxiety during the epidemic.

## X. CONCLUSION

The epidemic is very painful for rural women farmers. Most of the world's poor work in small-scale rural agriculture. The epidemic threatens to widen the gender gap among farmers. Such differences further weaken women economically. Women already have less time for their farms than men because of the responsibilities of housework, caring for out-of-school children or sick relatives. In addition, women farmers carry additional domestic responsibilities. As a result, female farmers can usually save less than their male counterparts. Just as women cannot reduce the loss of income from the effects of the virus, they will struggle to buy the necessary seeds and fertilizers for the next planting season.

Gender differences are also expressed in the case of land rights. Property rights for women who have been widowed as a result of Covid-19 are often conditional on marriage. When family members who cannot find work in urban areas return to their villages, there will be more competition for investment in land. This gender gap in productivity and income will also be tested to protect women's land rights.

Meanwhile, widows were largely unseen, unsupported, and insecure in our society. The latest statistics (2015) show that there are about 258 million female widows worldwide. The actual number is likely to increase further due to the effects associated with the coronavirus.

Previous experience, such as HIV / AIDS and Ebola, has shown that widows are often deprived of inheritance rights, their property is confiscated after the death of a partner, and they face a lack of treatment and discrimination. If a widow falls ill due to a lockdown and financial assistance, her children may not have access to bank accounts and pensions for her health care. Globally, women are less likely than men to have access to old age pensions, so the death of a spouse can lead to disorientation of older women. Single elderly widows continue to struggle with

poverty. As a result, it is an area that needs urgent attention.

Widows have equal inheritance and property rights, as well as to ensure that the legal reforms, which will see our economic revival programs helps widows and older single women economically and the facilities must be accessible to those without bank accounts. Social includes, elastic and should be equal for everyone.

## Notes

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