The COVID-19 pandemic has resulted in at least 27 million cases and over 900,000 deaths worldwide.\(^1\) From decision-makers and doctors, to entrepreneurs and care providers, women have been at the forefront of the COVID-19 response. Despite their enormous contributions to mitigating the impacts of the COVID-19 pandemic, the crisis is threatening to erase decades of progress for women and girls. While men have been most affected in terms of fatalities, COVID-19 has exacerbated economic crises, care deficits and the ‘shadow pandemic’ of gender-based violence, with disproportionate impacts on women.\(^2\) Inequalities between groups of women based on race, disability, income, age and more have also been starkly apparent in both the spread and the impact of the virus. Based on a unique database compiled by UNDP and UN Women, this factsheet provides an overview of the COVID-19 response so far by governments in Central and Southern Asia, with a focus on measures aimed at addressing threats to gender equality across three key dimensions: the surge in violence against women and girls, the unprecedented increase in unpaid care work, and the economic insecurity caused by the large-scale loss of jobs, incomes and livelihoods. Overall, the region’s gender response has been patchy and uneven across countries. Despite this, examples of innovative, gender-responsive measures are being implemented in a range of contexts.

**BOX 1: COVID-19 GLOBAL GENDER RESPONSE TRACKER**

Information in this factsheet is based on the [UNDP-UN Women COVID-19 Global Gender Response Tracker](https://undp.unwomen.org/en/digital-library/publications/2020/09/gender-equality-in-the-wake-of-covid-19), which monitors policy measures enacted by national governments worldwide to tackle the COVID-19 crisis, and highlights responses that are gender-sensitive. Co-created by the two agencies, the tracker is coordinated by UNDP, with substantive leadership and technical contributions from UN Women. It is a living database with countries and measures being regularly added and updated.\(^3\) Like all policy trackers, there may be gaps or biases due to a lack of available information, underreporting of measures being announced, overreporting of measures that have been suspended, or the lack of data on the gender components of existing measures. Overall, findings should be interpreted with caution. When considering the number of individual measures, for example, it is important to note that countries with few or no COVID-19-related measures may have pre-existing gender-sensitive policies in place that help mitigate the negative impact of the pandemic. Measures also vary significantly in scope. This factsheet therefore also provides information on the content of the measures, which should be considered alongside the aggregate totals. No attempt is made to rank countries, but there is great potential for countries to learn from one another to improve their policy responses for women and girls. More information about the classification of policies, the definition of gender-sensitive measures and the data collection and analysis process can be found in the [methodological note](https://undp.unwomen.org/en/digital-library/publications/2020/09/gender-equality-in-the-wake-of-covid-19).

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\(^1\) As of 10am CEST on 6 September 2020. WHO Weekly Epidemiological Update. [https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200907-weekly-epi-update-4.pdf?sfvrsn=f5f607ee_2](https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200907-weekly-epi-update-4.pdf?sfvrsn=f5f607ee_2)


\(^3\) To provide information on national measures to be included in the UNDP-UN Women COVID-19 Global Gender Response Tracker please contact [covid.gender.helpdesk@undp.org](mailto:covid.gender.helpdesk@undp.org).
I. What is a gender-sensitive measure?

The set of all measures contained in the global tracker consists of 2,517 measures taken in response to COVID-19. These measures fall into four main policy categories: social protection, labour markets, fiscal and economic policies and measures to address violence against women and girls (Figure 1). These measures were partly imported from other databases and partly collected by UNDP and UN Women (see methodological note).

Gender-sensitive measures (992 in total) are a subset of all measures – those that seek to directly address the specific risks and challenges that women and girls face as a result of the pandemic, including:

- all violence against women measures are categorized as gender-sensitive by default
- social protection and labour market measures are defined as gender-sensitive if they target women’s economic security or address unpaid care
- fiscal and economic measures are defined as gender-sensitive if they provide support to female-dominated sectors of the economy, on the assumption that this is likely to protect women’s employment and therefore their economic security.\(^4\)

The assessment is conducted based on the available information about policy design. An assessment of the implementation or gender impact of these measures is not included.

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\(^4\) Given the different data collection and analysis processes used for identifying violence against women measures, on the one hand, and women’s economic security and unpaid care measures, on the other, the three areas are not strictly comparable. While women’s economic security and unpaid care measures have been located within a broader universe of social protection, labour market, fiscal and economic measures, violence against women measures have no such point of reference.
II. The regional picture

Across the Central and Southern Asian region, 11 countries and territories (see Annex I for the full list) out of the 13 analysed have taken a total of 76 gender-sensitive measures in response to COVID-19. Echoing global trends, most measures taken in the region address violence against women (60 measures across 10 countries), followed by measures to ensure women’s economic security (12 measures across seven countries), with the lowest number of measures to address unpaid care work (four measures across two countries) (Figure 2).

![Figure 2. Number of gender-sensitive measures in Central and Southern Asia, by dimension](image)

Measures that target women’s economic security and address unpaid care also make up only a fraction of the total social protection and labour market response, on the one hand, and the fiscal and economic response, on the other:

- In total, 13 countries and territories in CSA have adopted 70 social protection and labour market measures in response to COVID-19. However, only 19 per cent of these measures (13) are gender-sensitive in that they strengthen women’s economic security or address unpaid care (Figure 3).
- Similarly, six countries and territories in CSA have adopted 11 fiscal and economic measures to help businesses weather the crisis, but only 27 per cent of these measures aim to strengthen women’s economic security by channelling resources to feminized sectors (Figure 4).
Overall, only one country in the region (India) registers a holistic response with measures that span at least three dimensions. Two out of 13 countries and territories analysed in the region register no gender-sensitive measures at all in response to COVID-19.

III. Which gender policies are governments prioritizing?

Violence against women and girls (VAWG)

Some 79 per cent of all gender-sensitive measures in Central and Southern Asia (60 measures across 10 countries) focus on preventing and/or responding to violence against women and girls – three in Central Asia and seven in Southern Asia.

Of all VAWG measures in the region, 63 per cent (38 in 10 countries) aim to strengthen services for women survivors (Figure 5), including through helplines and other reporting mechanisms (12 measures in eight countries) shelters (seven measures in six countries) and police and judicial responses to address impunity (seven measures in four countries). For example:

- **Bangladesh, Bhutan, India, Kyrgyzstan, Nepal** and **Sri Lanka** have strengthened existing hotlines and/or established other reporting mechanisms, including psychosocial services. For example, in Sri Lanka, as of March 2020, the “1938” national women’s helpline is now open 24/7 (instead of during standard work hours on weekdays only) and is now offered in three languages.
• In Pakistan, a national cyberviolence helpline was improved with innovative tools, such as a mobile application with a silent panic button and text message (SMS), WhatsApp and online support for better access during the COVID-19 crisis.
• In Afghanistan, the Ministry of Women’s Affairs is overseeing the management of shelters (including Women’s Protection Centres) and has repurposed unused spaces previously operated by civil society organizations and funded by international donors, such as children’s shelters, to house women released from prison and some survivors of violence.
• Similarly, in Kazakhstan, local government and community offices have provided shelters to support the victims of violence during quarantine in all regions.
• In Nepal, one-stop crisis-management centres are providing services in 66 districts (out of 77 districts where they are operational), including: free health care, coordination with safe homes, psychosocial counselling and referrals to the police.
• In Sri Lanka, the Ministry of Health issued specific guidelines for Mithuru Piyasa/Natpu Nilayam staff (gender-based violence help desks within state hospitals), including adopting flexible remote arrangements to ensure continued service-provision during curfew periods.
• In Tajikistan, the Ministry of Health continues to run victim support rooms at health facilities and is exploring the option of increasing the number of medical facilities hosting these rooms.
The second most common type of measure taken in the region was awareness-raising and campaigns (eight measures in six countries). For example:

- In **Bangladesh**, the National Human Rights Commission has produced and broadcasted information in public and private television channels to raise public awareness on violence against women and girls.
- In **Kyrgyzstan**, activities such as contests on social media, stories about health-care workers and service-providers, online flash mobs and celebrity appeals have been implemented to disseminate information on available services for gender-based violence survivors.

Only four countries in the region (Kyrgyzstan, Nepal, Pakistan and Sri Lanka) have taken measures to improve the collection and use of violence against women data in the COVID-19 context. For example:

- In **Sri Lanka**, data from the women’s helpline are being compiled on a weekly basis and shared with the National Forum Against Gender-Based Violence.
- In **Kyrgyzstan**, the police have collected disaggregated data based on calls to hotlines and disseminated this information through media.

Services to respond to and prevent VAWG must be treated as essential services and an integral part of national and local **COVID-19 response plans**. According to the tracker, six countries in the region have taken this step (Bangladesh, Bhutan, India, Kyrgyzstan, Nepal and Pakistan). For example:

- In **India**, the Government has issued advisories to coordinate the response to intimate partner violence across departments and institutes, along with guidelines for the functioning of essential services for women survivors of violence.
- In **Bhutan**, the National Commission for Women and Children developed a Contingency Plan on “GBV and Child Protection Emergency Preparedness and Response During COVID-19 Pandemic”.

The pandemic will have long-lasting consequences that increase the risk of violence for women and girls, and only commitments that are part of governments’ sustained and long-term planning and policies can help to address these.

The tracker registers no measures to address online violence in the region, which evidence shows has increased during the pandemic, and very few measures to reach the most marginalized women.

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Women’s economic security

Out of the 81 fiscal and economic, social protection and labour market measures registered across Central and Southern Asia, only 12 measures in seven countries and territories address women’s economic security – amounting to just 15 per cent of the total fiscal, economic, social protection and jobs response.

Almost all of these measures, nine fall into the social protection category (Figure 6), mostly cash transfers or food assistance and other forms of in-kind support that prioritize women as the main recipients. For example:

- In India, a number of existing cash-transfer programmes have been strengthened. For example, a cash transfer of INR 500 (USD 6.5) was distributed for three months (April to June) to 200 million women with a Pradan Mantri Jan Dhan Yojana (PMJDY, or financial inclusion) account. In addition, Rs1000 (USD 13.5) will be provided to all beneficiaries under the National Social Assistance Programme for older persons, widows and persons with disabilities. On a subnational level, the state of Uttar Pradesh transferred INR 611 crore (USD 80 million) in cash transfers directly to 27.5 million workers of the Mahatma Gandhi National Rural Employment Guarantee Scheme, which has gender quotas to ensure women’s participation. In-kind transfers were also scaled-up during this time, including increased allocations for all priority households receiving subsidized food for three months (1 kg pulses per household, 5 kg wheat or rice per individual). In addition, cooking gas cylinders have been provided free-of-cost for three months for women who benefit from schemes that distribute gas connections to women in low-income households (i.e. the Pradhan Mantri Ujjwala Yojana Scheme).
- In Pakistan, 4.5 million female cash transfer (Ehsaas Kafaalat) beneficiaries already getting Rs.2000 will get extra PKR 1,000 (USD 12) emergency relief for the next four months.
- In Sri Lanka, in-kind support has been provided, as the Government delivered nutritious supplements to households with pregnant mothers and infants with nutrition deficiencies.

The tracker registers no labour market measures that prioritize or are targeted to women in Central and Southern Asia.

Finally, three countries in the region (Afghanistan, India and Kazakhstan) register fiscal and economic measures to support feminized sectors of their economies, that is, sectors that absorb a higher proportion of women’s employment compared to that of men. For example:
• In Afghanistan, the revised budget includes AFN 5.9 billion (USD 76.5 million) for the agriculture sector. Agriculture accounts for 64.8 per cent of women’s employment compared to 36.4 per cent of men’s in Afghanistan.

• In India, the Small Industries Development Bank has opened an additional financial window for the health-care sector under its flagship scheme called SMILE (Loan Fund for Micro Small and Medium Enterprises). Medium- and long-dated loans at beneficial rates are being provided under SMILE to finance the health-care sector, including hospitals, nursing homes and clinics, to help fund their COVID-19 response. Though only 3 per cent of female employment is in the health sector, women’s share of employment in this sector is more than triple that of men.

Overall, the low number of labour market, fiscal and economic measures aimed at strengthening women’s economic security or support to the sectors that employ them signals a major gap in the response so far. Stronger action is needed to ensure that women can keep their jobs or re-enter the labour market if they have become unemployed as a result of the pandemic.

Unpaid care

Measures to support unpaid care in the COVID-19 response include the provision of paid family leaves, cash-for-care programmes, flexible and shorter work-time arrangements or continued provision of childcare services, including for essential workers. Such measures are scarce in Central and Southern Asia, accounting for only six per cent (four measures in two countries) of the total 70 social protection and labour market measures in the region.

• The Government of Uzbekistan gave paid leave to working parents for the duration of the closure of schools and kindergartens without affecting the regular annual paid leave schedule. In addition, while sick leave is normally paid at a rate of 60–80 per cent of previous salary, for the duration of quarantine, it has been increased to 100 per cent for everyone and covers parents with children in quarantine. The termination of employment contracts for parents or guardians of children under the age of 14 who are infected with COVID-19 or placed in quarantine has also been prohibited.

• In India, the Government has published guidelines and advisories for at-risk/vulnerable populations such as older persons and persons living with disabilities. Certain states have developed specific measures as well, to identify and support at-risk/vulnerable populations.

Overall, with only about one-sixth of countries and territories in Central and Southern Asia (two out of 13) taking action to support unpaid care, the response has been woefully inadequate to address the severe care crisis that COVID-19 has catalysed. Eleven countries and territories in the region have not taken any measures to address unpaid care at all.
Annex I: Number of gender-sensitive measures registered by type and country

<table>
<thead>
<tr>
<th>Country/territory</th>
<th>Women's economic security</th>
<th>Unpaid care</th>
<th>Violence against women</th>
<th>Total gender-sensitive</th>
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<td>4</td>
</tr>
<tr>
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<td><strong>4</strong></td>
<td><strong>60</strong></td>
<td><strong>76</strong></td>
</tr>
</tbody>
</table>
Annex II: Countries in focus

Uzbekistan

The tracker records 14 measures taken by Uzbekistan in response to COVID-19, of which four have been coded as gender-sensitive. Of these, one measure addresses women’s economic security and three address unpaid care work. In Uzbekistan, demand for hotline support in response to gender-based violence increased fivefold in the country’s first week under lockdown. Front-line health workers, 82 per cent of whom are female, meanwhile face extreme pressure. As of 18 September, Uzbekistan has recorded 412 deaths.

Regarding support for women’s economic security, an in-kind support programme has been provided in the form of baskets including essentials foodstuffs, hygiene products, disposable face masks, antiseptic sanitizers and antibacterial soap. Eligible populations include older persons (men over 60 years and women over 55) and persons with disabilities who need care, and do not have access to other sources of support from family or other services.

To support unpaid care work, for the duration of quarantine, sick leave has been increased to 100 per cent of the previous salary for everyone and it covers parents with children in quarantine. Usually, sick leave in Uzbekistan is paid at the rate of 60 to 80 per cent of one’s normal salary, depending on their employment history.

A second measure was taken to ensure paid leave for working parents while schools and kindergartens were closed, without affecting their entitlement to annual paid leave. The termination of employment contracts has been prohibited to protect employees who are parents (including substitutes, guardians and trustees) of children under the age of 14 who are infected with COVID-19 or placed in quarantine.

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7 https://ourworldindata.org/coronavirus-data-explorer?zoomToSelection=true&country=~UZB&region=World&deathsMetric=true&interval=total&hideControls=true&smoothing=0&pickerMetric=location&pickerSort=asc