

IMPACT OF COVID-19 ON WOMEN: RECOVERY IN TASMANIA THROUGH A GENDERED LENS

Summary of session held 20 May 2020

Global and national research has well established that crises have a disproportionate impact on women and girls. The Secretary General of the United Nations, Antonio Guterres has expressed his concern that limited gains in gender equality and women's rights made over the decades are in danger of being rolled back due to the COVID-19 crisis. The United Nations maintains the need for gender analysis and lens being applied for policies during the COVID-19 crisis to uphold the rights of women and girls.

On Wednesday 20 May 2020, individuals and representatives from across the Tasmanian government and Community Services Industry came together to recognise the impact of the COVID-19 crisis on women. They explored how the crisis has exacerbated and amplified pre-existing economic and social inequalities for women in Tasmania and highlighted possible solutions to address the inequality including ways to influence government and decision makers to apply a gendered lens to short-term and longer-term recovery strategies for Tasmania.

The following is a summary of information from presentations by Alina Thomas, Engender Equality, Jo Flanagan, Women's Health Tasmania, and Erin Gillen, Our Watch, and the main themes emerging from group discussions about solutions at the meeting.

WHAT WE KNOW

Violence against women – Family violence

The COVID-19 crisis has created an environment where there is potential for increased stress, family disruption, social isolation, and increased financial pressures. All can exacerbate the underlying gender inequalities that lead to violence against women. These kinds of stress-related factors, while they can increase the severity and frequency of violence, do not in themselves cause violence against women.

The tendency is to revert to strict gender norms during times of natural disaster and uncertainty such as men being the protectors and decision makers and women being the carers. Women's experiences of violence tend to be dismissed or excused more often during times of disaster or emergency, "he's under a lot of pressure", "the kids have been playing up".

Crises like the current COVID-19 pandemic can become catalysts for relationships ending as victim-survivors become less able to manage their safety within the relationship. Evidence is that the point of leaving and just after the end of a relationship is the most likely time that women will be critically injured or killed by their partners.

There is emerging global and national data that demonstrates that since the outbreak of COVID-19, violence against women and girls, and particularly family violence, has increased.

In Australia, 1800 RESPECT has reported an increase in contact from women experiencing family violence. There has also been reports from some family violence services that they have had reduced

contact from women. This raises the concern that many women are unable to safely contact services or access support due to being isolated with perpetrators.

Also, it is often family, friends and bystanders who call police, assist women to access services or provide support to a women's safety plan, and isolation has removed this mechanism to access help and support for women experiencing family violence.

There is also concern about growing opportunities for non-physical abuse including financial abuse and financial hardships. This is especially the case if Centrelink roll back payments, and the economy continues to slow down and job losses become more entrenched. A reduction in household incomes will pose significant challenges to victim-survivors including reducing opportunities to leave violent relationships.

In Tasmania, Police statistics are not reflective of the number of women experiencing violence. Many people who experience family violence do not involve the police, additionally some people who experience family violence do not recognise themselves as victim-survivors. At Engender Equality 4 FTE Counsellors see about 600 people per year. Many do not seek a justice response having been subjected to enormous trauma as a result of established court processes.

Tasmania Police has not reported an increase of family violence since the outbreak of COVID 19, however it is critical to note that Engender Equality has reported experiencing its highest recorded number of client's contacts in April 2020.

Pre-COVID-19, Women were more likely to:

- Live below the poverty line
- Access income support payments
- Access part-rate payments
- Experience homelessness, noting an increase in homelessness for women 55 years and above.
- Earn less income and superannuation than men. The pay gap between men and women is 15%. The average superannuation payout for women is 1/3 that of men, and emerging data suggests that many of those accessing superannuation early due to COVID are women, with some concern that women in abusive relationships are being coerced to access their super.

Work

- The industries on the frontline of the crisis are heavily dominated by women. Industries including healthcare, social assistance, support services, education and training (including early year educators and childcare workers), supermarket workers and cleaners have been significantly disrupted by COVID-19. The increase in demand for services and risk and behaviours associated to the crisis has resulted in high levels of stress and strain amongst women in these industries which often receive lower rates of pay compared to similar positions in other industries.
- We know that women are over-represented in casual and part-time work and that they make up most of the workforces most impacted by COVID-19 crisis including accommodation and food services, retail, child care and support service industries.

- Gendered social norms including perception of gender roles mean women are more likely to undertake unpaid work and household and caring responsibilities than men. This is likely to be amplified with COVID-19 resulting in additional care responsibilities for family members with a disability, ill or elderly family members and support for children being home-schooled falling to women and girls. This is also exacerbated by the perception that women have more flexibility to undertake unpaid work due to being overrepresented in casual and part-time employment.
- Childcare is critical for women's labour force participation and long-term economic security however women are reporting it is difficult to access childcare hours. The childcare workforce which is largely women are reporting high levels of stress during COVID-19 with the need to transition back to paid services for some organisations to remain viable.

Mental Health

- Anxiety and loneliness are overwhelming issues across Tasmanian and Australian communities. Depression and anxiety are major contributors to the overall disease burden for women which is far in excess of men.
- Over half of Australians that live alone are women and this increases with age. Sixty-two per cent of people over 55 years living alone are women.
- As a result of the crisis, people are being asked to live in a way that undermines their coping strategies:
 - The digital divide is significant for many women with research undertaken by Telstra suggesting women are more likely to be digitally excluded. Women in rural areas already have poorer access to devices, data and internet mostly due to affordability.
 - There is significant anxiety relating to a lack of skills and confidence to use technology. For women and children who are not safe at home there is anxiety about privacy of data and information.
 - There has been inconsistent messaging about education and health services. migrant women and women with intellectual disabilities have sought support for the whole overwhelming notion of home schooling.
 - The impact of home-schooling on a population with such low levels of functional literacy is something that has been consistently understated.

Maternal Health

- New mothers are reporting feeling very isolated and very anxious in antenatally and postnatally and cut off from critical community supports. Online breastfeeding support became available however, Tasmania already has very low levels of breastfeeding and the fear is this will increase with COVID-19 with no access to face to face support including lactation specialists.

Sexual and Reproductive Health

- The COVID-19 pandemic has highlighted pre-existing concerns in delivery of sexual and reproductive health services in Tasmania. In Tasmania medical terminations are available up to 9 weeks via certain General Practitioners across the state. A program is available at the Royal Hobart Hospital however, this isn't supported by Launceston or North West hospitals. Women do not have access to late-term abortions in Tasmania they have to travel to other states. There is currently no access to late term abortions for women due to state borders being closed.

Rural and Remote

- Tasmania has the most decentralised population nationally. Rural and isolated communities will experience significant social and economic impacts with the potential to compound geographic and cultural characteristics of communities. We know in rural and remote communities there is:
 - Barriers to accessing services
 - Higher rates of gun ownership
 - Fear of stigma
 - Social norms that suggest family violence is a family problem and should not be spoken

It is critical to consider effective recovery strategies for rural and remote communities in Tasmania including ensuring there is access to well-resourced specialised supports and other relevant services.

Populations

- There are population groups of women with needs that will require special consideration in planning for short and longer-term recovery from COVID-19. These include Aboriginal women, women with disabilities, older women, women on short-term visas, women who are sleeping rough, women from culturally diverse backgrounds and women who are at risk of eviction when the rent moratorium and boosted payment ends.
- Sex workers have also been targeted by additional police powers with massage parlours being raided and irregular restrictions being put on the sex industry while sex workers face barriers to access Centrelink support.

DISCUSSION – Emerging Themes

The main themes for gendered response and recovery planning are listed below.

Expert Voice

- A mechanism or structure for government to draw on the expertise of women’s organisations to support gender analysis of social and economic recovery planning, and gender responsive budgeting, policy making and strategies.
- Ensuring peaks and specialist bodies are involved in crisis response and recovery decision-making processes. The design of these packages needs to be informed by a gender analysis, and intersectional approach so to identify and address inequalities and respond to women in Tasmania most impacted by the crisis both socially and economically.
- Resourcing women’s and specialist violence against women organisations to undertake research and consultation to provide evidence and inform government planning and decision making for recovery.

Intersectional gendered approach

An intersectional approach must be taken for recovery strategies for Tasmania.

- This means a focus on addressing the differing needs of population groups of women such as Aboriginal women, women with disabilities, women from culturally and linguistically diverse backgrounds, lesbian women, transgender women, younger and older women.
- Putting in place strategies that address the factors that contribute to discrimination and inequalities such as the social and economic power women hold and the systems and structures that support this and contribute to discrimination.

Investing in services

The social and economic consequences of COVID-19 will be significant and ongoing. There will be increased levels of associated trauma, and existing inequalities including the amplifying of underlying causes of family violence. High levels of stress and unemployment will see an increase in demand for social support and services perhaps never seen before.

- It is critical that expert voices are valued in planning for the social and economic recovery for Tasmania. Specialist services and supports need to be well-resourced for primary, early intervention and tertiary responses with the likely increase and long-term demand resulting from the COVID-19 crisis including responding to the increase in contacts already being seen by some community-based family violence, and sexual violence services.
- Ensuring frontline services are equipped to work in relevant ways to prevent, identify and respond to family and sexual violence.