



# Iraq Rapid Gender Analysis

## The State of Women, Iraq, and COVID-19

Iraq confirmed its first case of COVID-19 in February 2020. As of 7th June 2020, there have been 11, 098 confirmed cases and 318 deaths in Iraq. The government has undertaken early preventative measures to contain the spread of the pandemic, including travel restrictions and occasional lockdowns. Women, girls, men and boys in Iraq have been affected differently; and they developed different coping mechanisms. Furthermore, their roles within households have been directly impacted, and their participation and access to services also reflected the gendered dynamics of COVID-19. There has also been an increase in the risk of gender-based violence (GBV).

This rapid gender analysis (RGA) seeks to provide information on different needs, capacities and coping strategies of women, men, girls and boys and other vulnerable groups in the context of COVID-19 in Iraq. In addition, this RGA aims to advise the humanitarian programming in Iraq with practical operational recommendations to meet the needs of different groups and to ensure we 'do no harm' in times of COVID-19.

## Key Findings

- **Women's participation in labor market decreased due to domestic labor and unpaid care work.** Before the pandemic, 72.6 % of males participated in labor market, while this ratio was 12.4% among females. Due to the closure of schools and caretaking of infected household members, COVID-19 has put more burden on women, which negatively impacted their ability to participate in labor market and/or quality of available employment opportunities.
- **COVID-19 has triggered negative coping mechanisms, especially among the conflict affected**

**population.** In addition to the worsening economic situation and limited livelihood opportunities and trainings due to COVID-19, the IDPs do not have equal access to key hygiene products as the general population. 74% of the 1442 community members reduced their food consumption and 66% reduced their expenditure on non-food items, especially hygiene items. Marriage, including child marriage, became an income generation activity; other mechanisms include going into debt, child labor, and begging. Both government and humanitarian organizations also have limited or reduced food aid.

- **Gendered disparity in channels to receive information disproportionately affects adolescent girls and women.** Limited access to information also has been identified as one of the major protection risks in Iraq. Men tend to access official communication channels of authorities or public places, while women and girls share information by word-of-mouth in informal groups. There is also a gender gap in comprehending health-related messages.
- **Women and girls' access to treatment for COVID-19 is at stake.** The main barriers include lack of medical facilities, personnel or equipment, distance and lack or cost of transportation to the facilities, cost of medical care, lack of information about medical facilities and lack of female staff. Regarding COVID-19 related medical care, some families do not allow women who have been tested positive to remain in quarantine unaccompanied. It hinders women's access to health services and leads to a further spread of the virus among the families and/or communities.
- **There is a dramatic increase in the reported cases and severity of the risks of GBV.** 1.29 million Iraqis are at risk of GBV. In the context of COVID-19, this risk increased in various ways: restrictions on movement and confinement; gaps in GBV service provision; intrahousehold conflicts and exploitation due to loss of livelihoods; increase in the burden of women and girls as caregivers. More than 50% of the interviewees also reported a significant increase in the severity of the above issues.

## Recommendations

- **Ensure Inclusive and accessible water, sanitation and hygiene services (WASH) and materials for all communities,** including women, girls, men, and boys with or without disabilities. Consider the special needs of the conflicted affected populations. Gender-sensitive and inclusive provision of WASH services should be a priority area of intervention.
- **Promote meaningful engagement and participation of women, girls and people with disabilities in COVID-19 response and prevention decision-making.** Promote women's leadership at local and national levels, including within their own structures and managements. Create opportunities to ensure meaningful participation of people with disabilities.
- **Ensure the COVID-19 related information is accessible by and appropriate for all members of the communities,** including those with low literacy rates and the linguistic minorities. Consider the gender divide in technology and diversify the means of information-sharing. Localize the messaging, particularly in the areas with low literacy rates or linguistic diversity. Understand the main means of communication and deliver consistent information to the communities to prevent miscommunication.
- **Ensure food security and livelihood by urban and rural vulnerable groups.** The pandemic has directly impacted the food supply chains, and reductions in food consumption are being used as a coping mechanism. Ensure the access to food and nutrition by urban and rural vulnerable groups is crucial by distributing food to the those in immediate need, while considering different needs of the communities.
- **Ensure gender-based violence (GBV) risk mitigation in all sector responses.** Prioritize and/or continue providing lifesaving protection and GBV services that are adapted to the COVID-19 context. Identify the GBV risks by engaging the communities with non-traditional ways and incorporate measures to address those risks. Train the frontline staff in referral pathway and how to conduct safe GBV referrals.
- **Systemically collect sex, age and disability disaggregated data (SADD) for COVID-19** to understand and analyze direct and indirect impacts of COVID-19 on different groups to inform programming.

This brief summarizes the Iraq Rapid Gender Analysis, written by CARE International in Iraq in June 2020. The full RGA report can be accessed [here](#).