



*Rural  
Women's  
Assembly*

*We are the Guardians of Land,  
Life, Seeds and Love*

## **Rural Women's Assembly Update on COVID 19**

### **Build People's to People's solidarity**

This report highlights a summary of some of the key issues that have emerged from extensive consultations and brief reports from our RWA country chapters in Southern Africa. More than ten countries have contributed their perspectives of the situation in the region.

As we write, the region is in a state of general lockdown. In the past week many governments announced lockdowns. Schools, universities, many shops, factories and tourist attractions and activities are shut, only essential services are allowed to operate. Sadly, as elsewhere in the world, there is no regional response to the crisis which is what is so urgently required. It is clear that our regional governments are completely unprepared. There appears to be no gearing up nor have these governments begun to think what collective tasks, manufacturing of equipment, sharing of information and supportive services etc, is required.

Tanzania, as chairperson of SADC, has not shown any political leadership. Nor have we seen leadership from Africa Union. There are no regional resources allocated for dealing with this pandemic. Given the very challenging fiscal conditions, poverty and underdevelopment in the region, greater regionalism and regional approaches are required to deal with the pandemic. This is not the time for "for each its own."

Some of the main issues that we want to highlight in this update are the following:

#### **Inequality and Poverty:**

The RWA has highlighted the need for us to reflect on some of the blind spots or the ignored aspects of how COVID 19 and our governments' responses impact on our society and specifically, our poor communities. The RWA makes the point that the crisis does not have the same consequences for everyone. In fact RWA wants to remind everyone that while the coronavirus does not differentiate between rich and poor, it does have a bigger burden on women, poor communities and migrants. It is making the poverty, lack of food security, very

poor health facilities, poor housing conditions and over-crowding and stress that many communities already experience even worse.

The present measures such as the generalised lockdowns, physical distancing, closure of the informal sector certainly cannot easily be implemented in informal areas, overcrowded shacks and poor housing.

In South Africa, like in many parts of Southern Africa's poor areas, access to water, toilets health facilities are difficult. These challenges are particularly felt in rural areas. Here, in these remote regions, the problems are even more challenging as people have very limited access to information, health, public transport etc. Just how will children's needs for education be catered for?

Whilst we understand the need for many of our countries to bring in their defence force personnel to support the authorities in providing emergency services and ensuring compliance with necessary emergency measures, we are concerned about the militarization of this response given the histories that many of our people have at the hands of the police.

## **COVID 19**

Other than South Africa, many of the countries report a lack of testing and therefore under-reporting. So whilst it would appear that the figures in the region are low, this is mainly because it is in its early phase. Therefore at this moment the figures appear to be relatively low with the exception of South Africa.

### **Fragile Health services:**

- In most of the RWA country chapters members speak about the absolute fragility of the health services across the region. Many of the hospitals do not have adequate and sufficient stocks of PPE (Protective Equipment). In some countries such as Lesotho and Swaziland, there are no laboratories that can actually analyse tests (swaps done on citizens).
- Testing equipment is limited.
- The fragility of the health service cannot be seen outside out structural adjustment programme that has led to the near destruction of health services. Many African nurses and doctors are today working in hospitals across the world.
- We have seen greater privatisation of health services available only to those that can pay.

- Throughout the region, many health facilities have lost personal, capacity and resources.
- Very few countries in the region are spending adequate resources on health. In Zimbabwe, the health service was already on its knees prior to the pandemic.
- The pandemic clearly demonstrates the limits of the medical model and the importance of other health determinants even as we pour efforts into finding medical solutions.

### **Women and COVID 19:**

We recognise that not only is the existence of the virus impacting women differently, but our respective governments' responses and intervention to manage the pandemic are themselves impacting women and girl children more heavily and, for the majority of women in Southern Africa, who are poor, will be devastating.

Yesterday, the 7<sup>th</sup> day of the lockdown, South Africa police services said that there were already 87 000 reports of domestic violence. This is just the beginning.

- It is clear that women will bear the brunt of the pandemic's burden. The burden of care on poor women in many households was already high. Now, without income or very limited income, women are expected to mind, feed and care for children, the elderly and the men. They will be expected to provide food and ensure the "pandemic" stays outside the door, often very fragile doors to a shack, a room, a tent or a hut in the village. The care for those that do fall ill will fall on their shoulders.
- Women are mainly the community health workers, the nurses and heads of many households. In recent years, as the health services across the region collapsed, we saw the emergence of privately run nursing services. Nurse-aids paid for by medical aid schemes were contracted to care for the sick aged or those very ill patients in the own homes. The state hospitals passed this burden on care back on society.
- Women are the community health workers, many are not even paid but these women have worked tirelessly to support TB patients, support and administer drugs and solidarity to HIV-Aids patients, look after the dying and be frontline defenders of these who have are ill in our communities.
- Unpaid labour – many thousands women in the region work as domestic workers, child minders and chars- as the lockdown continues how will these women survive?

### **Food supply:**

Small scale farmers will be greatly impacted on and women make up the majority of small-scale farmers in our region. There appears no strategy on what is to be done to include the produce of small-scale producers in the supply chain. Local markets are closed. The formal markets controlled by the large, industrial food companies appear to be safe-guarded as essential services. Trucks carrying food from South Africa and elsewhere are allowed to continue their distribution. Yet there is no protection or any meaningful attempts to integrate small scale farmers. In South Africa, these farmers have to apply to the municipalities to even water their fields and tend to their livestock. For many in the region this is the planting season. How will they manage? Small-scale fishers in the region will face similar marginalisation.

Access to food is a real problem for many- whilst there may be food on the shelves, they will not have access to it. Already, before the lockdown many poor households experienced hunger, many children were malnourished. Now this burden is likely to increase.

### **Household Debt burden:**

In November 2019, during the RWA 10<sup>th</sup> Anniversary conference, women spoke about the growing household debt burden. This is an issue that is continuing to increase. RWA members across the region speak about this as an overwhelming problem. They say they are forced to borrow money for food. Food for the children's lunch boxes to school, food for daily household survival and also they borrow money to keep their gardens going.

### **Going forward**

In times of crisis, we require new imaginations based on solidarity not on markets. We need care to spread, not repression. We need to ensure that this crisis begins a process of addressing the gross inequities and discrimination against the poor, women and other marginalised groups in our region, begins to prioritise the needs of the poor and homeless, upends the dominant relations of production and puts their needs first. This is an opportunity to re-build weak local governance whilst strengthening inter-governmental and cross-sectoral coordination in our region. We ask our Southern Africa regional government and national governments to work with community based organisations and to use this opportunity to build collective organisation at community level to address this crisis.

We ask our governments to work with us, the Rural Women's Assembly, and the many other regional, community-based organisations during this very challenging time in order to build

solidarity in our response across Southern Africa, from local household level, in the furthest reaches of our rural areas to national and regional level.

3 April 2020