# Staking Our Claim:

## Resourcing For A Feminist Agenda

** Voices from the ground **

*South Asia Women Foundation India*

**Staking Our Claim: Resourcing For A Feminist Agenda**

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SAWF IN
South Asia Women Foundation India

South Asia Women Foundation India (SAWF IN) is the national women's fund of India and advances the rights and constitutional freedoms of women and gender non-binary people. SAWF IN is part of the global sisterhood of women's funds and feminist philanthropic movements.

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## Resourcing For A Feminist Agenda

✳ *Voices from the ground* ✳

*South Asia Women Foundation India*
*July 2021*

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# Abbreviations

| | |
|---|---|
| **ASHA** | Accredited Social Health Activist |
| **ANM** | Auxillary Nursing Midwives |
| **CLPR** | Centre for Law and Policy Research |
| **CSO** | Civil Society Organisation |
| **CSR** | Corporate Social Responsibility |
| **CoWIN** | Covid Vaccine Intelligence Network |
| **FCRA** | Foreign Contribution (Regulation) Act, 2010 |
| **IEC** | Information Education Communication |
| **IFPRI** | International Food Policy Research Institute |
| **IMPRI** | Impact and Policy Research Institute |
| **IWWAGE** | Initiative for What Works to Advance Women and Girls in the Economy |
| **LGBTQIA+** | Lesbian, Gay, Transgender, Bisexual, Queer, Intersex, Asexual, Agender |
| **MGNREGA** | Mahatma Gandhi National Rural Employment Guarantee Act, 2005 |
| **NCW** | National Commission for Women |
| **NGO** | Non-Governmental Organisation |
| **PDS** | Public Distribution System |
| **PMJDY** | Pradhan Mantri Jan Dhan Yojana |
| **PPE** | Personal Protective Equipment |
| **SAWF IN** | South Asia Women Foundation India |
| **SHG** | Self-help Group |
| **SEWA** | Self-Employed Women's Association |
| **SRHR** | Sexual and Reproductive Health and Rights |
| **WFA** | Women's Fund Asia |
| **YUVA** | Youth for Unity and Voluntary Action |

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# Chapter One:

# Overview

## 1.1 Background

The year 2020 will be remembered as one that witnessed an upheaval in human security and well-being as COVID-19 exacerbated an already impending economic crisis that had begun in the previous years [Gopinath et al. 2019]. While the pandemic and the ensuing lockdown exposed the country's most marginalised citizens to serious financial and physical precarity, it also had a clear and distinct gendered face, as women, girls and trans*[1] persons - especially from Dalit, Bahujan Samaj, Adivasi and other marginalised communities were disproportionately affected. Women's and trans* persons collectives, groups and organisations stepped in to address the multifarious crises generated by the pandemic with great courage and resilience, highlighting the power and value of social mobilisation, collective action and collaborative strategies.

As a women's fund that strongly believes in the leadership of women and trans* persons to craft the most relevant responses to crises that impact their lives, the South Asia Women Foundation India (SAWF IN), undertook a scoping study to highlight the emerging, gendered effects and needs within communities and among groups led by marginalised women and trans* persons.. The purpose of the study was to reiterate the need for resources to flow towards efforts led by women and trans* persons to enable them to claim voice, space and resources that strengthens a transformative feminist agenda. The scoping study consisted of a desk review carried out between November 2020 and May 2021 as well as field research covering 47 women and trans* persons led organisations, carried out between March and May 2021. The context in which SAWF IN conducted both the field research and desk review, was one of growing anxiety and apprehension. Just as everyone was coming to terms with the fallouts of the first wave, a devastating second wave set in and COVID cases began to rise exponentially.

All the women and trans* persons led groups that we reached out to were in the midst of conducting massive relief work including distributing food kits and medicines, raising awareness about COVID-19, offering transportation to those in need, offering psychosocial support, and enabling spaces for education and learning. Despite the challenges and difficulties in mobility, disruption and delay in planned project activities, shortage of funding, inability to physically meet community members, and navigating the gaping digital divide; women and trans* persons groups, disability rights groups and Dalit women's groups showed outstanding commitment to carry on their core work of gender transformative change. The resourcefulness and determination of the groups was reflected in the way some of them mobilised relief supplies for their communities during both, the lockdown and following periods. Natural disasters, in some states such as West Bengal and Assam compounded the challenges of relief work. Other groups reached out to individual and institutional donors, raised funds online, and pulled in resources to support their communities. This collective agentic stance taken by many women and trans* persons groups, shows their independence in procuring and managing funds, their enhanced capability during a crisis, and also a deep commitment to their ideology, their organisation, and most importantly, to their communities.

During the field research, while voices of the groups did reflect deep concern, exhaustion, fear and anxiety, they also expressed determination and a collective will to emerge from this crisis. The relentless collective labour of these groups in continuing their core gender equality and movement building work through times of crisis, helped build hope and confidence in these dark times. Our desk review and field research were considerably strengthened by their resilience and relentless focus on finding solutions.

The groups participating in the field study rated themselves on their work during the past year on a scale of 0-10. Of the 29 groups that rated

1 For SAWF IN, trans* refers to a wide range of gender identities. This umbrella term includes but is not restricted to agender, genderfluid and gender non-conforming identities, and this report will use it to convey this ideological stance.

Of the 29 groups that rated themselves, the average score was 7.4 indicating a good level of satisfaction and pride in the work they had managed to do despite all the adversities.

A group from Bihar rated itself nine out of 10 and shared, "We were able to extend support to the best of our potential/capabilities." One of the groups working in Madhya Pradesh said, "On some days, it feels like a 10, on others, it feels like a two. Seven kind of averages it out". However, many groups shared their concerns about being able to continue their ongoing work along with pandemic related relief. They expressed the need to reflect on their core organisational and awareness raising work once the crisis was over.

The voices of the groups resonate strongly with SAWF IN's philosophy and ideological commitment as a women's fund—that of supporting the urgent need for more demand-driven and locally designed, led and managed funding to women and trans* persons groups; facilitating the flow of resources to areas and constituencies that are most in need of flexible, sustained support; investing in addressing strategic gender needs that can shift oppressive and unequal power structures that keep women, trans* persons and other vulnerable groups in subordinate social and economic positions; and supporting collective mobilisation, coalitions, alliances, and movements that are slowly but consistently working towards social justice.

SAWF IN's own research team conducted the field research by reaching out to groups and collectives directly. Through this research process SAWF IN hopes that more approachable and interactive spaces for honest and genuine conversations continue to be co-created, which might pave the way for strong meaningful partnerships and alliances with groups and collectives. SAWF IN's report ***Staking Our Claim: Resourcing For A Feminist Agenda***, hopes to convey the voices of groups, and collectives and generate urgent discussions around the need for feminist resourcing and feminist agenda setting, particularly in these dire times.

## 1.2 Introduction

As COVID-19 cases began to surge in India, the country was subjected to one of the world's strictest lockdowns, which brought the national economy to a near standstill and exposed its most marginalised citizens to serious financial and physical precarity. The devastating effects of this lockdown, which was announced on 24 March 2020 (and which continued in phases until 31 May 2020) on the country's economy and its most vulnerable groups are still being comprehended. To alleviate the economic distress that arose during and after the lockdown, the government introduced a national economic relief package worth INR 1.7 lakh crore (INR 1.7 billion) under the Pradhan Mantri Garib Kalyan Yojana[2], with significant focus on women as beneficiaries [The Times of India, 2020]. Its benefits included free and expanded food rations, loan extensions, free gas cylinders, and cash transfers of INR 500 per month for three months into 20.4 crore (204 million) women-held bank accounts opened as part of the government's Pradhan Mantri Jan Dhan Yojana (PMJDY) scheme [Dhawan et al., 2020; Pande et al., 2020]. Despite these efforts, many women fell through the cracks of emergency relief measures accruing from intersecting vulnerabilities based on gender, caste, class, and disability. Many trans* persons fell out of food relief measures as many did not have the required identity documents, and were excluded entirely from the PMJDY cash entitlement schemes [Youth for Unity and Voluntary Action (YUVA), 2020 and Centre for Law and Policy Research (CLPR) report by Sahai et al., 2020]. An inclusion assessment survey conducted by the National Campaign on Dalit Human Rights (NCDHR) among 25000 Scheduled Caste and Scheduled Tribes households in 14 states, revealed that these relief measures were highly uneven in terms of reach, awareness and realisation of entitlements among those enrolled [NCDHR, 2021]. According to the study by National Centre for Promotion of Employment for Disabled People [NCPEDP, 2020], in many states disability pensions were either not released or were delayed, and were availed only by those with disability certificates.

2 Under this scheme, five kilograms of free rice or wheat, along with one kilogram of chana dal, was to be provided to 80 crore (800 million) households per month for three months since the imposition of the lockdown in March 2020. Additionally, free gas cylinders would be provided to 8 crore (80 million) poor families. A total of 20.4 crore (204 million) women Pradhan Mantri Jan Dhan Yojana (PMJDY) account holders were to be paid INR 500 per month for three months, and INR 1000 would be paid to three crore (30 million) elderly widows and people in the "Divyang" category (the term "Divyang" has been used to refer to persons with disabilities by the Department of Empowerment of Persons with Disabilities (Divyangjan), Government of India) for three months. This scheme was extended to November 2020. Employment opportunities were also to be provided. Under the Pradhan Mantri Kisan Yojana (PMKY), INR 2000 due to be paid in 2020-21 was to be paid to 8.7 crore (87 million) farmers, with the first instalment to be paid in April 2020. Mahatma Gandhi National Rural Employment Guarantee Act, 2005 (MGNREGA) scheme wages would be increased by INR 20 and would benefit 13.4 crore (134 million) families [The Times of India 2020].

Despite this and in the face of a pandemic and lockdown(s), the critical work done by women's and trans* persons rights groups and collectives—in terms of distributing relief, conveying urgent information, generating awareness, and providing solace and succour to communities impoverished by the devastating waves of the COVID-19 pandemic—cannot be overstated. Many groups continued their core work around gender equality, addition to crisis response measures. These groups are an invaluable bridge between the communities they serve and the government, Civil Society Organisations (CSOs), Non-Governmental Organisations (NGOs), and grant-making organisations. They have worked continuously in various capacities at significant risk of exposure, with low pay or often on volunteer basis, and with little funding and few resources.

According to the Initiative for What Works to Advance Women and Girls in the Economy (IWWAGE) study [Tankha, 2020] cited in the desk review, 47.4 percent of women had to depend on NGO and community support for their food needs and 30 percent on government rations. This is indicative of the significant reliance that communities place on collectives and groups for food security. Many members of the SHGs reported economic losses, increased burden of work within the home, and rising cases of domestic abuse. At the same time, these groups have faced severe challenges in terms of funding, remuneration, and health risks while supporting their communities during this crisis.

A desk review[3] carried out by SAWF IN, a national women's fund, between November 2020 and June 2021 shows that the pandemic has had a disproportionate impact on women, trans* persons, and girls. Based on existing research on the lockdown and the pandemic, the review found that women working in the informal sector, migrant workers, daily wage earners, and trans* persons have suffered severe economic and other related consequences. As per the latest study by Deshpande [2021], women's economically productive work is seriously under-estimated by most data measures, as it does not account for home based work and irregular, short-term paid work. Drawing from the Centre for Monitoring Indian Economy dataset, Deshpande [2021] explains that the continuously declining women's labour force participation rate in India can be elucidated by the structural aspects of employment that deny women steady, regular, and well-paid work, thus rendering them insecure, forcing them to repeatedly exit and re-enter the labour market. That the primary reasons for this fragmented participation in the labour force by women may not be due to child birth, domestic care work and conservative cultural norms, but due to supply side factors. These structural, supply side factors were exacerbated during the pandemic, making labour markets even more exclusive, forcing women to exit in large numbers, making it even more challenging for them to re-enter paid work. A study by Basole et. al. [2021] at Azim Premji University based on several datasets[4], revealed that the pandemic resulted in increased informality and a significant reduction in earnings which impacted vulnerable populations disproportionately.

The SAWF IN desk review also revealed the enormously significant work done by women and trans* persons led groups, disability rights groups, Dalit and Adivasi groups, and rights based organisations working with children and youth during and after the lockdown. Their contributions included raising awareness about COVID-19, providing critical information about government relief measures, providing door-to-door delivery to vulnerable groups (such as persons with disabilities and elderly women), enabling access to menstrual products and medication, and offering telephonic counselling services to those in need. Overall, the role of civil society groups, self-help groups (SHGs), and collectives in raising awareness and serving as a bridge between the state and the community during this health crisis emerged as critical. The desk review also highlighted the critical areas towards which resources should flow so as to ensure that lives of women and trans* persons can be transformed fundamentally. These include:

- Interventions that enable them to own and control economic, political, and digital resources
- Rebuilding livelihoods and economic dignity

3 The desk research included selected studies within the first year following lockdown, that is April 2020 to March 2021. Desk review parameters are outlined in Chapter Two.

4 Consumer Pyramids Household Survey from the Centre for Monitoring the Indian Economy, the Azim Premji University COVID-19 Livelihoods Phone Survey, the India Working Survey, and several COVID impact surveys studies by CSOs.

- Building leadership and supporting approaches that place decision making of the change agenda in the hands of women and trans* persons
- Developing collaborative and gendered crisis response measures to fight the pandemic
- Rebuilding local and transregional knowledge systems between women's and trans* persons collectives to share more ways of dealing with the gendered face of the crisis.

Simultaneously, SAWF IN conducted a field research to understand the direct experiences, challenges, and needs of groups and collectives in the context of COVID-19 and the lockdown. A team of two researchers conducted interviews via phone or online with 47 women and trans* persons led rights-based groups and organisations across 22 states and three union territories during the months of April and May 2021. The aim of the field research was to gain an understanding of the work, challenges, needs, and demands of women's and trans* persons rights groups during this unprecedented health crisis. The field research highlighted significant factors that need resourcing, including:

- Building sustainable livelihoods, economic and food security in urban and rural settings
- Advancing technology, enhancing control over digital resources, and bridging physical movement building work with digital efforts
- Strengthening networks and coalitions, intensifying women's and trans* persons mobilisation, solidarity building and consciousness raising work towards gender transformative change
- Building leadership and institutional capacities in women and trans* persons led groups to reinforce collective vision and enhance resilience

This report synthesises the insights from the desk review and field research to understand the connections, overlaps, as well as differences between the findings. It pieces together the powerful work that the groups are doing on the ground, at great risk to their health, and builds a case for meaningful resource mobilisation that supports gender justice programmes and interventions.

## 1.3 Key findings of the desk and field research

- The report also highlights areas of priority where resources need to flow particularly in the context of COVID-19. These include livelihood, financial inclusion, food security, gender justice, emotional well-being and control over digital resources.

- In addition to physical and economic trauma, the lockdown(s) posed significant challenges to longstanding bonds and social capital built among women and other vulnerable groups through painstaking collective efforts. It also affected the capacity of groups to continue social mobilisation and conduct some of their core work such as counselling survivors of violence and building awareness on gender equality, mental health, and sexual and reproductive health. Overall, this points to the need for urgent long-term investments in strengthening collective mobilisation, alliance building, and local collective efforts and movements that are consistently working towards social justice.

- The lockdown and the pandemic exposed how the whittling support[5] to rights-based work, both by the state and the philanthropic community, resulted in lack of accountability mechanisms and structures to address the pandemic. Despite these challenges, the groups continued nurturing solidarity networks and social mobilisation over the years. Given the miniscule resources flowing into movement-building work, the processes and principles of funding need deep examination.

- The voices of women and trans* persons led groups highlights the need for feminist agenda setting through direct engagement of groups and collectives with resource allocation processes. These groups need to have a more direct role in the demand and management of resources as they have been conducting work on gender equality and justice among their communities for decades. Overall, the desk review and the field research emphasize the importance of more transparent and accountable models of resourcing.

5 According to the Association for Women in Development (AWID) 2021 report, despite global funding commitment to gender equality, only 0.42 per cent of total foundation grants and 0.13 per cent of total Official Development Assistance during 2017-18 reached women's rights organisations and institutions directly. [Dolker, 2021: 17].

- The desk review and field research highlight the value of small-budget organisations[6] and even unregistered groups at the grassroots that build and sustain gender justice movements [Srivastava, 2019]. They urge resource organisations to engage in more dialogue with women's and trans* persons collectives and include more vulnerable groups in conversations around resource allocation. Through this process, more innovative, collaborative, and accountable models of resourcing women's and trans* persons work aimed at gender transformative change[7] can emerge.

The study also brings forth the critical need for feminist agenda setting by groups and collectives which prioritises their needs. It highlights the need for feminist philanthropy, which ensures that resources flow directly into the hands of women and trans* persons led grassroots groups.

6 Organisations with an operating budget below INR one crore (10 million) have been considered as small size and those with an operating budget between INR one crore and INR 10 crores (10 to 100 million) have been considered as mid-size.

7 Gender transformative change challenges and questions oppressive gender relations, norms and practices by raising consciousness about structural inequality, oppression and subordination.

***Box 1.1:***
***What does Feminist Philanthropy mean?***

- Supporting and advancing the rights of vulnerable groups and wider gender justice movements
- Advocating for better representation of collectives and groups, including the smaller, underresourced groups who are not able to access national and global resource platforms
- Facilitating groups and collectives to control and manage resources and strengthen movement-building work
- Emphasising accountability, flexibility, and long-term resourcing of rights-based work

***What does Feminist Agenda mean?***

- Collectively asserting local mandates and priorities to work towards transformative and sustainable change
- Supporting movement building and political participation for rights-based work
- Placing value on women's and trans* persons leadership and decision making
- Supporting and sensitising local governance institutions and actors towards gender-inclusive budgeting and planning
- Networking with other groups who are doing similar or even different work; building contacts; and sharing and building knowledge, experiences, and expertise

Recognising and building further the long-term work done by women's and trans* persons groups

Based on Srivastava [2019], Women's Fund Asia (WFA) [n.d.], Gupta [2000], and drawn from the recommendations of this field research (See section 8.2 in Chapter Eight).

## Chapter Two:

# Methodology

This report consolidates insights from the field research conducted with 47 women's and trans* persons groups and collectives and on a desk review aimed at understanding the disproportionate impact of the pandemic on women, trans* persons, and girls. The field research was conducted during the months of April 2021 to May 2021 and the timeline of the desk research was from November 2020 to June 2021. This report synthesises these primary and secondary research findings to understand the needs, challenges, and demands of groups working on the ground and build a case for meaningful resource mobilisation. The research has employed a feminist and intersectional approach to ensure respect and sensitivity towards the groups and collectives interviewed during this difficult time.

## 2.1 Objectives of the desk review and field research

i. To evolve a feminist agenda for social justice that captures the aspirations, voices and needs of women's rights and trans* persons rights groups working at the grassroots, especially in light of the challenges posed by COVID-19.

ii. To bring attention to thematic areas and forms of institutional support needed to nurture groups and collectives led by women and trans* persons.

iii. To build a case for indigenous and other resource flows for much-needed social-justice work and movement building led by women and trans* persons, especially in the context of COVID-19.

iv. To build evidence for conducting advocacy aimed at building and managing local resources

v. To substantiate the value of promoting leadership of women's and trans* persons groups in conceptualising, designing, and executing programmatic efforts.

vi. To amplify the voice of smaller budget women's and trans* persons rights organisations to influence the funding discourse.

To this end, the desk review and field research explored the following domains of inquiry:

i. What are the gendered effects of COVID-19?

ii. How has the COVID-19 pandemic, particularly the hurriedly imposed nation-wide lockdown, affected women and trans* persons groups and collectives and their work? How has it affected women and trans* persons?

iii. What are the kind of gendered responses undertaken by groups and collectives to COVID-19?

iv. What are the emerging institutional needs, specifically of these groups, in terms of resources and setting agendas for their collective work?

v. What resource challenges prevent small-budget groups and/or unregistered groups from engaging more effectively in social-justice work?

vi. What kind of programming will be most effective in promoting women's and trans* persons rights?

## 2.2 Approach

The approach to the research was informed by the following key feminist principles:

- Privileging the voice of vulnerable populations
- Ensuring self-reflexivity among researchers (that is, being aware of one's privilege, biases, and ideological positioning)
- Co-creating understanding that collectively produces and shares knowledge

Regular discussions were held among the teams heading the desk review and field research to understand connections, overlaps, and contradictions/incongruences between what we were hearing from the ground and what the desk review was highlighting.

### *2.2.1 Sample covered by the desk review and field research*

#### *i. Desk review:*

The desk review identified 39 research studies, policy briefs, and academic papers—out of a larger pool of 115 papers, media reports, and research studies—to draw key insights on the gendered effects of COVID-19. The documents reviewed a range of intersectional themes affecting women and trans* persons across rural and urban areas. Most of the studies and rapid assessments covered in the desk review were conducted in the immediate aftermath of the lockdown. Reports and articles were found online using these search terms: impact of COVID on women; COVID-19 and sex workers in India; gendered impact of COVID-19; lockdown; pandemic impact; shadow pandemic; COVID-19 impact on LGBTQ community; relief aid during COVID-19; mental health; social protection schemes; women with disabilities. More articles and reports surfaced through the references. Thus, a snowball method was used to arrive at a repository of relevant studies conducted within the first year following lockdown, that is April 2020 to March 2021.

The selection of studies was based on the wide-ranging effects of the lockdown and pandemic—such as food insecurity, income insecurity, inequitable access to health and other public services, physical and sexual violence, and mental trauma—on the lives of poor women, trans* persons, persons with disability, and children. We ensured that studies reflecting a diversity of intersectional themes and groups were included, while repetitive studies were excluded to make the desk review relevant and pragmatic.

#### *ii. Field research:*

The field research study was conducted during the months of April and May 2021, covering 41 women and six trans* persons led groups and organisations (47 groups in total). The sample covered included mid- to small-budget[8] and/or unregistered groups and organisations, across 22 states and three union territories (state-wise list included in Annexure II). Of the 47 groups in the field research, 26 work in rural areas, 10 work in urban and suburban areas, and the remaining 11 groups work in both rural and urban areas.

Participants for the field research were identified through SAWF IN's own knowledge of the groups that have consistently been working in the sphere of women's and trans* persons rights as well as through referrals.

"I too felt good that you asked these questions. I feel sometimes that we should [get an opportunity to] share about our work somewhere."

***– Member of an Assam-based women's rights group***

"I am happy to get this opportunity to discuss [all the issues] with you. I am lucky, so thank you, truly."

***– Member of an Odisha-based women's rights group***

8 Organisations with an operating budget below INR one crore (10 million) have been considered as small size and those with an operating budget between INR one crore and INR 10 crores (10 to 100 million) have been considered as mid-size.

## Figure 1: Region-wise distribution of groups and collectives (n = 47)

*West (4)*
***States***
- Gujarat (1)
- Maharashtra (2)
- Rajasthan (1)

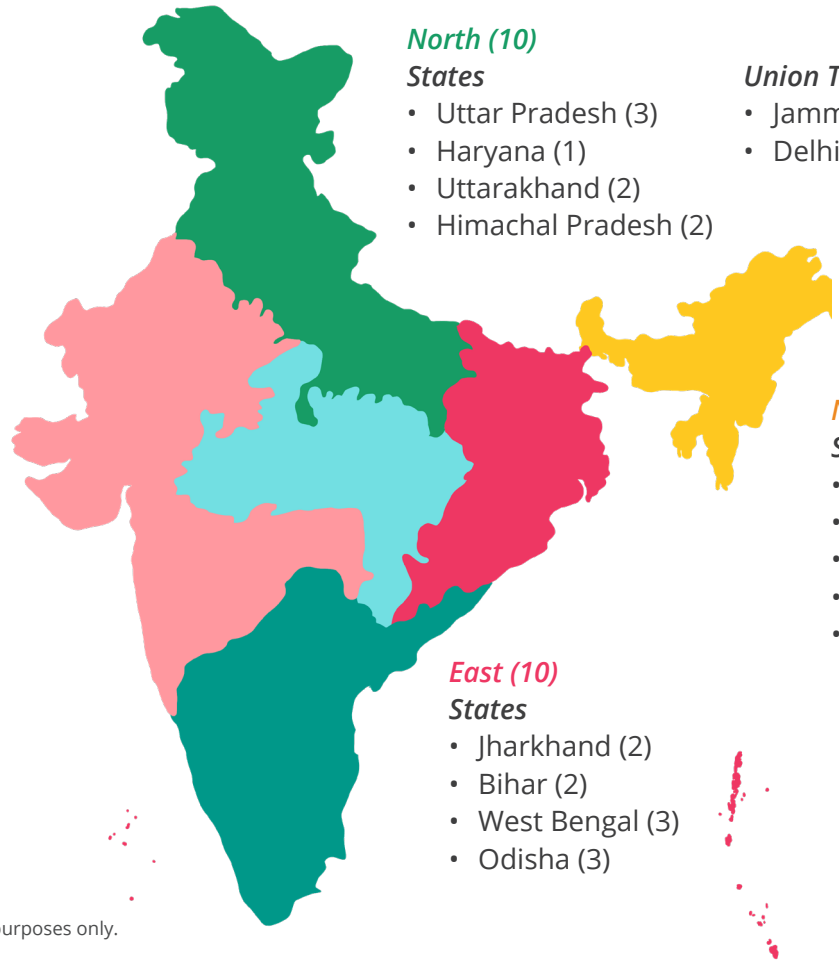
*Central (5)*
***States***
- Madhya Pradesh (2)
- Chhattisgarh (3)

*South (12)*
***States***
- Telangana (2)
- Tamil Nadu (4)
- Karnataka (1)
- Kerala (3)

***Union Territories***
- Pondicherry (2)

*North (10)*
***States***
- Uttar Pradesh (3)
- Haryana (1)
- Uttarakhand (2)
- Himachal Pradesh (2)

***Union Territories***
- Jammu & Kashmir (1)
- Delhi (1)



*North East (6)*
***States***
- Manipur (1)
- Nagaland (1)
- Assam (2)
- Tripura (1)
- Meghalaya (1)

*East (10)*
***States***
- Jharkhand (2)
- Bihar (2)
- West Bengal (3)
- Odisha (3)

*The map is for representational purposes only.

An open-ended interview guide (Annexure I) was used for the interviews held over phone or online. The interviews were recorded with prior consent and stored securely. Interviews were held in English, Hindi, or the language most convenient for the participant (such as Tamil, Malayalam, and Bengali). The interviews took anywhere from 30 minutes to 1.5 hours. The participants were chief functionaries and founders of the organisations, senior programme staff members, senior women's rights activists, and trans* activists / leaders.

The focus of the conversations was the lived experiences of the organisations on the gendered effects of COVID-19 during its different life cycles[9] and the emerging needs.

### 2.2.2 Approach considerations

During the pilot interviews for the field research conducted in the first week of April 2021, the news about the second wave had begun appearing in the media and speculations about an imminent lockdown had begun. The interview guide was altered accordingly to accommodate questions on the changing context. The situation worsened from mid-April until the end of May 2021, as the second wave peaked resulting in an exponential surge in COVID-19 cases [Business Today, 2021].

The leaders of the women and trans* persons groups we spoke to were grappling with a multitude of factors, such as concerns about their own health, health of family members, hospitalisations in the family, and mental stress and trauma. It is to the credit of the groups that they made the effort to take time out of their

9 The first timeline was from March 2020 to July 2020, that is the period in which the nationwide lockdown was imposed to curb the spread of the virus; the second timeline portrays the phase from August 2020 to March 2021, when the economy was gradually unlocking; the short yet devastating second wave is captured in the third timeline from April 2021 to May 2021.

demanding schedules and participated in the interviews. One of the participants from Bihar had tested positive for COVID-19, along with other family members, yet she participated in the interview.

The groups from Jammu and Kashmir, and the North Eastern states of Nagaland and Meghalaya were challenged by the lack of network connectivity. There were numerous disconnections during the interviews, not to mention frequent rescheduling. One of the groups preferred to send their responses by email rather than participate in a call. This was also the case with the groups from Haryana, where communication was disrupted due to rain and heavy storms. The state of Sikkim could not be covered due to problems with network reception. Interviews in Assam were conducted around the day the earthquake[10] hit the state.

## 2.3 Thematic areas of work by the groups

A thematic representation of the areas in which the groups are working, covered by the field research, is outlined in the following table:

### Table 1: Thematic areas addressed by participant groups

| Main thematic area | Communities reached |
|---|---|
| ***Women's rights work, which includes:***<br><br>• Economic justice<br>• Livelihood generation<br>• Social protection, right to land, and legal rights<br>• Right to education<br>• Women's leadership and role in governance<br>• Right to safe health care, including reproductive and sexual health rights<br>• Assertion of rights of persons with disability<br>• Resistance against violence based on caste and ethnicity | • Women bearing intersectional vulnerabilities arising from caste, class, ethnicity, religion, and occupation (Dalit and Adivasi women, sex workers, daily wage earners, Muslim women, poor single women, etc.)<br>• Adolescent girls<br>• Women and children with disabilities |
| ***Work on rights of gender non-conforming persons and sexual minorities, which includes:***<br><br>• Reducing stigma<br>• Fighting discrimination<br>• Generation of alternative livelihoods for trans* persons<br>• Sensitisation about the realities and needs of Lesbian, Gay, Transgender, Bisexual, Queer, Intersex, Asexual, Agender, plus (LGBTQIA+) persons<br>• Right to sexual and reproductive health<br>• Self-care and mental health and well-being<br>• Services for tackling substance abuse<br>• Improving access to justice for trans* persons | • Persons of gender non-conforming identities and sexual minorities |

10 An earthquake of magnitude 6.0 hit Assam on 28 April 2021. The impact posed damage to civilian and commercial properties and vehicles [Nath, 2021].

## Chapter Three:

# Analysis Framework

The research findings in this report are organized along two frames (a) Effects, both immediate and long terms, and (b) Needs, that emerged among vulnerable communities during and soon after the lockdown.

The first frame, that of effects, is a temporal frame and is drawn from Bina Agarwal's 2021 research, that explores gendered effects of the pandemic, both immediate and visible effects as well as longer term, sequential effects which unpanned during the unlocking phase.

The second frame, that of needs, examines the varying qualitative dimensions of gendered needs and interests emerging during pandemic. This frame is drawn from Maxine Molyneux's (2003) and Caroline Moser's (1989) still relevant work on practical gender needs and strategic gender needs.

## A. Understanding effects:

- ***Immediate and visible effects*** of the pandemic include—poor nutrition, financial insecurity, loss of jobs and livelihoods, distress migration, and police violence—which were particularly brutal on vulnerable populations, especially women and trans* persons. This analytical position speaks to the first phase of the pandemic-induced lockdown.

- ***Hidden and indirect effects*** may be conceptualised as longer term, sequential implications on women and vulnerable groups [Agarwal, 2021a, 2021b] and include consequences such as increasing the burden on women's care work and domestic labour within the home and paid work outside the home; inability of many women to return to paid work; loss of access to education for young girls, often resulting in early marriage; and reduction in women's assets (as those are the ones that are mortgaged or sold first in a crisis) [Agarwal, 2021a, 2021b]. This analytical position speaks to period of the easing of the lockdowns and gradual unlocking of the economy.

## B. Deciphering needs:

- ***Practical needs of women and trans* persons*** include basic food security; restitution of jobs and livelihood opportunities; skill building; and ensuring access to education, social security, and health services.

- ***Strategic needs and interests of groups*** [Moser, 1989; Molyneux, 2003] include freedom from violence and discrimination; equal entitlements for all; and the need to collect, congregate, assert, protest, and participate, both socially and politically.

This framework of immediate and long-term effects, and practical and strategic gender needs, helped comprehend the multidimensional impact of the pandemic on vulnerable populations, as well as highlighted their emerging intersectional needs.

Chapter Four:

# Gendered Effects and Needs From The First Wave and Lockdown

The immediate effects of India's stringent lockdown in March 2020 were devastating for the country's urban poor as well as migrant workers and their families. According to Agarwal [2021b], the sudden lockdown left an estimated 6 crore (60 million) interstate migrant workers (20 percent being women) stranded and food insecure. The mismanagement and lack of foresight on the part of the government to assure safety to migrant workers resulted in thousands of migrants—including women—crossing state borders on foot.

Even though the government relief measures focussed on meeting practical needs and ameliorating visible effects during the lockdown, they were not available equally to all women and definitely not to trans* persons communities. Many could not access the benefits as they were already on the margins and their circumstances pushed them further to the fringes.

The gaps in institutional responses were increasingly addressed by local and collective efforts of Self-Help Groups (SHGs), women's and trans* persons organisations and collectives who continued their efforts under extremely difficult circumstances such as restrictions on mobility, the inability to hold physical meetings, lack of digital literacy and/or poor network connectivity as well as paucity of funds and resources. A group, for example, working with tribal and rural women in Chhattisgarh coordinated with the district administration to help returning migrant labourers leave the cities and go back to their homes in far-off, rural areas. They also arranged quarantine facilities for migrant workers in their source villages. A group working on rights of Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) and queer persons in the state of Manipur advocated with the local administration for separate quarantine spaces for trans* persons, groups working on women's rights in the states of Chhattisgarh, Odisha and Nagaland from our field research advocated for adequate food distribution for pregnant women and for ensuring separate sanitation facilities for women.

Our field research highlighted several ways in which women and trans* persons rights groups were active through all phases of the pandemic, distributing relief supplies, such as food kits and medicines, raising awareness about COVID-19, offering transportation to those in need, offering psychosocial support, and enabling spaces for education and learning. The desk review also highlight the significant contribution of SHGs, women's and trans* persons rights groups, disability rights groups, and child rights groups during and after the lockdown. [Mullick Alkazi et al., 2020; Rising Flame and Sightsavers, 2020; Ministry of Rural Development, Government of India, 2020; Tankha, 2020].

## 4.1 Immediate and visible effects of the lockdown

The most visible and apparent effects of the lockdown reported by the participants of the field research are highlighted in this section.

### *4.1.1 Loss of livelihood:*

Practically all groups in the field research study reported job loss and income insecurity as an overwhelming visible impact of the lockdown. The gendered effects were obvious, with women suffering disproportionately. Agarwal [2021a] notes that the loss of jobs globally has been the most visible effect of the pandemic. However, the gendered and intersectional dimensions are yet to be deeply studied. For instance, a large proportion of workers in India are in the informal labour market—more women (90 percent) than men (86 percent).

Additionally, more women occupy the lower earning rungs of both rural and urban labour markets. More women are likely to lose their jobs and less likely to return or be hired back due to various factors [ibid.]. According to the field research findings, domestic workers in

due to various factors [ibid.]. According to the field research findings, domestic workers in urban areas suffered enormously, with many losing jobs and many having to suffer an abrupt end to their employment due to the lockdown. Based on an analysis of the employment status of 37000 individuals before and after the lockdown, Deshpande [2020] found that though more men lost jobs in absolute numbers during the lockdown, women were 23 percentage points less likely to find employment after the lockdown. This study also found that Scheduled Caste groups were more adversely affected.

### 4.1.2 Income insecurity and wiping out of savings:

According to the groups interviewed in the field research, households were forced to dip deep into their savings to feed their families. Many groups reported that several households spent their savings to arrange for transport and bring back migrant workers stranded in urban centres. Many households descended deep into debt.

### 4.1.3 Increase in debts:

Due to sources of income drying up, families were forced to take loans from local moneylenders at high interest rates and were unable to pay them back until they resumed work. Some of the participants in the field research reported that women daily wage earners, women street vendors, and transgender persons whose livelihood depend on access to public spaces and streets were left with no means to survive during the lockdown. Shopkeepers who would normally help trans* persons stopped extending assistance during the lockdown. Therefore, they were unable to repay the loans they had taken to pay rent or meet daily food expenses. Moneylenders were also reluctant to lend money as they feared that the loans would remain unpaid.

### 4.1.4 Brunt of exacerbated food insecurity borne by women:

Multiple studies that reveal food insecurity worsened during the lockdown, pushing vulnerable groups further into food and nutritional insecurity CSO [2020] study and IFPRI-SEWA Study cited by Agarwal [2021a, 139], Tankha [2020], Kesar et. al.

***Box 4.1:***

***Natural calamities, riots and political tensions multiplying the impact of COVID-19***

***Natural disasters in West Bengal and Assam***

In the states of West Bengal and Assam, natural calamities during the lockdown created a dual impact on the lives and livelihoods of communities. While they were in the middle of an economic crisis, Cyclone Amphan in West Bengal and floods in Assam wreaked havoc and left behind a trail of devastation. Groups that were working on COVID-19 relief had to now also undertake disaster relief work.

***Communal riots in Delhi and political tensions in Jammu and Kashmir***

Communal riots broke out in February 2020 over the amendment of the Citizenship Amendment Act, 2019. While the riots lasted for four days, they were soon followed by the lockdown. Organisations working in riot relief had to immediately attend to the crisis created by the lockdown.

Political tensions increased in the northern state of Jammu and Kashmir as its special constitutional status had been changed overnight in October 2019. Political leaders had been put under house arrest. Six months later, the pandemic and lockdown ensued. Groups working in Jammu and Kashmir shared how the administrative changes affected operation of non-profits amid the lockdown.

[2020] study and Women in Leadership Training Centre, Women in Governance, North-East Network, Action for Inclusion and Empowerment Trust, Kokrajhar-Chirang Jila Sanmilita Mahila Samiti [2020]. A study by YUVA [2021] revealed that many families had to go without milk and eggs, which particularly affected children, women and gender nonconforming persons, especially those who were pregnant and lactating. A recent study by Jean Drèze and Anmol Somanchi states, "There is overwhelming evidence that the national lockdown of April-May 2020 was associated with a tremendous food crisis." [2021, p. 8]

11 From a national-level panel data from Centre for Monitoring Indian Economy Consumer's Pyramids Household Survey database.

Early results from the National Family Health Survey Round 5 reveal that most indicators of nutrition status, particularly of pregnant and nonpregnant women and of children, were already in a state of deterioration [Sinha, 2020]. This was worsened by the lockdown. An organisation in Tamil Nadu working on women's leadership building reported that the immediate effect of the lockdown was reduced food consumption by women. Participants from the field research reported that prior to the lockdown, many children were able to access one meal in the day through the Mid-Day Meal Scheme at schools, which ceased with the closure of schools. Although schools made provisions for take-home rations for children in some areas, these were only sufficient to cover a few days or weeks of their requirement.

A study conducted by a collaboration of CSOs [PRADAN et al., 2020] across 12 states reported that over 60 percent of households with returned migrants reduced the number of items per meal and 50 percent reduced the number of meals.

In a survey by the International Food Policy Research Institute (IFPRI) and the Self Employed Women's Association (SEWA) [Agarwal, 2021a; IFPRI & SEWA, 2020] of 627 SEWA women in June 2020, 40 percent of respondents reported eating less than needed, and 12 percent reported going hungry. A study by Limaye et al. [2020] covering 5000 households across 12 states revealed that almost 80 percent of surveyed households were eating less than before and pointed out that this was bound to affect women most. Early findings from rural Chhattisgarh in the IWWAGE study conducted by Tankha [2020] revealed that 21 percent of women respondents were worried about food running out and 12 percent reported eating less than usual. According to Women in Leadership Training Centre et al. [2020], only 2.08 percent of women respondents said they received ration benefits whereas over 80 percent of women reported food shortage. Despite the wide reach of the Public Distribution System (PDS), 16 percent of households could not access food relief.

The study by Drèze and Somanchi [2021]—based on a compilation of multiple food surveys by Kesar et al. [2020]—pointed out that income reduction and food insecurity was most severe during the lockdown but continued throughout 2020. During the lockdown, 77 percent of households reported eating less, and this number reduced to just 60 percent after the lockdown in October 2020. Migrant worker households were also severely affected in terms of food insecurity.

According to the participants in SAWF IN's field research, the practice of women eating last and least became even more drastic during the lockdown-induced food scarcity. They also reported that the inability to ensure adequate nutrition for their children was a cause of considerable mental stress among women as they are perceived as being responsible for their children's nutrition.

The findings of the field study revealed some tragic incidents. A Karnataka-based organisation reported that three community members died of hunger in the first week of the lockdown. In this context of prolonged food insecurity, they contacted their funder to reallocate the budget to make food provisions for the poor in the community although that it was not their focus area.

***Box 4.2:***

***Women's and trans* persons groups provided much needed relief in the area of food and other relief services***

- Almost all the participants interviewed in the field research engaged in relief work during the initial weeks of the lockdown in 2020. They led food drives; distributed ration, medical, and sanitation kits; facilitated cash transfers; and distributed sanitary napkins, masks, and other essentials. While some may not have had the funding support to organise relief materials, they reached out to individual and institutional donors and pulled in resources to support the communities they were working with.

- A Karnataka-based women's rights group distributed food kits, masks, and sanitisers to 7000 families and maintained a mental health desk for the community. They also supported migrants from urban areas with food and arranged for shelter.

- A Maharashtra-based group working with trans* persons, sex workers, and women street vendors reported severe impact on food consumption. Sex workers were surviving only on the ***khichdi*** (a traditional Indian pot meal made with rice and lentils that was served in ration relief) that came from local NGOs with no savings to fall back on and no other source of income.

- Many women's rights and trans* persons led groups worked at great risk to ensure that food relief reached the most vulnerable communities. A Bihar-based group worked towards fulfilling the nutritional needs of women by distributing protein-dense food items such as chana, jaggery, and dal.

### 4.1.5 Women engaged in farming fared better than those engaged in other finance-generating activities:

According to the field research, with agricultural produce being an essential commodity, farmer groups were able to sell their produce to a large extent in the local markets although access to these markets was disrupted during the lockdown. Farm produce that had to be transported to other districts or states for sales, however, suffered significantly due to the lockdown. Many women engaged in handicraft and handloom work were unable to sell their products at neighbouring markets. The desk review shows that though the pandemic and the lockdown further disrupted access to markets, small scale businesses and farms recovered after the lockdown and proved to be more resilient in times of crisis.

### 4.1.6 Reduced access to health services:

Our field research shows that the health effects on women and trans* persons were particularly dire. Groups reported restrictions on mobility, unavailability of transportation, and police surveillance, which further worsened women's access to health care and emergency care for other diseases. Women, especially the elderly, were unable to go out and buy medicines. Even if they managed to reach hospitals for emergency care, doctors and health staff would be preoccupied in COVID-19 care. Even surgeries were reportedly delayed.

### 4.1.7 Curtailed access to menstrual and reproductive health products:

The curtailment of health services not related to COVID-19 affected women, specifically through the disruption in supply and access to sanitary pads. These were not listed as essential goods, forcing units manufacturing them to stop production which drastically reduced their supply. The desk review for example showed that 12 crore (120 million) people were affected by lack of menstrual pads, particularly in rural areas [Krishnan, 2020]. According to a study by Dasra [2020], many organisations reported that access to menstrual pads and contraceptive pills was affected. Health services catering to pregnant and lactating mothers were also affected, with implications to mothers and children in the future.

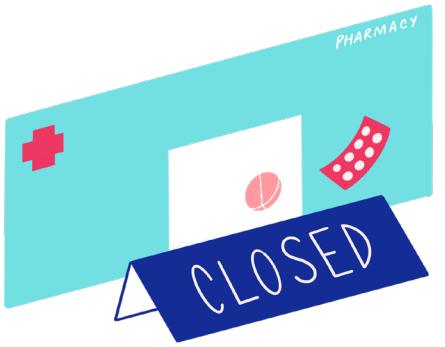
Many participants in the field research working in women and trans* persons rights from the states of Odisha, Rajasthan, Jharkhand, Chhattisgarh and Manipur reported distributing sanitary pads as a part of their relief kits. A women's rights group from Puducherry also reported conducting sanitary napkin drives as part of larger menstrual health awareness programmes during the lockdowns. Women's groups thus ensured that an important aspect of reproductive health needs of women and girls was addressed in their communities.

"For a lot of rural and low-income communities, it was not a priority to buy sanitary napkins. For them, at that time, the priority was to buy food–or [to] migrate back to their native villages. Being a woman in that situation, to manage your periods, you would resort to whatever you have. It could be some dirty piece of cloth– there was minimum thought put into how menstruators would deal with their periods."

***– Member of a Puducherry-based women's organisation***

### 4.1.8 Sexual and reproductive health services were heavily compromised:

The field research findings reflected the deterioration in the state of sexual and reproductive health and rights (SRHR) among community women and staff of field organisations during the lockdown. One of the participants reported that pregnant women were being encouraged to give birth at home as hospitals were overwhelmed with COVID-19 care. Pregnant women in need of vaccinations and antenatal care and lactating mothers in need of postnatal care could not avail these facilities as government health centres were either not functional or were occupied with COVID-19 cases. Although makeshift quarantine facilities created for migrant workers returning from cities did have provision for sanitation facilities and meals,




these were inadequate for pregnant women. According to the women's groups covered in the field research, efforts to promote institutional delivery to reduce infant and maternal mortalities stands to be impacted in these circumstances. Access to menstrual products was hampered due to restrictions on mobility. According to a Telangana-based women's collective, many women complained that neighbourhood surveillance by ***pahalvans*** (strongmen) was oppressive and deterred many from going out to buy sanitary pads. This raises concerns about the impact of restrictions on women's mobility, which were exacerbated during the lockdown.

Our desk research indicates abortion services were also gravely affected during the lockdowns due to factors such as unavailability of transport, disruption of drug supply, and prioritisation of COVID-19 interventions. According to a study by Ipas Development Foundation [2020], access to 18.5 lakh (1.85 million) abortions (47 percent of the abortions that would have likely taken place) may have been compromised during and soon after the lockdown in private and public hospitals and chemist outlets[13]. The study expected that while some of these women might have accessed medical abortion drugs or facility-based surgical abortions later on, many might have had to resort to unsafe methods or carried on their pregnancies.

13 The study was based on telephone survey of 509 public-sector facilities across eight states in the second week of April; email/telephone survey of 52 abortion providers working across the three health settings; and expert opinion of members of the Federation of Obstetric and Gynaecological Societies of India.

Women who would have ordinarily opted for non-surgical abortions through medical abortion drugs within 12 weeks of pregnancy could not access these due to lockdown. As a result their pregnancies advanced beyond 12 weeks and they would now have to opt for surgical abortions.

### *4.1.9 Enhanced vulnerability of persons living with disabilities:*

As per the study by Rising Flame and Sightsavers [2020] cited in the desk review, persons living with disabilities suffered considerably due to disruption of ongoing medical treatments. Those who had contracted the infection and were quarantined did not have access to disabled-friendly bathrooms and faced difficulty as their caregivers were not with them. Quarantine centres were not accessible for persons living with disabilities, and they experienced many communication barriers. Safety measures such as masking and the use of personal protective equipment (PPE) come in the way of lip reading. Many who are dependent on human assistance and contact for their daily life suffered due to ableist measures such as physical distancing.

Participants across urban and rural areas and small towns reported lack of access to menstrual hygiene products; sanitisers; and assistive devices such as hearing aids, hearing aid batteries, gloves for arthritis, and adult diapers.

### *4.1.10 Trans* persons falling out of the social security net:*

The lack of any organised and long-term provision of rations and medicines affected the urban poor in general, with many vulnerable groups such as trans* persons falling out of the net completely as many lacked ration cards to avail these facilities. According to a study conducted by CLPR [Sahai et al., 2020], the insistence upon identity cards exacerbated inequitable access to health services. During the lockdown, access to health services and medicine supply was disrupted, severely impacting trans* persons, many of whom are immune compromised. Access to hormone medications was also affected. Due to the pandemic, many of these services were deprioritised. Lack of access to hormone medication and health services affected dysphoria and increased uncertainty and depression, according to the report. An article by Dey [2020] raised concerns not just about the lack of healthcare facilities but also about the lack of dialogue and inclusion of trans* persons regarding their health care. Stigma made it worse as many were accused of spreading the virus. The fear of stigma and ridicule created reluctance and fear among trans* persons to be tested for COVID-19. Findings from the field research also reflected inequitable access and discrimination against those who did access these services.

### *4.1.11 Lack of equitable access to digital learning:*

According to a Mint article [Press Trust of India, 2020b], which draws from a UNICEF report, the lockdown forced 15 lakh (1.5 million) schools to be closed, which affected 28.6 crore (286 million) children (49 percent of them girls) from pre-primary to secondary levels. The report further states that only a quarter of all households in the country had access to the internet to access online learning, which highlights an overall disparity. Field reports suggest that, in poorer communities,

mobile phones are shared between family members and women and girls seldom have access to independent phones. According to Women in Leadership Training Centre et al. [2020], 82 percent reported no access to online education, due to lack of access to digital services or individual ownership of devices. The digital divide was starkly visible among students in public schools vis-à-vis private schools. The Annual Status of Education Report [ASER Centre, 2020] states that 56 percent of households with children enrolled in government schools reported having smartphones as compared to 74 percent in private schools.

Participants in the field research across the country echoed these insights and pointed out the challenges in attending online classes (See Box 4.3).

***Box 4.3:***

***Reasons for inequitable access to digital learning***

- Uncertainty and irregularity in online classes
- Lack of mobile phones and/or smartphones
- Lack of finances for purchasing a smartphone (the cost of a basic smartphone overlaps the cost of family food rations worth 1–2 months)
- Lack of finances for internet recharge as families were already in dire financial conditions
- Lack of internet connectivity in remote areas

Despite the restrictions imposed by inequitable access to digital learning modes, some of the groups participating in the field research working with children and adolescents in the states of Chhattisgarh, Rajasthan and Bihar set up education and learning centres to facilitate and bridge the gap.

### *4.1.12 Increase in reporting of domestic violence:*

According to the desk review as well as the field research, there was a marked increase in women seeking help for domestic violence redress, particularly spousal violence, during the lockdown. According to the desk review, as soon as the lockdown was announced, all safe spaces, support services, and public transportation came to a halt, entrapping women and girls in situations of violence. As per an NDTV article [Press Trust of India, 2020a], data released by the National Commission for Women (NCW) showed that they received 257 complaints in the period from 24 March to 1 April 2020, out of which 69 were complaints of domestic violence. The NCW chairperson also acknowledged that the real number was likely to be much higher but that women were not reaching out due to the lockdown restrictions. The number of domestic violence cases was likely to be much higher also because women may have been unable to make a phone complaint due to the presence of the spouse at home [Press Trust of India, 2020a]. A study by Jagori et al. [2020] found that domestic violence comprising natal and spousal violence increased significantly during the lockdown as compared to before, with spousal violence almost doubling. Violence against trans* persons also increased during the lockdown. Women with dependent children, women with disabilities, domestic workers, and elderly women emerged as the most vulnerable, with several cases of abandonments being reported in Tamil Nadu, Karnataka, and Assam, according to the same study.

An increase in reporting of domestic violence and gender-based violence was reported by almost all the groups interviewed as part of our field research. There were several reasons cited for the increase in domestic violence, with the most frequently quoted one being that women and girls were forced to live in close proximity to their perpetrators for an extended period of time.

Economic constraints were also a significant factor for domestic abuse. Several women-led groups also shared that women reported being pressurised to withdraw money from their bank accounts by their husbands. Due to the lockdown and restrictions on mobility, women were unable to seek safe shelter.

***Box 4.4:***

***Responding to domestic violence***

Several groups covered by the field research working in women's and trans* persons rights in the states of Delhi, Jharkhand, Odisha, Kerala, and Rajasthan, reported having started a helpline and a mental health desk to help women deal with abuse, violence, anxiety, stress, and financial problems. A couple of the participants in field research working with Lesbian, Gay, Bisexual, Transgender, Queer, Intersex (LGBTQI) people in the states of Assam and Kerala provided peer counselling and online counselling but were able to reach only a few people due to limited internet connectivity, lack of smartphones, and lack of counselling expertise. Organisations working actively in the area of domestic and gender-based violence either had their own facilities for shelter homes for victims or had linkages with government-run homes.

Organisations such as Shakti Shalini compiled and released a nation-wide list of organisations supporting domestic violence survivors during the lockdown. The list is a live resource that continues to be updated and expanded. At present, the list covers helpline services across 14 states in India and two national helplines [Shakti Shalini, 2020].

## *4.1.13 Increase in stigma and discrimination:*

The pandemic has exposed and deepened existing socio-economic inequalities and even created newer forms of socio-spatial discriminations against those who are infected, those who are perceived to be carrying the virus (pathologised and stigmatised bodies such as those of sanitation workers, sex workers, trans* persons, and Muslims), and areas that are viewed as crowded and "unsafe" (such as slum settlements and crowded, low-income, working-class neighbourhoods, including red-light areas). This has resulted in boundaries between "safe" and the "unsafe" bodies and places and is reflected in both the field and desk research.

Field findings show that Muslims faced stigma and were perceived as spreading the virus. For instance, in a part of Kerala, Muslims faced discrimination on account of media reports that a gathering held by a body called the Tablighi Jamaat had acted as a superspreader event [Narayanan, 2021]. Muslims

were seen as spreaders of the virus until a much later date and were not allowed to do business in communities. A Telangana-based Muslim women's collective also reiterated that the stigma against Muslims in the context of COVID-19 was strong.

Discrimination against vulnerable groups engaged in precarious occupations was reported in both the field and desk research. According to the desk review, trans* persons rely mostly on the informal economy that is devoid of social security of any kind. The daily wage economy, which was entirely disrupted during the lockdown, left many to face severe uncertainty. Given the integral social, cultural, and economic role that public spaces such as streets play in the lives of trans* persons and other marginalised labour groups (such as sex workers, pavement dwellers, and beggars), the immediate and longer-term effects of the lockdown on their lives will be significant. Their public comportment had always been stigmatised and many have been living under constant physical threat. The lockdown compounded these threats, rendering trans* persons even more vulnerable to homelessness, police brutality, and assault [Sahai et al., 2020].

Coercive measures were increasingly used during the lockdown against lockdown offenders and to contain "unsafe" bodies. Excessive powers granted to the police and the clampdown on any public protests or congregation made the urban poor and trans* persons even more vulnerable to violence. Findings from the field also revealed that marginalised communities, especially those of gender non-conforming persons, suffered a great deal of stigma and discrimination during the lockdown. Misinformation about trans* persons being carriers of the virus was rapidly spreading in Telangana during the lockdown. Posters spreading misinformation and hatred against trans* persons were found in one of the city's metro stations [Jose, 2020; Teja, 2020]. Trans* persons who were homeless or were seen in public spaces trying to access medicines also faced police brutality [Sahai et al., 2020].

Groups working with sex workers and homeless women have pointed out that these communities would face even more serious challenges than the current situation if they contracted the virus especially in terms of affordability of treatment. According to our desk research, there is already a great deal of stigma around sex work as a profession, which further contributes to discrimination against sex workers in institutional settings, including the healthcare system.

The field research also revealed that sex workers did not have any alternative source of income during the lockdown and barely any savings to fall back on. One of the participants shared that sex workers were unfamiliar with the process of online sex work and therefore were unable to adopt it immediately or were even cheated in some instances. Therefore, they had to rely entirely on food and essentials supplied through relief work. As per the participant, one of the primary occupations of many transgender persons includes collecting money on local trains, and from shops and public spaces, which came to a complete halt due to the lockdown.

Groups working with ***Devdasis***[14] (former temple dancers) reported that there was no relief package for them. At least two groups interviewed who were working with a large number of single women or abandoned women, mentioned the need for identifying this as a separate target group. These marginalised women are smaller in number and are extremely vulnerable.

According to a West Bengal–based trans* persons group, it was no longer possible for trans* persons to collect and meet during the lockdown. This was a significant loss for them as their biggest support system was their community with each other, which also offers some protection from violence and bullying.

One of the ways the women's and trans* persons rights groups tried to counter stigma and discrimination was to build community awareness on various aspects of COVID-19. They also actively generated awareness on government guidelines, vaccination facilities, government schemes, and COVID-19-related services. In particular, women's rights groups working with Adivasis prioritised this issue of inaccessibility to information in tribal areas. A participant stated that their group based in Udaipur, Rajasthan provided counselling support over the phone to those affected by COVID-19.

14 The ancient Devdasi system still exists and is practised in the in the border districts of Tamil Nadu and Andhra Pradesh. According to a Scroll article by Govindarajan [2017], girls from impoverished families in the Arunthathiyar Scheduled Caste community are offered to the goddess Mathamma. Thereafter, they are deemed to be public property.

## 4.2 Immediate and practical needs during the lockdown(s), identified by women and trans* persons groups on the ground

This section highlights clear and immediate steps articulated by women and trans* persons led groups, that can address the gendered effects of the pandemic. These recommendations constitute an important section of the report as they are based on the lived reality of vulnerable groups and collectives on the ground. By amplifying the voices of women and trans* persons led groups close to the ground, the field research seeks to inform resourcing and funding priorities and directions.

### *4.2.1 Increasing sustainable rural livelihood options:*

The groups have expressed that the central government's demand-driven scheme engendered under the Mahatma Gandhi National Rural Employment Guarantee Act, 2005 (MGNREGA)—which assures 100 days of work to rural households—needs to expand to more than 100 days to meet the increase in demand for employment in rural areas. They are of the view that many migrant workers may decide not to migrate to cities again due to fear of COVID-19 and the trauma faced due to economic insecurity and physical displacement during the first lockdown in cities. Additionally, all the groups working in rural areas, and especially in livelihood programmes for women and trans* persons, felt that creating sustainable livelihood opportunities for women in villages could prevent migration. They were of the view that exclusive and inequitable urban environments do not allow impoverished migrant residents to integrate into urban living, that they continue living in extremely dehumanising conditions and do not have equal access to infrastructure and services.

"For a rural community like ours, it is very important to build existing livelihood options, like strengthening agriculture, if not for the market, but at least for our own sustenance... unfortunately, everybody is looking at livelihoods as how you would prepare for the market, and not [about] sustaining in the crisis like what we are seeing repeatedly."

***– Member of an Uttarakhand based women's rights group***

### *4.2.2 Generating alternate employment for groups in precarious work and building related digital literacy skills:*

The earnings of many trans* persons dried up during the lockdown and they did not receive adequate financial aid. They had no access to the PMJDY schemes as these were only extended to cisgender women.

"In the case of transgender persons and sex workers, current livelihoods cannot be converted into online medium overnight or even in distant future. Hence, creating alternative livelihood opportunities is critical."

***– Member of a West Bengal based trans* persons rights group***

A related issue was the challenge posed by digital monetary transactions. Furthermore, formation of SHGs and providing skill training among trans* persons in setting up small-scale enterprises was also recommended as a sustainable, revenue-generating option by trans* persons groups. Alternative livelihood generation for sex workers also emerged as a critical need as any kind of contact-involving labour is not possible during pandemics such as COVID-19.

### *4.2.3 Enhancing food security on an urgent basis:*

According to the desk review, food relief did not include diet diversity to ensure nutritional security, and this had a significant impact on the most vulnerable groups. Although the national relief package by the government included direct cash transfers as part of PMJDY and food provisioning under PDS with extra wheat and rice for three months, these measures only helped tackle the immediate food insecurity and not the underlying systemic undernutrition and malnutrition due to lack of diet diversity that has characterised food consumption of the poor in India.

### *4.2.4 Need to enhance sexual and reproductive health services:*

Dialogues and discussions about contraception and decision making regarding reproduction are currently inadequate according to the groups working on the ground. The hampered access to reproductive and sexual health services due to COVID-19, makes it essential to address these curtailed needs on an urgent footing.

### *4.2.5 Need to reimagine social justice work and movement building:*

Several groups in the field research spoke about the challenge of continuing movement-building work in the face of health risks and limited access to digital technology. The need to discuss ways to conduct community work through digital modes and designing digital sessions emerged as important. Many were unable to conduct awareness rallies about trans* persons rights and women's rights and articulated the need to discuss ways to conduct their community work despite not being able to meet physically. There is a need to listen to these specific concerns and discuss ways in which transition to digital modes can happen if and when needed.

"With no access to technology and deteriorating health and mental health conditions, how will trans persons fight in a movement?"

***– Member of a trans* persons rights group based in West Bengal***

### *4.2.6 Need to develop enhanced focus to address domestic violence:*

One of the main challenges faced by institutions and organisations was the lack of a clear understanding regarding protocol and measures in dealing with survivors in these times of crisis. Thus, a cooperative and collaborative arrangement between protection officers, counsellors, helplines, and NGOs could be a way forward to deal with future crises according to Jagori et al. [2020]. The IWWAGE study [Tankha, 2020] recommends a convergence of the Women and Child Development and the NCW and collaboration on their programmes, such as the 181 helpline[15], shelter homes, Nirbhaya fund[16], etc., with stakeholders like the District Legal Service Authority.

There is a need to go beyond standard relief measures such as helplines for domestic violence and tackle structural factors such as women's ownership of land and secure livelihoods Agarwal [2021b]. Agarwal also argues for building linkages between movements against violence against women and movements on women's rights to property and other resources.

15 The Women Helpline 181 provides 24 hours immediate and emergence response to women affected by violence through (linking with appropriate authority such as police, One Stop Centre, hospital) and information about women related government schemes programs across the country through a single uniform number, 181. (https://wcd.nic.in/sites/default/files/WHL_G.pdf).

16 Following the Delhi bus gangrape case of December 2012, the Nirbhaya Fund was set up by the Government of India for projects specifically designed to improve the safety and security of women. (https://wcd.nic.in/sites/default/files/Approved%20framework%20for%20Nirbhaya%20Fund_0.pdf)

## Chapter Five:

# Easing of the Lockdown, Sequential Effects on Women and Trans* Persons and Emerging Strategic Needs

The country began the process of lifting its lockdown in phases in June 2020. The easing of the lockdown varied from state to state, and there was a gradual easing of restrictions. However, most state governments continued to enforce stringent measures in the form of restricted hours and curtailment of mobility, allowing the opening of very few essential services and continuing a heavy monitoring of the movement of goods and services. Although the unlock phases eased mobility gradually, employment in the informal sector took many months to recover and markets struggled to open fully. Participants in the field research reported that while street markets opened for a few hours in the day, due to social distancing norms, many street vendors did not get permission to open their stalls. Many women engaged in handicraft and related activities were unable to sell their products at neighbouring markets even after they opened, as they opened only for a few hours and restrictions on mobility continued.

With the unlocking of states in a phased manner, women's rights organisations and trans* persons led groups continued their efforts to enhance access to entitlements and essential services.

Many participants of the field research, in both rural and urban areas, worked with the local government administration to identify beneficiaries for distribution of relief material and schemes under MGNREGA. One of them coordinated with the local government departments to identify vulnerable women beneficiaries for livelihood schemes such as poultry farming and kitchen gardens. After the lockdown was lifted, many organisations also helped women and trans* persons procure ration cards and Aadhaar cards. They also supported women and trans* persons working in the informal sector with registering under various schemes to avail benefits such as cash transfers, subsidies on gas cylinders, housing schemes, and pensions.

The desk review also shows that involving local efforts helped not just with ensuring that relief and social security entitlements reached vulnerable groups but also in identifying and collecting disaggregated data to ensure that no one fell out of the safety net. For instance, Astha, a Delhi-based organisation working closely with children with disabilities, worked with 250 families during the lockdown. Additionally, it was able to reach out to 2000 more families through both planned

and spontaneous outreach, specifically to reach children with disabilities in slums and resettlement colonies in Delhi. It worked with Integrated Child Development Services and Right to Education forums to identify vulnerable children and coordinated with them to reach out to families with disabled children in need of aid such as dry ration and medicines [Mullick Alkazi et al., 2020]

## 5.1 Invisible and long-term gendered effects

Agarwal [2021b] has pointed out the need to understand the gendered and sequential effects of the pandemic and lockdown. These, she states, include shifts in social norms and changes in intrahousehold dynamics and gender relations that are not easily discernible. Our field research is already highlighting several of these long-term effects taking the form of growing food insecurity for women and trans* persons; increased burden of unpaid domestic labour of women; their withdrawal from the paid workforce in huge numbers; curtailment of women's and girls' mobility and access to public spaces and services; the skewed access and ownership of women and girls over digital resources such as mobile phones and digital literacy; the inequitable access of women and girls to online education, and related effects such as girls dropping out of schools and being pushed into early marriages. This section attempts to uncover some of these hidden and longer-term, gendered, and sequential effects of the pandemic, which have become more apparent during the unlocking phase.

### *5.1.1 Increase in child marriages and early marriages*

"There is a belief in the community that as long as the girl menstruates in the house, the mother is committing sin. The girl should go from the house as she is ready for reproduction."

***– A leader of a women's collective in Telangana***

The socioeconomic precarity that many households experienced due to loss of employment and wages resulted in a reported increase in the number of child and early marriages among girls. This was reported by all the participants of the field research who were working with adolescent girls, women, and children. According to a Telangana-based women's collective during the lockdown and after, cases of young girls being married to older married men increased. Some of these cases were reported during the lockdown, and the collective built awareness within the community around preventing such marriages during the easing of the lockdown phase. However, in their experience, the practice continued as income security diminished and schooling was no longer given priority.

The pandemic has impacted the work of non-profits in building attitudinal change towards the education and well-being of girl children among parents in low-income communities. With the shutting of schools for a few months and the uncertainty around education, many groups reported that households began to view marriage of young girls as a viable option to reduce the economic burden on the family. Our field research shows that while women's rights organisations had made considerable progress in capacitating women to address violence and claim their right to property, sustained economic losses faced by communities have had an overwhelming, domino effect on women and girls. The participants in the field research spoke about the need for new approaches to stem the tide of growing gender inequality. Clearly, resource support for women's rights work that addresses women's claims to resources and entitlements needs to be strengthened to reinforce hard-won gains achieved over the years.

### *5.1.2 Increase in the unpaid care work by women:*

All the participants in the field research reported stress and trauma of several types flowing from the pandemic and its fallouts – one of them being women having to bear the brunt of managing increased household chores, child and elder care along with the economic uncertainty caused by the pandemic.

A women rights organisation in the field research, took up the initiative of raising awareness on "Sharing the Care Work," a programme to sensitise men about women's contribution in the household and the need to share housework. Some of the field research participants used existing content on various media to conduct awareness sessions, others created content, Information Education and Communication (IEC) materials, and manuals on different topics, including gender sensitisation and mental health. Thus, women's rights organisations ensured a strategic gender lens informed their response to the pandemic.

### *5.1.3 Severe impact on mental health:*

Many groups interviewed during the field research feel the lockdown and pandemic have had a distinct impact on the mental health of women and trans* persons. The participants defined mental health as trauma, mental stress, and anxiety arising from uncertainty and stigma (especially for trans* persons); suicidal tendencies; and panic attacks among women and trans* persons. Counselling support was provided intermittently by most of the staff and the leaders of the groups; however, they felt the need for trained counsellors to handle sensitive situations. The desk research strongly echoes these findings.

### *5.1.4 Reduction in pay or permanent loss of employment among women:*

Many women who lost their jobs during the lockdown continued to remain unemployed even after the easing of the lockdown. According to women's groups, several occupations in the informal sector workforce have already experienced a loss of pay or might face permanent loss of employment. For instance, in case of domestic helpers, many employers refused to pay them during the initial months of the lockdown, when they could not work. Further, due to fear of infection or employers choosing to do their own chores, many decided to not employ a domestic helper, and therefore, many workers lost their source of livelihood, facing a reduction in monthly income. Women vendors faced a significant loss in their income due to markets being shut for several months during the lockdown. Even when the markets reopened, vendors would be allowed to sell their products only for a certain period of time allocated during the day by the local governments. The footfall in the markets was greatly reduced thereby bringing down their sales. Being

dependent on daily wages, they suffered losses in income.

### *5.1.5 Loss of physical space eroded social capital networks:*

Groups articulated that many members found solace in congregating to share their daily life and issues with neighbours and friends. These discussions often led to solutions or simply offered support systems for women. These support systems also function as safe spaces for women in the community in cases of violence, abuse, and harassment. Similarly, a sense of support and care among trans* persons in shared spaces and networks was reported. This was significantly curtailed due to the lockdown and pandemic. The lockdown and the strict restrictions on mobility resulted in disruption of congregations and gatherings and the social bonding moments among women and trans* persons. For women's rights groups as well, not being able to connect, share, meet, and see each other has been a source of great stress. Many groups reported that they faced frustration, anxiety, and uncertainty from not being able to meet and interact freely.

### *5.1.6 Further deterioration of women's and children's health:*

One of the long-term gendered effects most often mentioned by the field research participants was a possible increase in anaemia and other nutritional deficiencies among women and adolescent girls due to prolonged nutritional deprivation before, and especially during, the lockdown. In low-income communities, with the prevalence of early motherhood among women, this could lead to intergenerational malnutrition and neglect of reproductive health care. The desk review also brought forth many studies on the long-term implications of neglect of women's health, which was exacerbated due to the overstrained healthcare system and the lockdown.

### *5.1.7 Long term fallouts of the digital divide on educational outcomes:*

The desk review and field research show that the closure of schools and lack of access to online learning is likely to worsen educational attainment for a significant proportion of children and young people, particularly those belonging to marginalised socioeconomic groups in the near future. With the growing threat of early marriages of adolescent girls and young women, their educational attainment is likely to be compromised, impacting their future life opportunities and aspirations.

According to women's rights groups, retention of girls in school maybe affected severely due to the digitally divide, if sporadic lockdowns continue and they are unable to attend schools physically. They opine that disruption in education of girls will only deepen the existing gender gap, which is bound to affect other socioeconomic dynamics as well.

Additionally, the groups mentioned that young boys' education has also been negatively impacted, with some dropping out to take up paid work to support their families. They also talked about other consequences, such as reduced motivation to continue education and the tendency to engage with pornographic content over the internet due to excess free time.

## 5.2 Emerging strategic needs with the easing of lockdown restrictions

The gradual and phased out unlocking of homes, markets, public spaces, and streets allowed the initiation of economic recovery and a slow movement towards "normalcy." This period also saw groups trying to reconnect and take stock of the physical, psychological, social, and economic damage that the sudden lockdown had caused.

### *5.2.1 Need for social mobilisation and movement building:*

As discussed in the previous section, groups began to witness years of movement-building and awareness-generation work around girls' and women's rights such as education and the right to delay marriage being affected, with cases of girls dropping out of schools, and early and child marriage increasing during and soon after the lockdown. Now, more than ever, there is an urgent need to intensify women's mobilisation, consciousness-raising work, and solidarity building.

### *5.2.2 Digital literacy as a strategic need:*

The need to meet physically and/or digitally and reconnect for solidarity building and examine how to recast social justice work is also emerging as a strategic need. Women's and trans* persons groups also shared the frustration among many members about not being able to meet physically to discuss issues or plan their work with the community. The benefits of digital meetings and networking are immense, the most noteworthy being that groups can connect across India and share their grievances and also work on shared opportunities. Yet many groups struggled with the loss of face-to-face meetings, and these concerns need to be addressed meaningfully and with sensitivity. Many women's groups are deeply cognisant of the need to connect physical movement-building work with digital efforts given that more waves and lockdowns may constitute our reality. This is an important finding and must shape funding priorities and programme designs towards facilitating the gradual and gentle movement of groups into digital spaces and networking through discussion of their needs and facilitating digital literacy.

Discussions around challenges that the groups faced and the importance of planning and preparedness for future waves are important and are discussed in Chapter Six. Overall, the easing of the lockdown which promised more mobility—physical and emotional—should have been one of expanding and strengthening the public healthcare system; intensifying social security measures, especially for marginalised communities; engaging with women's groups to plan locally viable recovery models; organising shelter and quarantine centres; reiterating appropriate COVID-19 guidelines within communities; drawing from past failings and learnings; and resourcing and supporting SHGs, Accredited Social Health Activist (ASHAs) and Auxiliary Nurse Midwives (ANMs) and women and trans* persons groups to help tackle the imminent waves. Unfortunately, overwhelming emphasis was placed on top–down driven economic recovery measures by opening markets and encouraging spending and consumption. Much-needed social and community mobilisation work was neglected in the process. It proved to be a lost opportunity for which the vulnerable sections, groups, and collectives paid heavily.

## Chapter Six:

# Gendered Effects Exacerbated by the Second Wave

In the thick of the field research, during the months of April and May 2021, a massive second wave hit the country. The total number of positive cases crossed 2.5 crore (25 million), a staggering figure that threatened to crush the already overwhelmed healthcare system [Bhatnagar, 2021].

The study by Jean Drèze and Somanchi [2021], based on multiple household surveys, highlights the further intensification of food insecurity during the second wave. Most notably, they explain that food insecurity and income levels, which had suffered enormously during the first wave and lockdown, had barely recovered and had not even reached prelockdown levels, only to then plummet again in the second wave.

The existing gendered impact of the first wave continued to intensify once the second wave of COVID-19 hit the country. As the infections rose exponentially in rural areas, women in these communities also had to bear the brunt of caring for the sick and marshalling resources to meet the cost of medical emergencies.

The following section discusses the gendered impact of the second wave in a thematic format.

## 6.1 Further loss of rural livelihoods and impact on women:

According to a study by a think tank of young economists from Nikore Associates [Nikore et al., 2021], women in rural areas accounted for almost 80 percent of job losses in rural India in April 2021. They have identified several intersecting factors that have resulted in this situation, as follows:

- The increasing burden of unpaid care work, which was compounded by an ailing health system ill equipped to handle the sudden increase in infections
- Restrictions on women's mobility due to COVID-19 protocols, curtailing their ability to search for work as daily labourers
- Limited market hours, affecting sale of agricultural products
- Market closures, rendering women engaged in piecemeal, home-based work—as part of delivering specific products within the value chain—out of work
- Return of male migrants to villages, supplanting women in agricultural labour and crowding them out from public works, resulting in women having to contend with low paying, precarious work

***– Condensed from Nikore et al. [2021]***

Trans* women working in seasonal occupations, such as in salons during the wedding season, lost income opportunities with the lockdown that was imposed in the wake of the second wave. Sustained loss of income and daily earnings among women and trans* persons working in the informal sector, and in the case of trans* persons collecting money from people in public spaces, continued to impact the communities negatively.

At a panel discussion titled "Gendered Impact of the Catastrophic Second Wave of COVID-19 Pandemic," organised by the Impact and Policy Research Institute (IMPRI) on 15 June 2021 (henceforth, "the IMPRI conference" or "IMPRI, 2021"), Seema Kulkarni—Founding Member, Society for Promoting Participative Ecosystem Management (SOPPECOM), Pune highlighted an increase in distress sales during the second wave, which impoverished many households, especially those headed by women. There was an increase in women selling or pawning jewellery during the second wave, which rendered them economically vulnerable. Kulkarni stated that many women who lost their husbands or other male earning members of their households have

been left with no safety net or social security and little state support. The issue of registering land in their names, issues of inheritance, and the threat of being disinherited are emerging as significant areas that need research and policy attention—households with female heads are more vulnerable than ever. These observations are also supported by Agarwal [2021a, 2021b], in her gendered analysis of the pandemic.

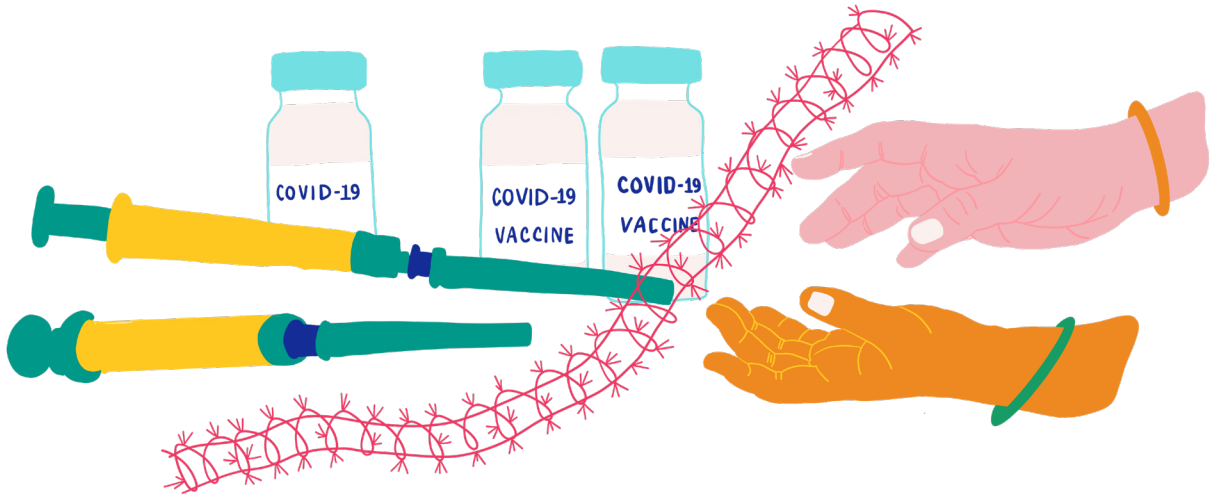
Some of the urgent actions recommended by women's rights activists to address these gendered fallouts include [IMPRI, 2021]:

- Increased focus on "reform over relief"
- A shift to more nutrition-focused methods of agriculture
- Recognition of women as farmers in formal and informal structures
- Active promotion of women's ownership over land and their control over seeds
- Establishing mechanisms to improve women's access to markets
- Reimagining the schemes under MGNREGA with a stronger focus on gender-based inequalities
- Instituting an urban employment programme with a pronounced focus on gender

## 6.2 Gendered effects of second wave on women's health, including vaccine inequality:

As per an article in Times of India, more women were seen to be infected as compared to men during the second wave, [Vadlapatla, 2021]. According to the same article, Telangana state government data revealed that, during the second wave, the proportion of women infected with COVID-19 was higher (at 38.5 percent) than in the previous wave (34 percent). National-level data revealed that women infected with COVID-19 constitute 36 percent; Bihar had the highest case load of women (42 percent) followed by Maharashtra (38 percent) and Karnataka (36 percent) during June–July 2021 [ibid.].

The gender gap in India's vaccine administration is significant and reflective of the deeply entrenched patriarchal norms and attitudes [Guha, 2021]. The gender gap in vaccine access is more prevalent in rural areas. According to the COVID Vaccine Intelligence Network (CoWIN) website, 30.9 crore (309 million) vaccine doses were delivered between January and June 2021, of which only 14.3 crore (143 million) were given to women (ratio of 856 doses to women per 1000 doses to men) [Guha, 2021]. Most states performed poorly in vaccinating women, with only 42 percent women completely vaccinated in Uttar Pradesh (one of the poorest and most populous states in the country) and 44 percent in West Bengal (fourth-most populous state) [ibid.]. As per the Union Health Ministry, 46 percent of women have been vaccinated as compared to 54 percent of men [Sharma, 2021].




17 The CoWIN portal is linked to a mobile app called Aarogya Setu, which was designed for contact tracing of people with COVID-19 from March 2020. The app also acts as a platform for people to book vaccination slots and register their vaccination status. Access to the portal and the app is limited by access to smartphones.

Apart from the widespread misinformation and rumours about the side effects of the vaccine, such as supposed effects on infertility and menstruation, the lack of access to digital resources and the lack of digital literacy among women to book slots for vaccines has also impeded women's access to vaccines [Guha, 2021]. Field research by Poonam Kathuria discussed at the IMPRI conference reveals that one primary reason for vaccine hesitancy was the fear of falling sick and not being able to care for their families. Some women who got sick reported not receiving proper care by their families.

Accurate data on trans* persons is not easily available as their identities are clubbed together as "other." According to latest news reports, less than 5 percent of the trans* persons population has been vaccinated in India [Murti, 2021].

## 6.3 Erosion of community support:

One of the casualties of the second wave of COVID-19 has been a depletion in community support structures and mechanisms. Our field research shows that while people were more forthcoming to help others affected by COVID-19 during the first wave, in the subsequent wave, there was a great deal of fear and financial strain, which eroded community support. Lack of income security and depleted savings also impacted community bonds, leading to stigma and isolation.

## Chapter Seven:

# The Resource Context in which Women and Trans* Persons Led Groups are Operating

This chapter highlights the resource context within which women and trans* persons led groups and organisations have pursued their social justice agenda as well as relief work. It is based on what we have heard from the ground and makes a strong case for the need to invest in strengthening women and trans* persons rights organisations engaged in collective action and rights-based work. At least three of the groups covered in the field research from the states of Tamil Nadu and Uttarakhand were already facing severe funding crisis for the past 3–5 years, and their work had stopped completely from March 2020. Without any funding support, they fear being wiped out completely despite having done so much work on the ground around issues of women's and trans* persons rights.

## 7.1 Choking of resources flowing to smaller, women and trans* persons led organisations:

Several groups that were supported through foreign contributions and donations in the past find themselves resource starved as amendments to the Foreign Contribution (Regulation) Act (FCRA), 2010 no longer allow them to receive subgrants from larger organisations and foundations[18]. Several participants in the field research reported that they lost a substantial amount of funding due to the prohibition on sub-granting. This has meant uncertainty about their existence and survival. The change in banking requirements under the FCRA amendments meant the groups had to familiarise themselves with a range of new procedures, which were often unclear to the local branch of the designated bank[19]. For instance, a group in the North East reported that the local banks meant to facilitate the opening of the new bank account were themselves unfamiliar with the amendments and hence unable to guide the groups adequately. They expressed the need for bank officials in remote areas to also understand the banking procedures related to FCRA so that their operations are smoother. These challenges appeared at a time when the groups were already battling community needs in the middle of the pandemic.

"As far as funding is concerned, this year our funding was cut short and we have still not received the expense reimbursements. So that's a huge blow to us if we don't get that. We had reached out to Indian donors as well, who had accepted our proposal, and last April they would have looked into it, but those have been postponed indefinitely now. We were having discussions, but now with the second wave, again it is going to be pushed. It's a pretty anxious time for us as an organisation this year—how do we take the work forward? So this was the year we would have really strengthened our rights-based work. Everything would have worked for us."

***– A participant from a women's rights group based in West Bengal***

18 The Foreign Contribution (Amendment) Rules, 2020 came into effect on 28 September 2020. A notable rule is the one that states, "No person who (a) is registered and granted a certificate or has obtained prior permission under this Act and (b) receives foreign contribution, shall transfer the foreign contribution to another person." This amendment in the original FCRA now prohibits any organisation or agency from sub-granting any foreign contribution.

19 Other major changes in the amendment include the mandatory opening of FCRA bank accounts in State Bank of India, New Delhi Main Branch, while applying for registration, prior permission, or renewal and the capping of administrative expenditure to 20 percent in a fiscal year; this was earlier 50 percent.

## 7.2 Cut back in human resources:

Small women-led organisations that were already working on shoestring budgets have had to further cut back on human resources. At least eight of the groups covered by the field research admitted that a resource crunch due to COVID-19 meant they had to either downsize and let go of staff or reduce salaries or else resort to measures such as unpaid leave during the lockdowns. At the same time, it is noteworthy that staff members of some organisations were willing to place themselves at risk and work in relief operations. At least three of the groups shared that their staff took voluntary leave without pay to ease the burden on the organisation.

## 7.3 Emotional wear and tear of frontline workers:

A significant insight from the field research has been that, beneath the "resilience" and the "relentlessness" of women's and trans* persons rights groups lies a mountain of exhaustion, fear, stress, and anxiety. Self-care, collective care and the emotional and psychological health of women's and trans* persons groups need to be placed front and centre in feminist agenda setting.

The desk review also encountered discussions of the physical and mental challenges faced by frontline workers, during the lockdown and after, and the disproportionate impact these challenges had on women such as ASHA and ANM workers, members of SHGs, nurses, and sanitation workers [Joseph, 2020] [Chatterjee et al., 2020] [Sahoo & Biswal, 2020] [Karan, et al., 2020]. Given that women are overwhelmingly represented in lower and lesser-paid rungs of paid care work and community work, the gendered effects are apparent and need to be addressed urgently.

***Box 7.1:***

***Anxiety and trauma among group members***

Many groups and members of collectives covered by our field study reported anxiety and trauma due to COVID-19 and other health issues and stress caused by lack of mobility and domestic dynamics within their own homes. This is supported by our desk research as well. The need for emotional well-being and support services for their frontline staff has been highlighted by several women leaders in our field research.

## 7.4 Difficulty operating during crisis:

Given the unique and unprecedented nature of this crisis, many groups faced challenges regarding planning and strategising their operations. With funds being diverted to relief and crisis work, many of their usual operations were side-lined, the effects of which are being understood only now. Many groups discussed their difficulties with conducting relief operations in a context where social distancing and masking are likely to be the norm for the foreseeable future. More discussions and capacity building regarding planning, strategising, and managing resources are needed as we face future waves and other health and environmental crises.

## 7.5 Lack of IEC material in regional languages and lack of health awareness:

A dearth of health-related, accessible IEC material was reported widely in our field research, which is especially relevant as the vaccination drive gathers pace and we prepare for impending waves. The misconceptions, misguided rumours, and fake news around vaccinations and its side effects have fuelled vaccine hesitancy, especially in rural areas.

## Chapter Eight:

# Resourcing a Feminist Funding Agenda

The critical work done by women's and trans* persons groups and collectives during and between the various lockdown—in terms of distributing relief, conveying urgent information, generating awareness, and providing solace and succour to communities impoverished by the devastating waves of the COVID-19 pandemic—cannot be overstated. They have worked continuously in various capacities at significant risk of exposure, with low pay or often on volunteer basis, and with little funding and few resources. According to the IWWAGE study [Tankha, 2020] cited in the desk review, 47.4 percent of women had to depend on NGO and community support for their food needs and 30 percent on government rations. This is indicative of the role played by women's and trans* persons collectives in ensuring food security. In the context of the devastating second wave and the looming shadow of an impending third wave, the need to immediately and effectively resource their work cannot be overemphasised. Most notably, these groups and collectives have been subsidising the state's relief work and broader social and community work by toiling at extremely low wages/ salaries, or on a voluntary basis, at significant risk to their health and that of their families.

## 8.1 Building Blocks of Resourcing a Feminist Agenda

Given below are the building blocks of resourcing a feminist agenda as articulated by the groups and organisations that were covered by the field research.

### *8.1.1 Increase access and carve more interactive spaces:*

There is a need to unpack the relationship between philanthropic actors and women's and trans* persons groups and carve more interactive and approachable spaces for groups and collectives to be able to articulate their need for resources and manage these resources on their own. Women's and trans* persons groups have also suggested that funding models be discussed more openly so as to suit the specific needs and contexts of the groups concerned. This means exploring innovative ways of fund allocation beyond the standard formats.

The field research participants also spoke of the need to make the process of seeking resources more accessible and easier to navigate. The programme lead of a mid-sized organisation working on child marriage in Rajasthan emphasised the need for long-term, sustainable funds. "Instead of a 'call for proposal' model, they [funders] could look into funding those groups/organisations who approach them on the basis of their field work. Those who do not have the skills for documentation as required by donors are often overlooked." Yet another group working in peri-urban areas of Patna, Bihar said, "The donors' focus is on documentation and evaluation, and not all grassroot collectives have the resources for documenting their work in a way that the donors require. They should instead observe / focus on tangible changes at the community level. [They should] focus on community evaluation... or they should also facilitate documentation."

"The donors rely heavily on the grantee's documentation skills; however, grassroots organisations like ours do not have the skills or people who are skilled in documentation. So the donors must assess the work of the organisations [instead of documentation skills]."

***– Head of a women's rights organisation in Dhenkanal, Odisha.***

"Small/local grassroots collectives are severely underfunded. Donors should collaborate with these collectives for a needs assessment so they can understand the needs of the community."

***– Leader of a rural women's organisation in Gujarat***

### *8.1.2 Resources should be move flexibly across practical and strategic needs:*

The groups on the ground reiterated the necessity for indigenous resources to flow towards immediate and practical needs during a crisis; as well as towards the underlying strategic gendered needs and sequential effects of this pandemic and any future crisis. This means going beyond resourcing programmes that provide only access to resources to those that ensure ownership and control over critical resources. For example, a Nagaland based women's rights organisation and an Odisha based women's organisation spoke about their focus on ensuring women have ownership of property and land. These are critical resources women should control, according to them.

The desk review and field research highlight the need for resources to flow towards process-oriented, rights-based awareness-building work on the ground, i.e., the "usual and seemingly ordinary work" that does not necessarily produce project-based output. As one of the field research participants working on women's rights in Madurai district of Tamil Nadu said, "No one wants to fund women's rights organisations as results are not tangible. It is a long process—funders only want to see outcomes in short [periods of] time." In the words of the leader of a grassroots indigenous women's organisation in Meghalaya, "If support can [be] given to not support only welfare services but more so to build a self-reliant community where dependency is more or less diminished, where communities can proudly say, 'we cope [with] it on our own.' Build that independent human resource." Voices from the groups stressed the need for resources to move flexibly across the usual and the urgent, the immediate and the long term, and the practical and the strategic.

### *8.1.3 Resourcing priority areas identified by organisations led by women and trans* persons:*

The participants of the field research shared that funding and resourcing need to flow towards supporting mandates prioritised by women's collectives. For example, the head and founder of a women's rights group from Pithoragarh district of Uttarakhand says, "Funders should want to support groups that have a perspective to bring change in the policy narratives… Funding priorities need to change, and [funders need to] listen to the needs of the local community." Similarly, the lead of another women's rights organisation based in Northern Karnataka said, "Without funder cooperation in COVID-19 times, it is very difficult to sustain local needs. Local needs are different from global needs. This needs to be addressed through funding." The leader of a women's collective from Panna district of Madhya Pradesh said, "The donors' support must align with the needs of the community." Yet another participant from a trust working with rural women in Gujarat and Chhattisgarh said, "The donors' support needs to be tailored to communities and their contexts."

The groups covered in the field research also suggested that funders take a ground-up approach to funding and make it more inclusive, mutually accountable, and participatory. The pandemic has shifted priorities, and local needs have emerged as critical, for example, according to the member of a women's rights group working in parts of Uttar Pradesh and Madhya Pradesh, "Based on our experience, [our suggestion is] a bottoms-up, community-centric approach to assess the community's needs and tailor the kind of support they extend." The participants of the field research also suggested the introduction of micro-level assessments at the project design stage.

Many of the groups on the ground expressed the need for more processes that encourage groups to take the lead in agenda setting. In the words of a women's rights activist from Hazaribagh, Jharkhand, "Revise the long-term projects immediately with new strategies. The scope for networking is non-existent right now. So donors could look into bringing small groups from all over the country together so that they can work in partnership." She went on to say that resourcing needs to focus on small scale organisations / local

grassroot groups as well. “Donors can maybe look into engaging the small organisations that have been active for a long time.” According to an LGBTI and queer rights group working in Manipur, grassroot organisations—which are usually at the margins—have been left out over the years and are viewed only as beneficiaries. “This needs to change,” the chief functionary asserted.

### *8.1.4 Promote flexible and inclusive funding:*

Some of the field research participants also expressed the need for flexible, inclusive and long-term funding models. For example, a women’s rights leader working in Eastern Chhattisgarh shared that, in her view, grassroots collectives are being overlooked, “Funding should not be restricted to one area of work; there should be enough flexibility for the grantee to decide which area to work in based on a needs assessment with the community people.” According to a Dalit women’s collective in Chitrakoot district of Uttar Pradesh, “Women’s issues at the grassroot level, and the collectives working on them, should be at the forefront.” A trans* persons rights group working in Tejpur, Assam emphasised the need for incubation support for smaller groups and support for projects that create change in the long run. Another group working with Adivasis in the Bodoland region of Assam on their economic advancement shared that their work slowed down considerably due to both drying up of funds and the restrictions on mobility. They have been unable to carry out their regular work of holding meetings and sustaining their work on rights awareness. “Stopping funding after a short period becomes difficult for women’s rights-based work,” says the lead of the organisation. According to a young feminist from rural Haryana, “Instead of project based funds, [funding should] focus on regular funds, especially to support environmental justice and justice for Dalit women. Regular funds get allocated to different thematic areas, such as health, education, etc.” She alluded to the need for core support to sustain the social justice work of organisations.

As the chief functionary of one of the groups working on the issue of disability in Odisha said, “Funding is theme specific. Flexibility is needed in funding support—relaxation of time. Beneficiary selection is sometimes not possible.

***Box 8.1:***

***Suggestions to strengthen local economies***

- Funding of sustainable farming initiatives such as kitchen gardens in common lands owned by the Panchayat
- Funding women- and trans* persons-owned small businesses
- Supporting programmes that actively promote recognition of women as farmers
- Establishment of a network and bank exclusive to trans* persons to enable them to save and borrow money to start their own enterprises

***Box 8.2:***

***Specific areas of support as articulated by trans* persons-led groups***

- Employment in the social justice and development sector needs to focus increasingly on social inclusion
- Funding organisations and CSR departments should employ trans* persons within their organisations or engage trans* persons as consultants so that trans* issues are brought to the forefront
- Encourage trans*persons-led advocacy campaigns
- Support more organisations led by trans* persons and working with trans* persons
- A housing facility/scheme for trans* communities is needed to address shelter insecurity
- Mental health support is a critical need

We are working with women and children, but sometimes we have to reach [out to] other community members also as they are in the same space." She was also of the view that resource agencies should play a supportive role in developing institutional capacities in fundraising, programme design, financial compliance, and management. "Donors complain about discrepancies—and they have many requirements—but handholding support is required," she said.

"Usually, the bigger, more established organisations [led by general category women and owned by ministers' wives] get the majority of the funding and rural, grassroots organisations are overlooked. The donor community must be encouraged to look at these women-led, Dalit-led, grassroots organisations.

Dalit women rarely hold positions of leadership in organisations. If an organisation has no links or network with a bigger organisation, it usually does not get funding. The donor community must itself assess the local organisations in rural areas that are bringing tangible change and decide where the funds should go rather than relying on big players and their links with small organisations. donor mein kshamta honi chahiye gramin kshetra ki sansthaon ko parakhne ki. (Donors should have the capacity to assess organisations working in rural areas.)"

***– Chief Functionary of a women's rights organisation from Western Uttar Pradesh***

## 8.2 The feminist vision of change held by women's and trans* persons groups and collectives on the ground

The women's and trans* persons organisations covered in the field research have shared the change they envision, some of which are immediate, while some are long term and gender transformative in nature (see Box 8.3). These articulations should inform the flow of resources towards shifting historically entrenched, unequal power relations by enabling marginalised groups—such as women, trans* persons, persons with disabilities, Dalits, and Adivasis—to take ownership and seize control of critical economic and political resources.

The changes that these groups envision underscore the need to address deeper, structural factors that uphold gender injustice. They point to the need to address gender-strategic needs and interests that would not only improve the material conditions of marginalised groups but also shift gender relations and improve gendered positions. The following section discusses the demands and needs of the groups that tie with these visions of change.

Overall, findings from the field research and desk review assert the need to resource priority areas as per the mandate of the groups and collectives; support immediate and long-term funding based on the organisational needs of the groups; enable movement-building efforts; and nurture a gender-transformative agenda (see Box 8.4).

***Box 8.3:***

***Changes envisioned by women's and trans* persons rights groups***

***Women live a dignified life free of discrimination and violence***

- Women seek their rights to land and property
- Women and children with disabilities lead a life of dignity and have access to their rights and entitlements
- Women working in the informal sector become aware of their rights and access to entitlements, social protection, and fair wages
- Dalit and Adivasi women are adequately represented in every walk of life
- Women exercise leadership in formal and informal power structures

***Trans* persons live a dignified life free of discrimination and violence***

- Trans* persons lead a secure life
- Trans* persons have access to sustainable livelihoods and sources of income
- Stigma and discrimination against trans* persons are greatly reduced
- Reduced shame and guilt among trans* persons identities
- Society evolves to become inclusive and recognises multiple gender identities and gender minorities

***Indigenous peoples can assert their rights and demand equitable control over resources***

- Indigenous peoples are collectively able to own, control, and manage rights to natural and other resources
- Indigenous peoples have access to sustainable livelihoods and enhanced local economies

***Box 8.4:***

***Salient features of a gender-transformative funding agenda***

- Challenges and questions oppressive gender relations, norms, and practices by raising consciousness about structural inequality, oppression, and subordination
- Advances ownership and control of women's and trans* persons groups, disability rights groups, and other marginalised groups over critical resources
- Addresses the needs and concerns of multiple vulnerable groups by amplifying their voices
- Facilitates sharing of knowledge, movement building, and political participation to demand equal rights and opportunities
- Is based on feminist principles of inclusion, non-discrimination, and equality

## 8.3 The shape of a feminist funding agenda

The framework for resource support that is emerging from the desk review and field research process can be placed into four interlinked strands that strengthen each other.

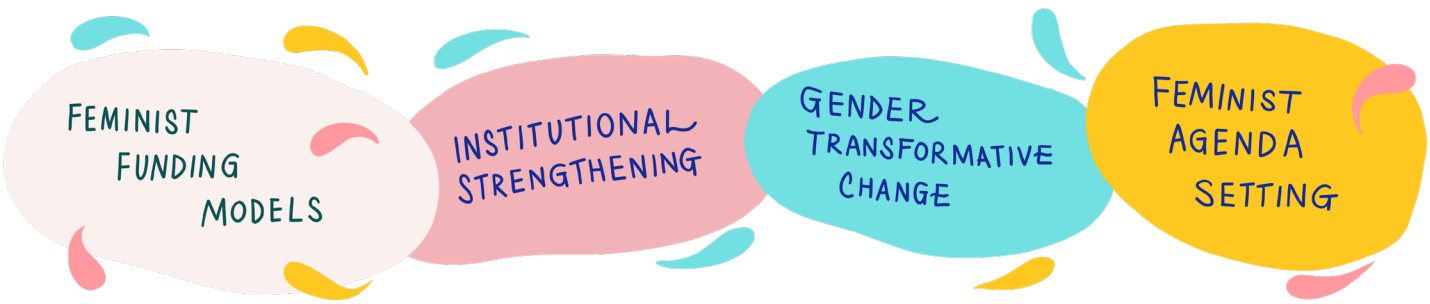
- Feminist funding models—Resources and support in the form of flexible and easily accessible funding models
- Institutional strengthening—Institutional strengthening through organisational development
- Feminist agenda setting—Resourcing programmes based on collective mandates set by women's and trans* rights groups
- Movement-building and gender-transformative change—Investing in changing gender norms and relations, strengthening networks, coalitions, and alliances with other groups to build cross-issue mobilisation.

### *8.3.1 Feminist funding models*

Feminist funding unpacks the power dynamics between philanthropic giving and the groups claiming resources and aims to shift the power towards the latter. It can be seen as "transformative funding towards building movements" [Srivastava, 2019; WFA, n.d.].

- ***Long term and flexible funding:***

  Transforming gender norms requires long term enduring investment in consciousness raising, mindset change among several sub-systems and nurturing collective action. Women's and trans* persons groups across states acknowledged the importance of movement-building work, which includes awareness building, mobilisation, consciousness raising, collective ownership and management of resources, leadership building, and leading a feminist change agenda. They also agreed that this work is continuous, consistent, and does not necessarily align with the linear, project-based agendas of many funding organisations. Therefore, it is necessary to resource movement-building and related work throughout, even during crises, when priorities shift. In fact, this work helps groups prepare for a crisis as it strengthens community trust.



Restrictions on mobility and the inability to execute regular project activities during the course of the last year have also intensified the need for flexible funding support. While some of the groups covered by the field research were allowed to divert their funds into COVID-19 relief work, smaller groups and organisations faced challenges posed by the sudden changes in budget management and financial planning. For example, out-of-pocket expenses are often hard to explain in budgets, and the groups face difficulties in preparing robust budgets.

- ***Diversifying funding mechanisms:***

  Diversifying funding mechanisms to include, for example, fellowships that provide a flexible distribution of funds between remuneration and running programme costs. Groups led by younger women and trans* persons that were still in the process of registration or applying for funding for the first time emphasised the need for seed or incubation funding. The context of the past year and the current situation also highlights the need for crisis and emergency funding that ideally would be over and above the resources allocated for change interventions.

- ***Paying attention to regions overlooked in resource allocation:***

  Participants from Kerala, the North East states, and Jammu and Kashmir felt that the flow of funds to these states is weaker either due to the perception that women in these states enjoy a better status or due to conflict. However, according to them, such regions are equally in need of resources to flow towards women's and trans* persons rights work. According to a women's rights activist, "Gender and women's issues are overlooked in Kerala due to the high literacy rate. However, we too have gender-related problems; women continue to face discrimination and violence, and the donors must not overlook Kerala."

Overall, the findings from the ground urge towards collaboratively putting together an inclusive funding framework that ensures the participation of smaller groups as well as groups working with vulnerable sections, such as trans* persons, persons with disabilities, and persons engaged in precarious occupations, across urban and rural areas. Groups also asserted the need for resources to be allocated to gender-transformative work that shifts gender norms and enables disenfranchised groups to lay claim to resources and decision making.

## *8.3.2 Institutional strengthening:*

Organisational development that strengthens institutional resilience and endurance has surfaced as an important element of resource support needed at the field level. This includes core support for thought leadership to increase the mandate and influence of the organisation; accompaniment support in the form of strengthening systems and processes especially around growing compliances and planning; and creating a resource pipeline and local resource mobilisation strategies.

Digital literacy has emerged as an important aspect of institutional strengthening as we move towards quasi, if not complete, online modes of working. Trans* persons groups in particular, expressed challenges in integrating digital technologies into their programme work, particularly counselling on emotional well-being. According to the member of a West Bengal based trans* persons rights group, income earnings of trans* persons cannot always be transacted digitally as most are involved in informal and manual work and depend on cash transactions. This posed a significant challenge as the lockdown necessitated digital platforms to make and receive payments.

The potential for trans* persons to reclaim online spaces and connect with groups around the country and the world to push movement-building work needs to be resourced.

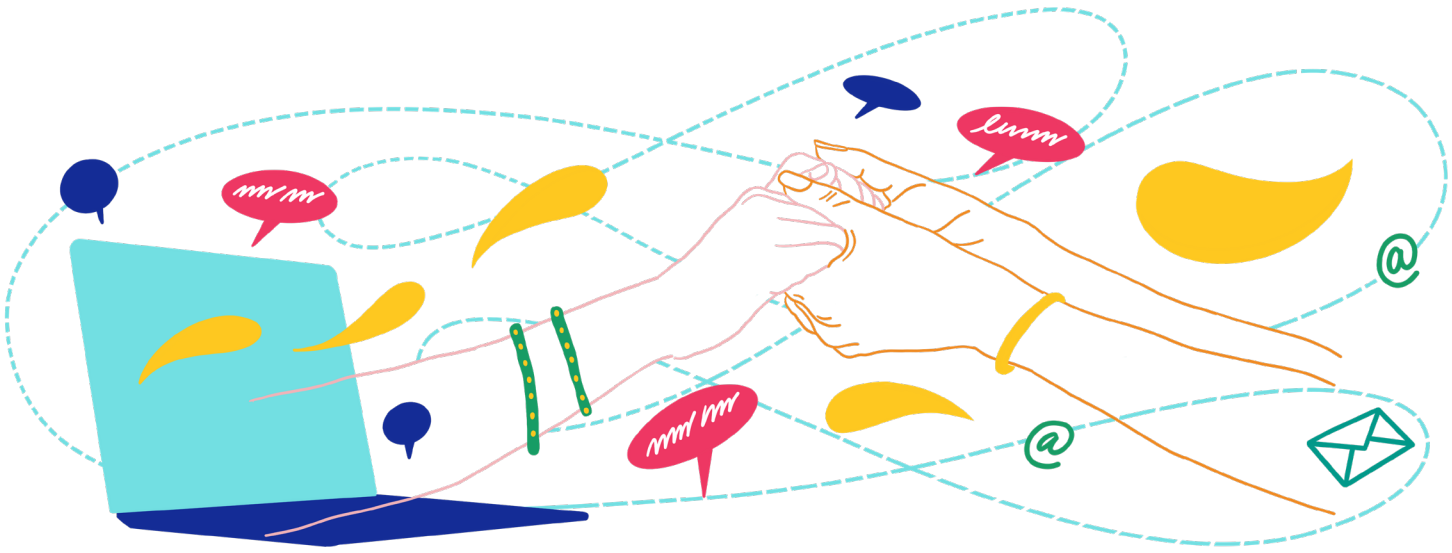
***Box 8.4:***

***Adapting to Technology***

Findings from the desk review show that facilitating digital literacy and ownership and control of digital resources by women's and trans* persons collectives is an important area for funding support. Many partnership models that facilitate "communication networks built, owned, operated, and used by citizens in a participatory and open manner" are discussed, but the lack of funding has always been a challenge [Association for Progressive Communication (APC), 2019]. The field research shows that while many women's groups and women in the community adapted themselves to digital technology, there continues to be a rural–urban digital divide. Bridging the gap of the digital divide, and building basic digital literacy skills are important areas of focus.

***"How do we ensure women's access to technology, basic technology like phones? A lot of women who find it difficult to come face to face and desperately need a mental health intervention are much more open to talking over the phone."***

– Member of a women's group based in West Bengal



## *8.3.3 Feminist Agenda Setting*

A participatory approach that informs resource flows based on the needs from the ground is a key facet of feminist agenda setting.

One of the participants from Jammu & Kashmir for example, shared that they hold a consultation with community members at the start of each year to understand their priorities for the year. The group then selects some of the priority areas that need addressing and develops programmes based on those. Another participant from Uttarakhand shared that by conducting a survey during the pandemic they realised that their earlier strategy of reaching women working in the informal sector by running a creche for their children was no longer viable. They expressed the need to think of newer ways to reach these women. Such examples suggest that resources need to be redirected and reprioritised according to collective mandates through feminist agenda setting exercises during any crisis situation.

SAWF IN's research highlights the need for resource agencies to develop long-term and more invested relationships with groups, collectives and organisations. This will not only deepen the understanding of their needs and challenges but also lead to the creation of a shared and mutually accountable agenda.

## *8.3.4 Forging connections and coalitions for movement building and gender transformative change*

The desk review and field research point towards the need for designing collective and grounded approaches drawn from knowledge sharing among groups. These processes can play a vital role in the achievement of gender-transformative change. This also implies long-term investment in collective mobilisation, building local coalitions and movements that are slowly but consistently working towards different areas of social justice. Our desk research also reflects the need for building local, national, and transregional knowledge systems through pooling lessons and experiences. For instance, Kerala displayed efficiency in collective crisis response through the involvement of local state and nonstate institutions. In addition, compilation of resources and data also proved to be effective at the local, state and regional level [Ghai, 2021]. In Kerala, lists of disabled persons were built at the municipal/ panchayat level to ensure that rations, cooked meals, advanced pension payments, financial

support, and internet packages for students, were distributed in a targeted way [ibid.]. In another example, Shakti Shalini, a women's organisation based in Delhi, compiled and released on 4 April 2020 a nation-wide list of organisations supporting domestic violence survivors during the lockdown [Shakti Shalini, 2020]. The list is a live resource that continues to be updated and expanded. At present, the list covers helpline services across 14 states in India and two national helplines [ibid.]. In order to compile the list and to ensure that victims received support with maximum coordination and effectiveness, Shakti Shalini engaged in rigorous national-level networking and alliance building among gender rights organisations.

In a similar vein, the study by Ipas Development Foundation made efforts to connect critical health services to those who needed them. It recommended mapping both public and private healthcare facilities by identifying geographic distribution of those offering first- or second-trimester abortions [2020].

In times of the pandemic, the need to communicate and remain connected, both digitally and physically, emerge as critical.

A strong level of trust that is cultivated though long-term movement-building work would help generate awareness about a pandemic and assure communities of the measures being undertaken by the state and convince them to adhere to guidelines, for example, adhering to COVID-19-appropriate behaviour and getting vaccinated in the current case. Collective ownership and management of resources could go a long way in ensuring food security, access to health care, strengthening of local economies, and sustainable use of natural resources. Therefore, resourcing and supporting the work of rights-based groups towards gender-transformative change is vital—the pandemic has made this all the more obvious.

## 8.4 Concluding reflections

The desk review and field research argue for resourcing to go beyond the immediate and most visible needs and engage with deeper historical and structural inequalities that uphold oppression and gender injustice. This means investing in all the processes and tasks that constitute movement-building work, such as consciousness raising, leadership building, networking, and knowledge creation.

The two arms of SAWF IN's research —the desk review and the field research—have highlighted that resetting power relationships between resource agencies and gender is an equally critical part of addressing inequality. It has also surfaced the significance of making funds more approachable to women and trans* persons led groups, enabling spaces for collaborative discussions, encouraging groups to take the lead in agenda setting, and facilitating longer-term, more flexible, and inclusive funding models.

# References


Agarwal, B. (2021a). Livelihoods in COVID times: Gendered perils and new pathways in India. World Development, 139. https://doi.org/10.1016/j.worlddev.2020.105312

Agarwal, B. (2021b). Reflections on the less visible and less measured: Gender and COVID-19 in India. Gender & Society, 35(2), 244–255. http://dx.doi.org/10.1177/08912432211001299

ASER Centre. (2020). Annual status of education report (rural) 2020: Wave 1. http://img.asercentre.org/docs/ASER%202020/ASER%202020%20REPORT/aser2020fullreport.pdf

Association for Progressive Communications (2019, 20 January). Exploring models of sustainability for rural connectivity in Indian villages. Rising Voices. https://rising.globalvoices.org/blog/2019/01/20/exploring-models-of-sustainability-for-rural-connectivity-in-indian-villages/

Basole, A., Abraham, R., Lahoti, R., Kesar, S., Jha,M., Nath, P., Kapoor,R., Mandela, S N., Shrivastava, A., Dasgupta, Z., Gupta, G., Narayanan, R. (2021) State of Working India 2021: One year of Covid-19. Centre for Sustainable Employment, Azim Premji University. https://cse.azimpremjiuniversity.edu.in/wp-content/uploads/2021/08/SWI2021_Executive-Summary_August.pdf

Bhatnagar, A. (2021, May 18). Explained in 10 charts: India's grim journey to 25 million Covid cases. The Times of India. https://timesofindia.indiatimes.com/india/indias-grim-journey-to-25-million-covid-cases/articleshow/82739684.cms

Business Today. (2021, May 5). COVID-19 second wave: India reports over 3.82 lakh cases, 3,780 deaths in 24 hours. https://www.businesstoday.in/latest/economy-politics/story/covid-19-second-wave-india-reports-over-382-lakh-cases-3780-deaths-in-24-hours-295128-2021-05-05

Chatterjee, S. S., Bhattacharyya, R., Bhattacharyya, S., Gupta, S., Das, S., Banerjee, B. B. (2020). Attitude, practice, behavior, and mental health impact of COVID-19 on doctors. Indian Journal of Psychiatry, 62(3), 257–265. http://dx.doi.org/10.4103/psychiatry.IndianJPsychiatry_333_20

Dasra. (2020). Lost in lockdown: Chronicling the impact of COVID-19 on India's adolescents. https://www.dasra.org/assets/uploads/resources/Lost%20in%20Lockdown_Dasra_vf.pdf

Dey, S. (2020, April 23). Not Kowtowing to Crisis: Sex workers distribute ration, medicines and hope amid Covid-19 lockdown. News18. https://www.news18.com/news/india/not-kowtowing-to-crisis-sex-workers-distribute-ration-medicines-and-hope-amid-covid-19-lockdown-2588977.html

Deshpande, A. (2020, June). The Covid-19 lockdown in India: Gender and caste dimensions of the first job losses. Ashoka University. Discussion Paper Series in Economics. No. 30. file:///C:/Users/Anuradha.Samir-PC/Downloads/A2020691898_19.pdf

Deshpande, A. (2021, July). Dropping Out, Being Pushed out or Can't Get In? Decoding Declining Labour Force Participation of Indian Women. Ashoka University. Discussion Paper Series in Economics. No. 65. https://dp.ashoka.edu.in/ash/wpaper/paper65.pdf

Dhawan, V., Pande, R., Rabinovich, L., Schaner, S., & Troyer Moore, C. (2020, April 24). Getting by on rice & salt: Rural women's coping strategies during India's coronavirus lockdown. Yale Economic Growth Centre. https://egc.yale.edu/sites/default/files/2020-05/PMJDY%20-%20qualitative.pdf

Dolker, T. (2021) Where is the Money for feminist organizing: Data snapshots and a call to action. Association for Women's Rights in Development. https://www.awid.org/sites/default/files/awid_research_witm_brief_eng.pdf

Drèze, J., & Somanchi, A. (2021). The Covid-19 crisis and people's right to food. SocArXiv. https://doi.org/10.31235/osf.io/ybrmg

Ghai, A. (2021). A rendering of disability and gender in the COVID-19 era. Economic and Political Weekly, (56)11. https://m.epw.in/engage/article/rendering-disability-and-gender-covid-19-era

Gopinath, G., Milesi-Ferretti, M. G., Nabar, M. (2019). 2019 in Review: The Global Economy Explained in 5 Charts. International Monetary Fund (IMF) Blog. https://blogs.imf.org/2019/12/18/2019-in-review-the-global-economy-explained-in-5-charts/

Govindarajan, V. (2017, October 8). Is the Devadasi system still being followed in southern India? Scroll. https://scroll.in/article/852319/is-the-devadasi-system-still-followed-in-southern-india

Guha, N. (2021, June 28). India's Covid gender gap: Women left behind in vaccination drive. The Guardian. https://www.theguardian.com/global-development/2021/jun/28/india-covid-gender-gap-women-left-behind-in-vaccination-drive

Gupta, G. R. (2000). Gender, sexuality, and HIV/AIDS: The what, the why, and the how. Canadian HIV/AIDS Policy & Law Review, 5(4), 86–93. https://pubmed.ncbi.nlm.nih.gov/11833180/

IMPRI Impact and Policy Research Institute. (2021, June 16). Panel discussion on gendered impact of the catastrophic second wave of COVID-19 pandemic [Video]. YouTube. https://www.youtube.com/watch?v=r37LzsNaFto&ab_channel=IMPRIImpactandPolicyResearchInstitute

International Food Policy Research Institute & Self Employed Women's Association. (2020). Determination and resilience amid COVID-19 uncertainty: How self-employed women in India coped with lockdowns and disruptions to business. https://view.ceros.com/ifpri/resilience/p/1

Ipas Development Foundation. (2020). Compromised abortion access due to COVID-19: A model to determine impact of COVID-19 on women's access to abortion. https://www.ipasdevelopmentfoundation.org/resourceFiles/59202006092650.pdf

Jagori, Ekta Resource Centre for Women, Action India, Nazariya, Visthar, Vimochana, North East Network, & Sangama. (2020). AT HOME. AT RISK. A rapid survey series across 6 states on the domestic violence redressal ecosystem during COVID-19 outbreak. Lam-lynti Chittara Neralu. https://northeastnetwork.org/wp-content/uploads/2020/08/AtHomeAtRisk-Rapid-Survey-OSCs.pdf

Jose, D. (2020, March 30). Transgenders shocked by hate posters in Hyderabad amid coronavirus fear. The New Indian Express. https://www.newindianexpress.com/cities/hyderabad/2020/mar/30/transgenders-shocked-by-hate-posters-in-hyderabad-amid-coronavirus-fear-2123284.html

Joseph, J. P. (2020, July 24). COVID-19 and mental health: Suicidal tendencies and self-harm on the rise. The Wire. https://thewire.in/health/covid-19-mental-health-suicidal-tendencies-self-harm-rise

Karan, A., Negandhi, H., Nair, R., Sharma, A., Tiwari, R., & Zodpey, S. (2019). Size, composition and distribution of human resource for health in India: New estimates using National Sample Survey and Registry Data. BMJ Open, 9(4), e025979. https://dx.doi.org/10.1136%2Fbmjopen-2018-025979

Kesar, S., Abraham, R., Lahoti, R., Nath, P., & Basole, A. (2020) Pandemic, informality, and vulnerability: Impact of COVID-19 on livelihoods in India. Azim Premji University. https://cse.azimpremjiuniversity.edu.in/publications/pandemic-informality-and-vulnerability-impact-of-covid-19-on-livelihoods-in-india/

Krishnan, M. (2020, May 24). Women in India suffer as Covid-19 lockdown hits sanitary pads supply. RFI. https://www.rfi.fr/en/international/20200524-asia-india-coronavirus-women-health-sanitary-napkins-supply-chain-lockdown-migrants-charity

Limaye, K., Chandurkar, D., & Choudhury, N. (2020, July 13). Lockdown and rural distress: Highlights from phone surveys of 5,000 households in 12 Indian states. International Food Policy Research Institute, South Asia. http://southasia.ifpri.info/2020/07/13/lockdown-and-rural-distress-highlights-from-phone-surveys-of-5000-households-in-12-indian-states/

Ministry of Rural Development, Government of India. (2020). COVID-19 response by women SHG warriors. https://aajeevika.gov.in/sites/default/files/nrlp_repository/COVID-19%20Response%20by%20Women%20SHG%20Warriors.pdf

Molyneux, M. (2003). Mobilisation without emancipation? Women's interests, the state, and revolution in Nicaragua. In C. R. McCann & S.-K. Kim (Eds.), Feminist theory reader: Local and global perspectives (pp. 231-239). Routledge.

Moser, C. O. N. (1989). Gender planning in the Third World: Meeting practical and strategic gender needs. World Development, 17(11): 1799–1825.

Mullick Alkazi, R., Bhutani, R., Aggarwal, P., & Aggarwal, S. (2020). COVID-19 & issues facing children and persons with disabilities and their families in Delhi: Strategies for future action. ASTHA. https://asthaindia.in/wp-content/uploads/2020/09/COVID-19-Issues-facing-Children-and-Persons-with-Disabilities-and-their-Families-in-Delhi-.pdf

Murti, A. (2021, May 18). Less than 5% of India's transgender population has received the Covid19 vaccine. The Swaddle. https://theswaddle.com/transgender-people-make-up-less-than-0-01-of-those-vaccinated-in-india/

Narayanan, M. (2021, June 25). COVID-19 & Tablighi Jamaat: Crackdown on biased media brings hope. The Quint. https://www.thequint.com/voices/opinion/tablighi-jamaat-covid-19-biased-tv-channels-nbsa-order-hope-amid-islamophobia#read-more

Nath, H. K. (2021, April 28). Assam earthquake: 6.4 magnitude quake, 7 aftershocks jolt Northeast, tremors felt in Bengal. India Today. https://www.indiatoday.in/india/story/earthquake-in-northeast-tremors-felt-in-assam-north-bengal-arunachal-pradesh-1795696-2021-04-28

National Campaign on Dalit Human Rights (NCDHR) & WeClaim. (2020). DELAYED AND DENIED: INJUSTICE IN COVID-19 RELIEF National Factsheet. http://www.ncdhr.org.in/wp-content/uploads/2020/09/10-NCDHR-national-factsheet_weclaim_April-May-2020.pdf

National Centre for Promotion of Employment for Disabled People (NCPEDP). (2020). Locked down and left behind: A report on the status of persons with disabilities in India during the COVID-19 crisis. https://www.ncpedp.org/sites/all/themes/marinelli/documents/Report-locked_down_left_behind.pdf

Nikore, M., Jha, S. & Mundhra, P. (2021, June 2). Why rural women are bearing the weight of India's second Covid wave. The Indian Express. https://indianexpress.com/article/opinion/covid-19-rural-india-women-7341294/

Pande, R., Schaner, S., Troyer Moore, C., & Stacy, E. (2020, April 17). Reaching India's poorest women with Covid-19 relief. Yale Economic Growth Centre. https://egc.yale.edu/reaching-indias-poorest-women-covid-19-relief

PRADAN, Action for Social Advancement, BAIF, Transform Rural India Foundation, Grameen Sahara, SAATHI-UP, & The Aga Khan Rural Support Programme (India). (2020). COVID-19 induced lockdown: How is the hinterland coping? http://www.vikasanvesh.in/wp-content/uploads/2020/06/Presentation-based-on-CSO-consortium-survey.pdf

Press Trust of India (2020a, April 3). Domestic violence cases have risen since COVID-19 lockdown: Women's panel. NDTV. https://www.ndtv.com/india-news/domestic-violence-cases-have-risen-since-covid-19-lockdown-womens-panel-2205133
Press Trust of India. (2020b, August 27) Just 24% of Indian households have access to e-education: UNICEF. Mint. https://www.livemint.com/education/news/just-24-of-indian-households-have-internet-to-access-e-education-unicef-11598527337136.html

Rising Flame & Sightsavers. (2020). Neglected & forgotten: Women with disabilities during the Covid crisis in India. https://risingflame.org/wp-content/uploads/2020/07/NeglectedAndForgotten_RFandSS.pdf

Sahai, V., Agrawal, A., & Shaikh, A. (2020). Exclusion amplified: COVID-19 and the transgender community. Centre for Law and Policy Research. https://clpr.org.in/wp-content/uploads/2020/07/ExclusionAmplified.pdf

Sahoo, H., & Biswal, R. K. (2020). Impact of Covid 19 on mental health: Whether India is prepared to handle the crisis? (Paper No. 100765) Munich Personal RePEc Archive. https://mpra.ub.uni-muenchen.de/100765/1/MPRA_paper_100765.pdf

Sharma, N. C. (2021, 29 June). Covid vaccination shows gender gap with 46% women immunised against 54% men. Mint. https://www.livemint.com/news/india/covid-vaccination-shows-gender-gap-with-46-women-immunised-against-54-men-11624983358433.html

Shakti Shalini. (2020, June 29). Domestic violence during COVID-19 lockdown in India: Report by Shakti Shalini. Darmiyan. https://darmiyanblog.wordpress.com/2020/06/29/domestic-violence-during-covid-19-lockdown-in-india-report-by-shakti-shalini/

Sinha, D. (2020, December 24). Why NFHS-5 data merits serious concern and urgent action. The Wire. https://thewire.in/government/nhfs-5-data-malnutrition-food-security-india

Srivastava, T (2019). Revolutionising Philanthropy across Asia and the Pacific. Alliance. Retrieved June 20, 2021. https://www.alliancemagazine.org/feature/revolutionising-philanthropy-across-asia-and-the-pacific/

Tankha, R. (2020). Voices from the field: Impact of COVID-19 on women and their collectives in India. Initiative for What Works to Advance Women and Girls in the Economy (IWWAGE). https://iwwage.org/wp-content/uploads/2020/06/Voices-from-the-Field-com.pdf

Teja, C. (2020, March 29). Miscreants Put Up Posters in Hyderabad inciting violence against the trans community. The News Minute. https://www.thenewsminute.com/article/miscreants-put-posters-hyderabad-inciting-violence-against-trans-community-121391

The Times of India. (2020, June 30). Pradhan Mantri Garib Kalyan Yojana: All you need to know. | https://timesofindia.indiatimes.com/india/pradhan-mantri-garib-kalyan-yojana-all-you-need-to-know/articleshow/76710804.cms

Vadlapatla, S. (2021, May 11). Covid-19: More women falling prey to infection in second wave. The Times of India. https://timesofindia.indiatimes.com/city/hyderabad/more-women-falling-prey-to-infection-in-2nd-wave/articleshow/82509176.cms

Women in Leadership Training Centre, Women in Governance, North-East Network, Action for Inclusion and Empowerment Trust, Kokrajhar-Chirang Jila Sanmilita Mahila Samiti. (2020). Impact of COVID-19 lockdown on women in Assam: Findings from a rapid assessment. Zubaan. Retrieved June 15, 2021, from https://drive.google.com/file/d/1yWI5wz-4Aw7s2MGU85tw99WFwZy9-mpU/view

Women's Fund Asia. (n.d.). Resourcing strengthening of feminist movements in Asia and the Pacific: A feminist funding Manifesto. https://womensfundasia.org/assets/research-report/Feminist%20Funding%20Manifesto.pdf

Youth for Unity and Voluntary Action (YUVA). (2021). Living with multiple vulnerabilities: Impact of COVID-19 on the urban poor in the Mumbai Metropolitan Region. Economic and Political Weekly, (56)4. https://www.epw.in/engage/article/living-multiple-vulnerabilities-impact-covid-19

## Annexure I:

# Field Research Questionnaire

## Agenda Setting on Women's and Trans* Persons Rights
## South Asia Women Foundation India (SAWF IN) Questionnaire – 2021 (English)

**Name of the organisation:**
**Location of the organisation:**
**Operational area of the organisation:**

1. Which are the key populations you work with?

2. What is the key change / are the key changes your organisation works towards?

3. It has been a year since COVID-19 has impacted society / our community. It has had immediate as well as long-term effects. First, could you share the immediate effects of COVID-19 during the lockdown and first wave? How did COVID-19 affect the communities you work with, especially women and trans* persons, during the initial months?

4. How did you cope with the immediate effects of COVID-19?

5. What are you currently seeing as the most significant effects of COVID-19 on the communities you work with? How are the communities, especially women and trans* persons coping?

6. How has the current situation with the rising number of COVID-19 cases affected the communities that you work with, especially women and trans* persons? How are they coping?

7. In your view, what are the gender-specific needs of the community because of COVID-19?

8. Were these needs also felt by you before COVID-19 or only after it? What is the difference?

9. What needs to be done to address these needs?
   OR
   What is the most effective way of addressing these needs?

10. How are you managing to address these needs? On a scale of 0 to 10, 0 being "not satisfied at all" and 10 being "extremely satisfied," how satisfied are you with what you are being able to do? Why are you giving yourself this rating?

11. What would enable you to work more effectively in addressing these needs?

12. In what ways has COVID-19 affected your organisation's working, if at all? How has funding been impacted? Are there any specific examples you can provide with regard to funding constraints you may have faced? How has your staff been impacted? Have you managed to keep your staff or have had to let them go? How have you managed to find resources to keep the work going?

13. Based on your experience, do you have any advice or suggestions to offer to the donor community regarding what they should be doing differently to support groups/ organisations like yours?

14. What kinds of resources would be most helpful in realising the rights of women and trans* persons?

15. Would it be possible for you to provide more detailed information at a later stage of this process? (Yes/ No)

## Annexure II:

# List of Groups, Collectives, and Organisations Interviewed

### *Groups working in the North Eastern zone:*

1. Eastern Nagaland Women Organisation, Nagaland
2. Grassroot, Meghalaya
3. Ya_All, Manipur and other North East states
4. Asha Darshan, Assam
5. Xobdo Foundation, Assam
6. Tripura Women's Welfare Society, Tripura

### *Groups working in the Western zone:*

1. Sampoorna Bamboo Trust, Maharashtra
2. YUVA (Youth for Unity and Voluntary Action), Maharashtra
3. Bavla Mahila Sangathan, Gujarat
4. Vikalp, Rajasthan

### *Groups working in the Central zone:*

1. Hastakshep Welfare Social Society, Madhya Pradesh
2. Chambal Media, Khabar Lehriya, Uttar Pradesh and Madhya Pradesh
3. Dalit Adivasi Manch, Chhattisgarh
4. Adivasi Mahila Maha Sangh / Jashpur Jan Vikas Sanstha, Chhattisgarh
5. An organisation working on gender equality in Gujarat and Chhattisgarh

### *Groups working in the Southern zone:*

1. Sakhi Trust, Karnataka
2. Ekta – A Resource Centre for Women, Tamil Nadu
3. An organisation working on rights of transgender persons in Thanjavur, Tamil Nadu
4. Shaheen Women's Resource Centre and Welfare Association, Telangana
5. Bhoomika Collective, Telangana
6. STEPS Women Development Organisation / Tamil Nadu Muslim Women Jamaat, Tamil Nadu
7. Eco Femme, Puducherry
8. A women's rights organisation in Puducherry
9. Women's Collective Chennai, Tamil Nadu
10. The Rural Agency for Social and Technological Advancement (RASTA), Kerala
11. Queerythm LGBTIQ Community, Kerala
12. Member of a community based organisation set up by a state programme, Kerala

### *Groups working in the Eastern zone*

1. Equi Diversity Foundation, West Bengal
2. Swayam, West Bengal
3. BDS Samabhabona, West Bengal
4. Samuel Hahnemann Associates and Research Centre (SHARC), Jharkhand
5. Gaurav Grameen Mahila Vikas Manch, Bihar
6. Prerna Bharti, Jharkhand and Bihar
7. Chhotanagpur Sanskritik Sangh, Jharkhand
8. Aaina, Odisha
9. Joint Endeavour for Emancipation Training & Action for Women (JEETA), Odisha
10. Indira Social Welfare Organisation, Odisha

### *Groups working in the Northern zone:*

1. Astitva For Women, Uttarakhand
2. Maati Sangathan, Uttarakhand
3. Gyan Ganga Shiksha Samiti, Uttar Pradesh
4. Aazaadi Foundation, Uttar Pradesh
5. Diya Welfare Society, Uttar Pradesh
6. Dhaarchidi, Himachal Pradesh
7. Jagori Rural Charitable Trust (Jagori Grameen), Himachal Pradesh
8. Swabhiman Society, Haryana
9. Sajid Iqbal Foundation, Jammu and Kashmir
10. SEWA Delhi, Delhi

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