women's LINK worldwide

AMNESTY INTERNATIONAL

IPPF International Planned Parenthood Federation European Network

A GUIDE FOR EUROPE: PROTECTING THE RIGHTS OF WOMEN AND GIRLS IN TIMES OF COVID-19 PANDEMIC AND ITS AFTERMATH

The COVID-19 pandemic —like all crises—has a distinct impact on women and girls that is both immediate and that poses the risk of exacerbating pre-existing gender and other intersecting inequalities. This crisis has exposed the structural and systemic discrimination that women and girls have long faced. The women and girls who have been already experiencing marginalisation are being differentially and disproportionately affected by the pandemic. Unless their rights are protected, their voices are heard and their needs are met, they will be further deprived of justice.

European decision-makers must seize this moment to address both the immediate and long-term impact of the pandemic by implementing policies and other steps to eliminate further injustices and inequalities. Any short-, medium- or long-term measures taken to respond to the COVID-19 pandemic must uphold and protect human rights. Civil society organizations are calling for a recovery period that will deliver a shared vision of the future of Europe which is based on a just, feminist, sustainable, democratic and inclusive society. States must refrain from exploiting the pandemic to consolidate authoritarian power, to weaken democracy and the rule of law, or to trample on human rights. States must ensure that their responses include a gender-sensitive and intersectional approach in order to guarantee the rights of all women and girls to live free of discrimination and violence, and to access the essential sexual and reproductive health services they need.

The United Nations (UN) High Commissioner for Human Rights, the UN Special Rapporteur on violence against women, the Council of Europe, the European Union Agency for Fundamental Rights and other regional and international bodies have issued clear guidelines that States should use to respond to the pandemic in line with their human rights obligations. National and local authorities should be aware that in contexts of health, humanitarian, economic or other crises, inequality gaps increase when the adverse effects of these crises on women and girls' rights are not taken into account and addressed.

In dealing with the COVID-19 pandemic, States need to live up to their obligations to address the gender-based violence and discrimination faced by millions of women and girls, including trans women, and by non-binary, gender non-conforming and intersex persons. Specific measures are required to minimize the short and long term impacts this health and economic crisis may have on them, their families and their communities. Without a gender-sensitive and intersectional targeted approach, women and girls may lack effective protection during the foreseen crisis resulting from the pandemic.

Women are at the forefront of the health sector constituting 84 percent of the nurses and 53 percent of doctors in Europe and 83 percent of professional carers for people with disabilities and older people. This means women are at the front lines of containing the spread of COVID-19 and may be heavily exposed to the virus through work in the health, social and care of older people sectors. Lockdown and physical distancing measures required to contain the spread of the virus have led to an increase of the unpaid labour predominantly covered by women, including for home-schooling and providing care for family members who are elderly, sick or living with disabilities. Migrant women, Roma and women from other minorities are overrepresented in the informal sector in the region, where pay is often low, there is no job security, and no safety net if a crisis like COVID-19 results in a loss of income. Informal work includes occupations that are most likely to be affected by a quarantine, physical distancing, and economic slowdown, such as domestic work, sex work and seasonal work; with many women having to continue to work even if governments or their employers fail to take sufficient measures to protect their health during the crisis. Women who are undocumented and often work in these precarious industries, are excluded from social security measures such as government emergency COVID-19 funds. Women are also overrepresented in service industries, such as retail or tourism, which have been among the hardest hit by the response to COVID-19.

States must take into account the underlying gender and other, intersecting forms of discrimination and marginalisation that increase women and girls' vulnerability in this context; particularly when ensuring access to essential, time-sensitive services such as safe abortion, post-abortion care and miscarriage treatment, contraception and menstrual hygiene products; and when guaranteeing the assistance and protection of people who are at risk of experiencing domestic and sexual and other gender-based violence, trafficking and other forms of exploitation. These intersections include disabilities, age, gender identity and sexual orientation, migrant or refugee status, belonging to racial, ethnic, national, religious or linguistic minorities (including Roma) and being a human rights defender. Roma communities throughout Europe are also in a especially vulnerable situation. The years of stigma and discrimination that they have suffered are now being coupled with the imposition of disproportionate and discriminatory quarantines by the authorities.

In the past few months, European governments have introduced states of emergency, curfews and general lockdowns to slow the spread of COVID-19. As a result millions of people are facing unprecedented restrictions on their daily lives. It is imperative that while working to prevent the effects of the global pandemic, States take appropriate measures to give effect to the rights, duties, and freedoms enshrined under international law, including implementing the necessary measures for the prevention of threats to the life, safety, and health of women and girls and continuing to protect the most marginalised groups. Further, as many States now turn their attention to transitioning out of lockdown periods, it is vital that human rights continue to be respected, protected and fulfilled. While immediate responses are still needed in the context of the pandemic, this crisis has shed light on the entrenched hardships women and girls face in Europe and globally. States should draw a lesson and seize the opportunity to address the longstanding barriers that prevent women and girls from living free from violence and discrimination.

HOW TO USE THIS GUIDE

This guide provides a roadmap for national and local government authorities and agencies to better understand the obligations they must fulfil as regards women and girls' human rights during the pandemic, the transitioning out of lockdowns, and in their aftermath. As new spikes in coronavirus cases might lead authorities to reintroduce quarantine and physical distancing measures this guide should be kept in mind when designing new measures.

This is a brief guide and does not cover the full extent of State obligations under international human rights law and standards, which are both immediate and progressive. Instead, it focuses on some specific aspects of the crisis which differentially and disproportionately impact women and girls. Importantly, States should ensure that women are enabled to effectively participate in the decision making relating to COVID-19.

For civil society and human rights organizations, this guide may be used as a baseline for assessing State responses to the pandemic, as well as its aftermath and long-term effects, as regards their obligations to uphold women's and girls' rights, and as a support for advocacy activities directed at getting governments and authorities to apply a human rights approach to any response.

For humanitarian and international cooperation organizations, this guide may complement efforts underway to provide technical support and assistance to States as they prepare contingency and pandemic response plans in order to ensure that these responses include a gender-sensitive, intersectional and human rights-based approach and that effective measures that were in place prior to the crisis continue to be implemented.

This guide is also meant to be an inventory of competencies and activities that States should strengthen as they grapple with their responses to the global COVID-19 pandemic. This must be accompanied by appropriation and provision of sufficient resources to allow the necessary actions to be taken to ensure proper protections for women and girls' rights during the crisis and beyond.

AN URGENT RESPONSE: ACTIONS TO GUARANTEE AND PROTECT THE HUMAN RIGHTS OF WOMEN AND GIRLS

1) THE RIGHTS TO LIVE FREE FROM VIOLENCE, TORTURE AND CRUEL, INHUMAN OR DEGRADING TREATMENT

In times of crisis, women and girls face increased risks of gender-based and domestic violence. As UN Women has noted, violence against women is "the most widespread human rights violation in the world". All States in the region, as well as the European Union as an organization, should sign and ratify without reservations the Council of Europe Convention on preventing and combatting violence against women and domestic violence (Istanbul Convention) and should, therefore, address these risks following its principles, definitions and standards, as affirmed by the Committee of the parties to the Istanbul Convention.

Staying at home reduces the spread of COVID-19. However, for millions of women and girls, staying at home does not mean safety, but rather a greater risk of violence including sexual violence. Prior to the pandemic, it has been reported that one in five women in the EU has experienced some form of physical and/or sexual violence from a current or previous partner. Since the beginning of the lockdowns, shelters, emergency helplines, organizations and official institutions have alerted of a spike in reports of women and girls at risk of violence at home. The risk is very real. According to recent data by the WHO, emergency calls by women being subjected to threats or violence from their partner have risen by up to 60% compared with last year in many European countries. In some countries, the authorities point to a decrease in domestic violence incident reports, which may indicate limited reporting options for women sharing their household with their abuser.

As the OHCHR and the Council of Europe have identified, many countries in the region (like Spain, France, Ireland, Italy, Portugal, Austria or Belgium) are taking measures to support women and girls at risk of violence at home, including awareness campaigns, setting up temporary shelters for victims in hotels or promoting helplines. But the pandemic has also exposed the shortcomings of the measures put in place in "normal times" which has in turn limited the capacity to react to the needs during the crisis. As mentioned by the EU Fundamental Rights Agency, the number of beds in women's shelters is only about half that required under the Istanbul Convention.

The Group of Experts on Action against Trafficking in Human Beings (GRETA) and the OSCE Special Representative for combatting trafficking in Human Beings have noted that victims of human trafficking can find themselves in an even more vulnerable position, including as a result of limited capacities of services supporting them.

According to the WHO, at least 55 million children experience some form of violence in the region. The Council of Europe, the UN Special Representative on Violence against children, the Committee on the Rights of the Child and other UN Experts have highlighted the importance of preventing and halting violence against children, as well as exploitation, sale and trafficking of children, the risk of which is increased during COVID-19.

During the crisis, law enforcement agencies and the military are in charge of implementing quarantines and curfews throughout the region. Women who face multiple and intersecting forms of discrimination, such as women from racialized communities, Roma, migrant or asylum-seeking women, sex workers, women with disabilities, trans women and others in positions of marginalisation, face an increased risk of being targeted by state agents and suffering harms including racial profiling, torture and other ill treatment, and gender-based violence.

States should ensure that the needs of homeless girls and women are reflected in all protection measures and that they are not discriminated against in accessing care because of their homelessness, behaviour, addiction, health or legal status.

States should ensure that protection mechanisms for survivors of violence are easily accessible while travel restrictions and quarantine orders are in effect, and that they remain so as the sit-

uation shifts. It is essential that perpetrators and alleged perpetrators are removed from the home and that survivors and women and children at risk of domestic and sexual and gender-based violence are able to access protection and services as needed as lockdown or quarantine measures begin to lift in many countries.

States must be prepared for an increase in reports of gender-based violence during this time and should implement measures accordingly. This should include initiatives such as:

- Judicial authorities should ensure women at risk and survivors of sexual and domestic violence and their children have effective access to justice and timely imposition and renewal of protective measures such as emergency barring orders and restraining orders.
- Competent national and local authorities should ensure that support services such as shelters remain open and that they have sufficient capacity to provide safe space for self-isolation if needed, and/or new facilities are made available for women and girls who must leave their homes while quarantine orders are in effect in order to be protected from their assailants; virtual and/or telephone counselling services should be provided, and appropriate measures should be taken to ensure privacy for women and girls. As lockdowns end or are gradually eased, authorities should evaluate the possibility of maintaining the protection mechanisms put in place during quarantine.
- The authorities should make the availability of these services public through awareness campaigns to ensure all women have information regarding services available during social distancing periods. Specific attention should be paid to women and girls from marginalised groups and their specific needs in terms of accessibility and adequacy of the information provided.
- Services allowing women and girls to report violence and receive assistance including legal, medical, psychosocial and economic support should be designated as essential services and remain open during quarantine and in the period that follows.
- Innovative alert and referral mechanisms must be established to provide assistance during the pandemic to allow for effective reporting of cases of domestic violence, sexual violence, trafficking, risk of feminicide, and similar incidents. Women must be able to continue to access these alert mechanisms without the risk of being discovered by their partners even under lockdown. This includes the use of texts, emails, online chats or code words in pharmacies and grocery stores, so that even women and girls without an internet connection can access them.
- Authorities should adopt necessary measures to allow search protocols to be carried out when women and girls are reported missing while quarantine orders are in effect. Ongoing efforts must remain in place after quarantine periods to ensure gender-based violence against women and girls does not lead to impunity.
- Travel and movement restrictions should include exceptions for survivors of violence who need to seek assistance outside the home or who escape from situations of violence or exploitation. Revictimization, prosecution or punishment of survivors should be prevented. As lockdowns are lifted, ongoing situations of violence must be addressed by authorities.
- States should strengthen efforts to effectively identify victims of trafficking in human beings and other forms of exploitation and to adopt measures to assist them in their physical, psy-

chological and social wellbeing and to protect their rights, including the right to a recovery and reflection period. States should provide an effective remedy and ensure victims can report without fears based on their immigration status.

- All of the above measures should be available and accessible to all women and girls within the State's jurisdiction, regardless of their immigration status or lack thereof. "Firewalls" should be put in place between immigration authorities and all support services to allow undocumented migrant women access to protection and support without fear of deportation or other negative repercussions on them.
- Outreach services where women may be unable to physically reach services (i.e. refugee camps), should be adapted to the public health measures in place during the pandemic.
- Ensure the participation of diverse women's rights groups, networks and assistance organizations in the development of response measures and decision making.
- Ensure the collection of disaggregated data by gender/sex, age and other relevant characteristics on the incidence of violence against women and girls to paint a clear picture of the risks during the crisis and to pave the way for an intersectional and gender-responsive policymaking.
- Allocate sufficient funding and resources to all services, shelters and organizations that provide vital protection and support to women and girls survivors of gender-based violence and recognise them as essential services.

2) ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH SERVICES, COMMODITIES AND INFORMATION

Access to healthcare services, commodities and information is a key part of human rights protected under multiple regional and international human rights instruments that establish the right of all persons to enjoy the highest possible level of physical and mental health, including sexual and reproductive health. Violations of the rights to life and health, including sexual and reproductive rights of women, are forms of gender-based violence that may in some cases constitute torture or cruel, inhuman, or degrading treatment. Failure to provide these essential services is a form of discrimination against women and girls because it places their lives, health, and physical and psychological integrity at risk.

Regional human rights organizations have called on European countries to adopt measures that ensure safe and timely access to abortion care during the crisis and have emphasized how restrictions on essential sexual and reproductive health services have a disproportionate impact on women belonging to marginalised groups. States have an obligation to ensure access to healthcare services in accordance with principles of dignity, equality, and non-discrimination in light of the range of vulnerabilities or risk situations that women, girls and other people who may become pregnant may face while quarantine and isolation measures are in effect. Some countries, including France and the United Kingdom, worryingly, except for Northern Ireland, have already enacted specific measures to secure access to abortion. Due to the ongoing nature of the pandemic and other barriers to access, such measures should remain in place on a long-term basis. However, civil society organizations, the European Parliament and UN experts have raised their

concerns on countries like Poland, Romania or Slovakia for using COVID-19 as an opportunity to further undermine or restrict access to sexual and reproductive rights, often in contexts of pre-existing legal and practical barriers to accessing them.

States should ensure that sexual and reproductive health services, especially access to contraception, emergency contraception, abortion, post-abortion and miscarriage care, and maternal healthcare continue to be available, adequate, accessible, affordable and timely, as follows:

- States must ensure that health care for pregnant and breastfeeding people remains accessible and affordable for all, in line with the WHO guidelines.
- Contraception, abortion and post-abortion care, maternal healthcare including prenatal and postpartum care should be considered essential services during quarantine. Any contingency plans adopted should take this into account and these services should be exempted from travel restrictions in order to ensure access. As lockdowns are lifted, these services should be classed as priorities due to the urgency that they require.
- States should support service providers' ability to travel and continue their work, in particular by granting the necessary travel permits to medical providers, humanitarian groups, and co-operation organizations both during times of quarantine and isolation and as quarantines are totally or partially lifted. Measures should be taken to provide healthcare personnel and their patients with necessary protections.
- States should adopt measures to facilitate access to safe abortion care using medication and telehealth tools. Travel restrictions should not apply to women needing access to sexual and reproductive health services.
- Delays in access to voluntary termination of pregnancy services may be anticipated during the crisis, so States whose abortion laws are based on a time limits model should consider increasing flexibility in those time limits, removing both mandatory waiting periods and counselling.
- Where a doctor's authorization is required to perform an abortion, this should be limited to one doctor. Requirements for multiple doctors' approval should be removed.
- The governments of the six European countries where abortion is banned or severely restricted (Andorra, Liechtenstein, Malta, Monaco, Poland and San Marino) should reform these laws, decriminalize abortion and ensure abortion services are available and accessible.
- Measures should be taken to increase assistance to territories and regions that have historically had greater barriers to access health services. Local authorities should encourage implementation of these measures with the support of national authorities.
- Emergency obstetric care should be prioritized during the crisis, and measures should be taken to provide healthcare personnel with necessary protections.
- Healthcare services, including emergency contraception and abortion care, should be guaranteed for women and girls survivors of sexual violence during the crisis. Referral pathways should be updated to reflect the changes in available facilities. Measures should be taken to provide healthcare personnel and women with necessary protections.
- States should consider any impact on supply and distribution chains for family planning methods and other sexual and reproductive health commodities, for instance related to menstrual

health. States should continue to monitor the situation as restrictions are lifted and supply chains might remain affected.

- Adequate steps must be taken to ensure that migrant and asylum-seeking women have effective access to the treatment and services referred to in this list, irrespective of their migration status, and taking into account existing restrictions on their freedom of movement as a result of COVID-19 response measures or based on their migration situation.
- States should uphold the right to access to information with an intersectional approach by continuing to ensure the dissemination, publication, and public access to information on sexual and reproductive rights and health services during the pandemic and any special measures taken to ensure access to services during the ongoing crisis, in relevant languages for targeted communities and in accessible formats for people with disabilities and other vulnerable groups. The dissemination strategies should consider the best channels and need of outreach e.g. disseminate the information in Roma settlements and neighbourhoods, institutions for people with disabilities, provisional dwellings of undocumented migrants, amongst sex workers and as part of online school programmes for adolescents.

3) WOMEN'S AND GIRLS' RIGHTS IN THE CONTEXT OF MIGRATION AND HUMAN MOBILITY

In an attempt to control the spread of COVID-19, many States within the EU have temporarily reintroduced internal border controls, limiting freedom of movement within the EU, and some closed Europe's external borders to refugees. A few countries have used COVID-19 as a pretext to deny protection, turn refugees away or close their ports and refuse disembarkation of rescued people. In many countries, suspensions or restriction of asylum and migration services have been introduced in response to the COVID-19 crisis, impacting the ability to register protection claims or access benefits and services connected to one's migration or asylum status.

UNHCR, WHO and IOM have reminded States that the rights of migrants, refugees, displaced people, and persons at risk of being stateless must be protected in the context of the pandemic response, and that even as borders are being closed, the principle of non-refoulement must be observed at all times. Regional human rights organizations have also stressed the importance of protecting the life and health of migrants and refugees in the context of the COVID-19 crisis. Migrants' rights to life and health can be compromised by indiscriminate border closures and denial of primary health care.

Temporary border closures and re-introduction of border controls in some countries in the region will affect long-term cross-border mobility and access to legal pathways and international protection. However, the measures put in place to respond to the COVID-19 crisis must preserve the right to seek asylum and not unduly restrict migrants' right to liberty. Public health concerns can never justify the systematic use of immigration detention against individuals or groups of asylum-seekers or refugees. In view of the heightened risks for detained people and the suspension of forced returns in some countries, the Council of Europe Commissioner for Human Rights has also urged Member States to release asylum seekers and migrants in detention. Moreover,

UN experts have called on States to take urgent measures to protect migrants and trafficked persons in their COVID-19 response plans, welcoming the measures introduced in Portugal to grant temporary residency rights to all migrants and asylum seekers with pending residency permits in the country. More recently, as part of the recovery plan and to protect the public and individual health, Italy has announced the regularization of thousands of migrant workers in the agriculture, fisheries and domestic care sectors.

The above mentioned measures regarding access to justice, to sexual and reproductive health services and to a life free of violence and any form of torture and other ill-treatment should apply to migrant, refugee and asylum-seeking women and girls, and more broadly, to all women and girls on the move in Europe, regardless of their migration status. Women and girls on the move often experience multiple and compounded forms of discrimination. Undocumented migrant women face increased challenges depending on the territory they live in, particularly barriers to access to healthcare services. Border closures increase the use of irregular crossing points, placing women and girls at greater risk of violence, exploitation, and trafficking in human beings.

Women and girls live in often inadequate and overcrowded refugee camps and informal settlements across Europe that may put them at severe health risks, which the COVID-19 crisis only exacerbates. On many occasions, in such settings, women and girls' safety and security are also at risk, including of sexual violence and abuse. The absence of basic amenities, such as clean running water and soap, insufficient presence of medical personnel, and poor access to adequate healthcare information are major problems in these settings.

Women migrant workers are more exposed to sexual violence and labour exploitation, especially in sectors such as temporary, domestic, care and seasonal work. UN experts, civil society organizations and international bodies like the ILO have called for the protection of migrant workers during the COVID-19 pandemic and to ensure rights-based, gender sensitive responses from both State and non-State actors.

States must therefore adopt measures that take into account the differential impact of the crisis on women and girls on the move, including the following:

- Put in place clear service delivery mechanisms for migrants, asylum-seekers and people on the move and include them in the pandemic contingency plans, ensuring their access to healthcare, prevention systems and treatment.
- Ensure access to essential healthcare services, including sexual and reproductive health services, for migrant and asylum-seeking women and girls, including undocumented migrant women, in accordance with the above guidelines.
- Follow the guidance developed by the WHO European Region intended to address the needs and rights of asylum-seekers and migrants living in all types of settings including access to essential services such as water and sanitation services.

- Allocate sufficient personnel and capacities to identify victims of trafficking in human beings and other forms of exploitation, ensuring the implementation of protocols, particularly where borders are closed or where other migration-related services are suspended or restricted.
- In asylum cases where sexual and gender-based violence is involved, authorities should ensure to afford special safeguards to the applicants, both during the assessment of their asylum application, and in terms of access to services and support to ensure their wellbeing throughout the procedure.
- States should put in place clear guidelines to ensure that individuals, either alone or in association with others, including humanitarian aid groups can continue to perform their work, which also covers those providing assistance to victims of gender-based violence or essential sexual and reproductive health services. Local authorities should assist in these efforts, including by issuing the necessary permits for healthcare personnel so they can travel in safety and by supporting provision of protective equipment for personnel and their patients where necessary.
- Release people from immigration detention, as detention increases the risk of infection and, especially in the context of the generalised difficulties in carrying out forced returns, cannot generally be considered justifiable.
- Ensure access to healthcare and protection for migrants held in detention centres or living in refugee camps or informal settlements, giving specific consideration to the situation of pregnant and older women, women who are survivors of or at risk of sexual violence, and victims of trafficking and exploitation or other abuse.
- States must save the lives of people at sea in line with their maritime and human rights obligations, by promptly responding to any calls of distress, deploying the necessary rescue capacity in a timely manner, and effectively co-operating to disembark survivors in a place of safety, while ensuring that necessary measures are in place to protect the health of all involved.
- States must observe labour rights of migrants working in essential occupations, including those working in agriculture, or informal sectors, such as sex workers, and ensure that they have access to essential services and adequate living conditions, safety, social security and healthcare, without discrimination. This can be achieved by putting in place "firewalls" between immigration authorities and relevant services.
- To protect migrants' right to health and the public health of the general population, States should consider the temporary regularization of undocumented migrants.
- Provide protection against discrimination and abuse of women domestic workers, many of whom are migrant workers, often with undocumented status, including income support and measures to limit their risk of exposure to COVID-19 in the workplace, as well as timely access to testing and treatment.
- Respect and preserve the principle of the best interest of the child and the right to a family life in decisions affecting children, including unaccompanied children and separated children.
- Provide adequate and accessible information to ensure that migrants, refugees and asylum seekers, including domestic workers and sex workers, do not face discrimination or stigma in relation to COVID-19.

4) ACCESS TO JUSTICE

High levels of impunity are one of the greatest challenges to access to justice for women and girls who are survivors of violence in the region. States have an obligation to ensure due diligence in the investigation and prosecution of all cases of gender-based violence. International and regional human rights bodies have found that judicial ineffectiveness results in impunity, perpetuates gender-based violence, and sends a message to society that violence against women and girls may be tolerated and accepted.

In order to ensure that States keep up with their obligations relating to protection from, investigation and prosecution of all cases of gender-based violence, and continue fighting impunity therefrom, it is of great importance that the European Court of Human Rights continues with its functions, notwithstanding the need to undertake some limitations. Despite derogations in time of emergency being permissible (article 15 of the Convention), some rights are non-derogable. The Court should continue, as far as possible, to provide a mechanism for ensuring access to justice and effective remedies to fight impunity for human rights violations. This implies that applications filed under Rule no. 39 should be registered, allocated and decided on.

The obligation to ensure access to justice for women and girls should be strictly observed in contingency plans for the COVID-19 crisis and beyond. The authorities should take the following actions:

- States should ensure that protection from, and immediate, impartial investigation and prosecution of all cases of gender-based violence continues during the lockdown and as measures are lifted. Alleged perpetrators should be prosecuted in accordance with international procedural standards.
- Legal assistance and support services for women survivors of violence should be considered essential during quarantine, and local and national authorities should take steps to ensure their continued availability, accessibility and funding. This should be maintained as quarantines are lifted.
- Survivors of gender-based violence, including girls, should have access to flexible means of making complaints and seeking protections, such as online, via telephone, or through other alternative means, taking into account the travel restrictions in effect. Once travel is permitted, appropriate response and follow up by the authorities must continue.
- Law enforcement agencies should prioritize responding to and following up on complaints of violence against women and girls as they perform their duties during the crisis.
- Any extension of judicial time limits should take into account the obligation to ensure access to justice for women and girls survivors of violence within a reasonable time and without undue delay.
- Mechanisms to ensure proper collection of forensic evidence in cases of physical, sexual, and/or psychological violence for use in court proceedings should remain available.
- Adequate records of complaints of gender-based violence made during the crisis should be kept and follow-up mechanisms should be put in place to assist survivors and initiate appropriate legal actions including prosecuting perpetrators.

- Core child protection services must be reinforced to ensure that children continue to be protected against violence and abuse throughout the pandemic and beyond. Specific measures must be put in place to safeguard children who may be at an increased risk of abuse, harm or exploitation as a result of any State measures in response to the pandemic. Such measures must necessarily include information facilitated in a child-friendly manner and should continue to be guaranteed once the lockdowns restrictions are lifted.

May 2020

women's LINK worldwide

womenslinkworldwide.org
Twitter: @WomensLink

AMNESTY INTERNATIONAL

amnesty.org
Twitter: @amnesty

IPPF International Planned Parenthood Federation
European Network

ippfen.org
Twitter: @ippfen