

**Gender, Justice and Health Thematic Group of People’s Health Movement (PHM)
Feb’ 20- Feb ‘21**

Report by Sarojini N, Thematic Group Coordinator

The last one year (February 2020-Feb 2021) clearly demonstrated how the COVID 19 pandemic and the subsequent lockdowns has amplified existing inequalities within countries. Many countries witnessed and faced this crisis in similar and yet varying ways. The current pandemic has impacted the lives of everyone but certainly has been having a disproportionate impact on the lives of the marginalised – women, girls, daily labourers, sex workers, as well as persons with disability, transpersons and many others. It became more critical to inform, exchange and collectively reflect through sharing our knowledge resources, amplifying our voices, visibilising issues and fostering connections for support and resilience which the Gender, Justice and Health Thematic Group could do in the last one year through various activities.

The objective of this thematic group is to foreground gender in the larger discourses on health, and healthcare. The Gender Justice thematic group made an effort to include the vision of PHM by- informing the PHM mandate and the campaign for Health ForAll and vis-à-vis gender in its activities. This also became a platform to articulate our concerns as well as to share and learn from each other the creative struggles waged by people, especially by women, against injustice and inequality. The thematic group received an overwhelming response from PHM members and continues to receive requests to be part of the circle from different regions. In a span of one year, the thematic group was able to learn and share about ongoing movements and advocacy actions across PHM regions.

I. COVID 19, Lock Down and Health Rights

I.1. Webinar - “Not in Lockdown: Voices and Struggles Against Gender, Racial and Social Injustices”

With each passing day in the unprecedented crisis situation around COVID 19 pandemic, we are being witness to pre-existing inequalities and injustices that have been laid out around us. The resolve and strength of people’s movements and resistance feel more pertinent today as ever felt in the history of such struggles. COVID 19 crisis and the "lockdown" has gendered impact in terms of workload and reduced economic opportunities, lack of access to health facilities, nutrition and increase in incidence of gender-based violence, communalisation and racialisation along with stigma associated with COVID 19.

As committed to building people’s voices and movements on health for all, the critical inter-linkages of gender and its intersectionality with-social, economic and political determinants of health; identities of race, caste, religion, ethnicity, sexual orientation; varied geographies, and contexts become an extremely important area to look into.

Realising that COVID 19 pandemic is foremost a concern of public health crisis, its close association

with human rights, social justice, and health equity have been clearly visible across varied regions a webinar was organised on 25th June 2020 by Sama-Resource Group for Women and Health & PHM Global. Looking at the gendered impact of COVID 19-19 crisis and the “lockdown”, the webinar brought together a panel from South and South East Asia, US, Africa, Palestine for sharing stories and experiences of resistance to derive strength, inspiration and to learn from each other in cross regional context. An effort was made to translate the invite to Arabic, Korean, French and Spanish for a wider outreach. The webinar was well attended from participants from almost 28 countries.

Sama Resource Group for Women and Health and People's Health Movement (PHM)
invite you for a Webinar

**Not in Lockdown:
Voices and Struggles against Gender, Racial and Social Injustices**

JUNE 25, 2020
5:30 PM TO 7:00 PM INDIAN STANDARD TIME (GMT +5:30 HRS)

 SARA HOSSAIN (BANGLADESH) MODERATOR AND FLAGGING KEY ISSUES ON THE THEME	 SAROJINI N (INDIA) THE PANDEMIC AND SOLIDARITY: WHY IS JUSTICE IMPORTANT FOR HEALTH FOR MARGINALISED, INDIA
 LIEGH HAYNES (USA): INEQUITIES ON TOP OF INEQUITIES: RACISM, VIOLENCE AND REPRESSION IN THE US DURING THE COVID 19 PANDEMIC	 SAEROM KIM (SOUTH KOREA): GENDERED IMPACT OF THE COVID CRISIS IN SOUTH KOREA
 SHATHA ODEH (PALESTINE): PANDEMIC WOES TO CONFLICT SETTINGS, CENTERING GENDER DISCUSSIONS FROM PALESTINE	 PENINAH KHISA (KENYA): UNDERSTANDING GENDER BARRIERS IN ACCESS TO HEALTH AND DETERMINANTS, EAST AFRICA

II. Building Capacities of young activists on gender, equity and intersectionality

II.1. Discussion on gender and mental health as part of South Asian region International People's Health University (IPHU)



The South Asian region International People's Health University (IPHU) was co-organised by Sama and the PHM in February 2020 in Kathmandu (Nepal). The IPHU was meant to build capacities of young health professionals, social workers, researchers, and activists. included participation was from India, Pakistan, Sri Lanka, Nepal, Bhutan and Bangladesh. The IPHU content and discussions covered concepts of equity and health, social determinants; the political economy of health, an understanding of health systems and its transition, impact of trade on health, issues related to access to medicines, etc. Sama contributed to conceptualising and facilitating the sessions on gender, intersectionality, equity in health, as well as a day-long session on mental health and its social, economic and political determinants.



The IPHU included a day-long session on mental health particularly from the lens of gender, sexuality and rights. The session on 'the 'political economy of mental health' was conceptualized by Sama with the Indian academic Ketaki Ranade (KP) who has vast experience of working on mental health. The session reflected on the global discourse of mental health, challenged the prevailing paradigm of biomedical understanding of mental health and raised the significant concern of 'treatment gap', especially in terms of community level mental health care workers and services. The session critically examined the 'logic of global mental health'.

As the resource person summarised:

...the narration of this logic considers mental health as an 'individual problem/issue'. Hence, it ignores the issue of determinants of health. So, the solutions are also suggested based on the perspective of 'individuality'. It puts more considerable responsibility on a person who is seeking the service and does not consider the approach of community support and ignores the determinants.

II.2. This year the thematic group involved more young people into **the activities** for example the video by the young activist from Nepal. It also strengthened the PHM linkages with other global networks such as WGNRR and ARROW, brought in many PHM comrades from MENA, South East Asia, Africa and SA, South America.

II.3. Providing, support and information, materials for IPHU Barcelona for the young activists on gender

III. Campaigns

III.1. International Safe Abortion Day on 28th September

The PHM Gender Justice and Health thematic group and Sama Resource Group for Women and Health jointly organised a campaign on **International Safe Abortion Day on 28th September** to demand for 'Access to safe, quality and legal abortion' and strengthen global solidarity with women's /feminists and public health movements fighting for the Abortion rights of ALL. This campaign also follows up to our previous [statement](#) released on the issue after the People's Health Assembly in Dhaka, 2018.



The call for the campaign on International Safe Abortion Day was created in English, Hindi, French and Spanish and circulated to various regional and country groups. We invited videos and posters from different regions to speak on the issues of abortion in their context and received video messages from various PHM chapters from Kenya, US, India, Bangladesh and from the Women's Global Network on Reproductive Rights (WGNRR). Posters and messages for online campaign were also created. As PHM and SAMA, we joined other women's rights organization on social media to reiterate the demands for abortion as a rights and safe abortion services within the health systems.

A video has been uploaded on the issue for a wider outreach by the young PHM activists. Volunteers from PHM made a call video about the campaign following which we received solidarity video messages and demands from various countries. Peninah from PHM Kenya talked about how safe abortion is yet to be a reality in her country demanding that we hold our governments accountable for right to health care.

Leigh Haynes from the PHM, USA shared a message speaking about how Human Rights are incomplete without Safe Abortion; and that access to safe, comprehensive abortion care within health systems must be ensured. Altaf Hosain from Bangladesh Association for Prevention of Septic Abortion, in his video message told that Bangladesh has had a unique Menstrual Regulation (MR) programme since 1979. Despite the availability of MR services, many women resort to clandestine abortions as they are denied MR services due to various reasons. The public health crisis has exacerbated the risks for women and girls to sexual and other forms of violence, lack of access to contraception and unintended pregnancies. He says it is time to hear the unheard voices of women who are being denied their right to services, finding innovative ideas and fostering dialogues on the issue.

Some of the videos from this campaign sent by our countries and networks can be found at PHM YouTube page [here](#).

The thematic group plans to continue and follow up this issue in the background of gradual shifts in laws of various countries (United States, India) and to monitor how the COVID 19 pandemic is shaping the issue in terms of accessibility and availability towards underlining the comprehensive approach to demand health systems accountability including provisioning of SRH services and for promoting and fulfilling reproductive health, rights and overall wellbeing.

III.2. Sixteen Days of Activism against Gender Based Violence (GBV)- PHM Gender Justice and Health thematic group and Sama undertook a one-day campaign on 10th December-the international human rights day which is also the concluding day of the '16 days campaign on GBV' held globally.

Gender Based Violence is a Violation of Human Rights

THIS HUMAN RIGHTS DAY, LET US COME TOGETHER TO:

- Recognise Gender Based Violence as a Public Health issue
- Amplify our voices against Gender Based Violence

Right to safe, dignified and violence-free life for ALL

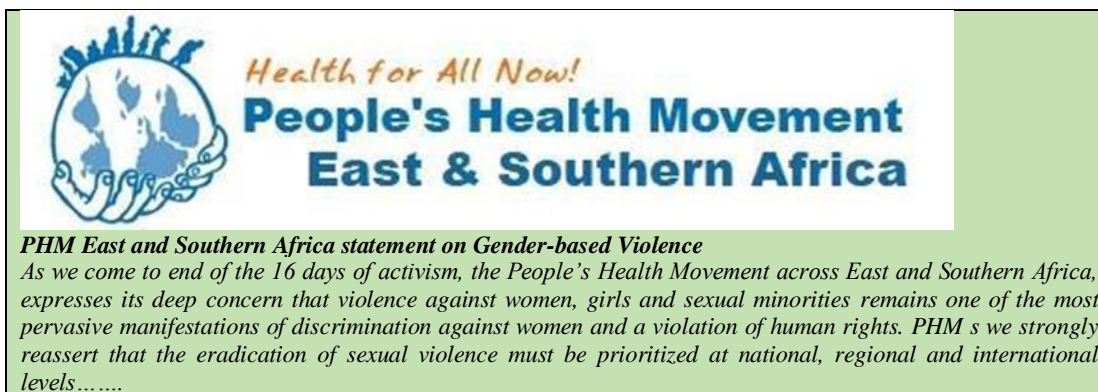
#10th December | Human Rights Day |
Sixteen Days Activism 2020

The '16 days of Activism Against Gender based violence' campaign, started from 25th November marking the 'International Day for the Elimination of Violence Against Women', and concluded on 10th December, which is the 'Human Rights Day'. PHM was already involved and undertaking the campaign last year. A call was sent to all the regional chapters to join on 10th December, the International Human Rights Day, in raising our voices for the recognition of GBV as a public health issue including psychosocial care and medico-legal responses for survivors of GBV.

The thematic group also participated in the invited panel as part of sessions organised by WGNRR during the sixteen days of activism. PHM was invited to facilitate the discussions on SRHR, Reproductive Justice (RJ), and the Pandemic on 3rd December as part of the Young People, Reproductive Justice, and Abortion Rights Regional Online Discussion Series. Adsa, a young feminist from PHM India flagged the discussion on structural health inequities in the context of COVID 19/pandemic; the setbacks within SRHR agenda in the region; and the reflection on looking at the reproductive justice framework to understand the intersectional gendered inequalities on the frontlines of COVID 19 including health systems and the realities around social, political and economic determinants of health.



Further, **PHM Kenya** undertook country level initiative for documentation of case study on ‘Impact of pre-existing gender inequalities on adolescent girls and women in the midst of the pandemic in Kenya.’ Through interviews, videos interviews of survivors and other stakeholders, the case study is planned to highlight the issue of GBV and gender inequalities and its impact on health; inform and call to action to end, prevent and respond to sexual and gender-based violence and to affirm the dignity, rights and needs of all women, children and others who are vulnerable or are made vulnerable to such violence.



We received posters and video messages from different countries and carried out an active social media campaign. Short video ([link](#)) from young activists Usha Neupane from PHM Nepal and from India speaking on Gender Based Violence were widely disseminated.

Similarly, Maria Hamlin Zunega from Nicaragua sent her **message** on 10th December, Human Rights Day highlighting the issues related women prisoners, particularly political prisoners who suffer discrimination and humiliation and violence in prisons. The issue of women prisoners and their health is an important issue which has received less attention.

"For thousands of years you have tried
To silence me...in the name
Of religion, motherhood and
Culture...you have robbed
Me of my human dignity.
Don't you raise those hands
Of violence again.
Freedom awaits me."



Posters prepared by colleagues at Naripokkho, Bangladesh in Bangla with English translation were shared on social media

IV. Contribution to the Global Health Watch: An email was sent to the networks to contribute case studies not just related to Gender and COVID 19 but other related issues which were not covered in previous GHW reports.

V. Other activities:

- V.1. The thematic group will be engaged with SAMA on the issue related to access to medicines, diagnostics and COVID 19 vaccines particularly from the FLW perspective.
- V.2. Sarojini and Deepa from the thematic group also shared their reflections and the future plans towards the Strategic Plan of PHM specific to the Thematic Group
- V.3. Inputs for developing the guidance document on Sexual Harassment within workplace/movements/activities of PHM

VI. Challenges:

1. Despite the impact of the COVID 19 pandemic and lockdowns, curtailing physical movements, the thematic group could manage to sustain the activities and highlight the situation.
2. However, there is a need to expand the Group and include more emerging issues. There is an effort to reach out to diverse groups so that the thematic group can be more inclusive
3. There is, however, a need for more creative spaces for interaction with circle members which is happening right now.
4. It is very crucial for PHM to make sure that gender becomes an integral part of all thematic groups, even if there is a separate thematic group on gender. Gender is a cross cutting aspect for all the issues and there should be a conscious effort to include gender while addressing health systems, nutrition, conflict and war, environment and also access to medicines.
5. Any related opportunities in terms of articles, modules, campaigns, events should be shared with the TG. This will encourage to mobilise other members from the Thematic group for attending and representing PHM in any relevant seminars, meetings, WHO watch (for the gender, SRHR part) and also contribute to writing articles.
6. A need for more capacity building on gender for the PHM regional chapters is also important along with institutionalising certain policies, guidance documents such as Sexual Harassment.
7. The report format should be revisited. Currently it appears to be a long list of events which can go into annexures. The report should have reflections from the participants, highlights from the

events, impact of the activities, challenges, opportunities and strategies towards movement building.

8. More regular support in terms of human resources and an acknowledgment to all the young activists involved in these initiatives is very essential to expand and sustain the work related to the thematic group.
9. It will be useful to have regular communication/updates from the SC of PHM as the thematic coordinators as all of them are not a part of the governance structure. It will also be useful if there is a direct communication with the SC and also with the TG's which can facilitate direct engagement with the regional chapters. This will strengthen the thematic groups. – not only about events organised/hosted by PHM, but also those by other coalition members – so that we can share/inform/participate/provide inputs into those initiatives. All the thematic groups together under the umbrella of Health for ALL, can strategize for a better world that is founded on social justice, non-discrimination and equal opportunity for all people.

Acknowledgment: I would like to acknowledge Adsa, Deepa, Ritika from Sama team and Deepika Joshi from PHM Global for their support for compiling the report and also being a part of some of the initiatives.

Please visit the [Gender Justice and Health thematic](#) page for more information.

Sarojini N, Thematic Group Coordinator on Gender, Justice and Health
c/o Sama- Resource Group for Women & Health
B-45, 2nd Floor, Main Road Shivalik, Malviya Nagar,
New Delhi-110017
email: sarojini@phmovement.org
twitter: @Saro_N2020