

Board of Trustees
02-03 June 2021

Refers to
agenda item 3

Agenda Item: SRHR Regeneration post Covid.

Summary: the world post pandemic will be very different – though maybe not different enough. How will this affect sexual and reproductive health and rights? How should IPPF contribute and adjust?

Action Required:

The Board to review the paper and provide guidance to feed into the strategy design process and 2022 operations.

A context forever changed.

Most believe that like the fall of the Berlin Wall or the collapse of Lehman Brothers, the coronavirus pandemic is a world-shattering event with far-ranging consequences. Just as this disease has shattered lives, disrupted markets and exposed the competence (or lack thereof) of governments, it will lead to permanent shifts that we can only begin to imagine today.

How will societies change and grow in the wake of the pandemic? We don't yet know the answer – and, in some respects, we don't even know the right questions to ask. Much is being debated and every thought leader is offering his or her perspective. And we know that economic policy, changes in the world of work, in education and health will impact sexual and reproductive outcomes as much as any services we can provide. Can we re-imagine recovery? Can we challenge and shape political choices that will be framed as technocratic necessities?

Economic policy and changes in the world of work

The global economy is now in its worst downturn since the Great Depression. Government debt around the world shot up last year to approach levels last seen in the aftermath of World War II, as nations stepped up spending to fight the Covid-19 pandemic and its economic fallout.

Public debt as a share of global gross domestic product surged to 98% by the end of December from 84% at the end of 2019, before the pandemic struck. The increase was particularly large among advanced economies, which can easily borrow at low interest rates. The debt-to-GDP ratio among those nations rose to 123% by December from 105% in 2019, and it is expected to grow to 125% this year.

Having apparently learnt the lessons from the 2008 financial crisis, the IMF seems to be concluding there is no need for austerity (rapid cutting of public spending) after Covid in most advanced countries. However the recommendations for emerging economies have not really changed: “countries that have only limited access to financial markets will need to be much more careful about their fiscal strategies” warns the IMF. And as Oxfam has recently highlighted: 84% of the IMF’s COVID-19 loans encourage, and in some cases require, poor countries hard hit by the economic fallout from the pandemic to adopt tougher austerity measures in the aftermath of the health crisis. New analysis by Oxfam finds that 76 out of the 91 IMF loans negotiated with 81 countries since March 2020 –when the pandemic was declared– push for belt-tightening that could result in deep cuts to public healthcare systems and pension schemes, wage freezes and cuts for public sector workers such as doctors, nurses and teachers, and unemployment benefits, like sick pay. What will this mean for growing inequality, for sexual and reproductive rights and what should we do about it?

One of the unique aspects of the current recession is the way it’s impacting women: though men are more likely to die of Covid-19, the pandemic’s toll on employment is heavier for women. Unlike other modern recessions, the pandemic recession has led to more job losses among women than among men. While the 1970s marked the start of *‘mancession’* periods in industries like construction, the current *‘shcession’* is heavily affecting sectors like hospitality and retail.

Globally, women’s job losses due to Covid-19 are 1.8 times greater than men’s. The pandemic recession is particularly challenging for women’s employment globally for two reasons connected to the dangers of close contact: the restrictions on service jobs, and the closure of schools and daycare centres.

On the positive side, research in countries like Kenya, Italy and the Philippines is finding that men are increasingly taking on childcare (even though women are still logging more hours on chores and childcare than men). In an optimistic scenario, women and men may emerge from the pandemic with a less skewed distribution of domestic responsibilities. How does IPPF go about supporting feminist leadership that offers greater equity?

No phenomenon has been as affected by humanity’s reaction to COVID-19 as migration. It has dramatically changed the options for the millions of people who

move searching for greater opportunities in life. We have seen the emergence of anti-migrant narratives stoking xenophobia and stigma towards the very people whose contributions have been so valuable. We see an opportunity now to reimagine human mobility, to build more inclusive and resilient societies, where well-managed migration harnesses the expertise and drive of migrants to reignite economies at home and abroad.

Political Fall Out – what will this mean for Populists?

As “crisis entrepreneurs”, populists often thrive in or after crisis, building on the discontents that emerge, as well as aiming to “fuel a permanent crisis cycle.” As the economic effects of the pandemic exacerbate existing inequalities, the ground might become more fertile for right wing and radical nationalist populist parties.

In the short-term (and with some notable exceptions) voters have not rewarded governments with cavalier / science denying approaches to the epidemic and we see the governments of many developed nations finally beginning to hit their stride on vaccination, therefore restoring some degree of faith amongst citizens. However there is little doubt that Covid has further destabilised the political order in democracies by increasing the gap between the haves and the have-nots, as well as enabling “pandemic populism” in the shape of anti-lockdown, anti-border closure, anti-vaccine “freedom” rhetoric. This might well fuel the opposition to IPPF/SRHR. How should we position ourselves in the emerging political landscape?

Changes in the world of education

As the pandemic unfolded, 192 governments closed their schools in an attempt to stop the spread of the virus. By April, 1.5 billion learners had been sent home.

For girls in poorer countries, the closures could signal the end of their school careers altogether. During the Ebola crisis, girls were exposed to sexual exploitation, teen pregnancy and early/forced marriage as well as child labour and a greater burden of chores and care work at home. The prospect that Covid-19 will worsen existing education inequalities is a grim one, but it isn't inevitable. Indeed, the pandemic could be a critical juncture. Parents everywhere might have realised the value of schools and appreciated the hard work of teachers. Governments might have understood that economy and society depend on education in the here and now as well as the long term. As importantly, will the value of higher education be questioned by students denied access to live lessons? Will young people rethink what education means, what they value and what they don't?

Will this crisis turn into opportunity? In what ways, if any, should IPPF be contributing to this? How do we mitigate the impact on sexual and reproductive outcomes?

Changes in health, and particularly SRHR

The virus has put the spotlight on the catastrophic inequalities imposed by years of austerity and under-investments in public health. No doubt there will be in the next few years a greater focus on health, but mostly on infectious diseases.

Violence against women and girls skyrocketed as lockdown forced women no respite from perpetrators lurking in their own homes.

Informal sex work changed exponentially as we saw a retreat from the sheets and into the virtual world of webcamming, Only Fans, and other unregulated spaces that proliferated in this new context. Older and more marginalised sex workers struggled to adapt to this new business model, and shrinking SRH service availability made them more vulnerable, wiping out years of progress.

Those that had spent their lives fighting for recognition of more diverse ways of living and loving were forced to reconsider, with many being pushed into more heteronormative expressions of sex and pleasure. Others had to do the best they could initiating their own self-care as specialised services became preoccupied with responding to the harsh realities of the pandemic, often with little consideration of the lessons learnt during the early days of the AIDS crisis. During all of this we watched even our own community reverting to reductive messages focused on monogamy and abstinence – in a well-meaning attempt to reduce the spread of the virus.

Many younger people have so far missed out on the thrill and excitement of their sexual debut, with only pornography and other forms of social media too keep them company. At the other end of the spectrum, with every month passing, women are aging out of already limited fertility services and limited access to menopausal care.

Covid has bought endless suffering and heartache; but also, incredible opportunity for organisations like IPPF to reconsider who we serve and how we serve.

How do we contribute to ensuring re-building global health goes beyond pandemic preparedness to achieve universal health coverage with sexual and reproductive health as an essential component? What is IPPF's role in reimagining the world in a way that addresses the underlying inequity and intersectionality the pandemic has thrived on?

Ultimately, if humanity is to flourish, we must remember that we are one.

END.