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## **COVID-19 and the increase of domestic violence against women**

As initial police and hotline reports suggest, domestic violence has already surged in many countries, as measures imposing isolation compel a number of women to be kept at home under the same roof with perpetrators, thus exacerbating women's vulnerability to domestic violence, including femicides. The risk is aggravated by fewer police interventions; the closure of courts and limited access to justice; the closure of shelters and services for victims, and reduced access to reproductive health services.

The Special Rapporteur on violence against women wishes to receive all relevant information on the increase of gender-based violence against women and domestic violence in the context of the COVID-19 pandemic from civil society, States, National Human Rights Institutions, international organizations, academia and other stakeholders on the following issues:

1. To what extent has there been an increase of violence against women, especially domestic violence in the context of the COVID-19 pandemic lockdowns? Please provide all available data on the increase of violence against women, including domestic violence and femicides, registered since the beginning of the COVID-19 crisis.

Emotional wellness and safety of women and children in Lesotho has been a big issue, with perpetrators of VAW taking advantage of COVID-19 lockdown restrictions. Female students who live in rented houses experience multiple forms of gender-based violence which include assaults, rapes and murder. Spiritual wellness was not even considered because all churches are not functioning due to lockdown and social distancing. There has been more reporting of GBV against women and children however I do not have actual statistics because this information is not readily available.

2. Are help lines run by Government and/or civil society available? Has there been an increase in the number of calls in the context of the COVID-19 pandemic?

*There is a helpline called Nokaneng, It is an application run by the civil society and the government. Nokaneng provides emotional support for women and children where alternative places of safety, such as relatives, are not readily available. There is just one shelter open and available in one district in Maseru.*

*In a conversation with Child and Gender Protection Unit about the GBV cases that have been reported since COVID 19 measures were introduced, data collected shows that the number of cases being reported are skyrocketing, with more than 100 cases reported . Cases of violence cannot be taken to court because of Lockdown regulations, and courts are only open for 'emergencies'.*

3. Can women victims of domestic violence be exempted from restrictive measures to stay at home in isolation if they face domestic violence?

There were no exemptions. Also with the Police and Military misuse of authority by beating citizens at random, fears of being physically assaulted has become a restriction to accessing essential services let alone seeking safety from domestic issues.

4. Are shelters open and available? Are there any alternatives to shelters available if they are closed or without sufficient capacity?

There is Lapeng Care Centre, a shelter for the protection of the women that have fled their homes or communities for safety, it has a 30 bed capacity and that proved too little during COVID-19.

There are homes used to provide shelter and safety in other districts however with lack of resources could not house victims of domestic violence

5. Are protection orders available and accessible in the context of the COVID-19 pandemic?

With the Police prioritizing people contravening COVID-19 regulations most victims were sent home to go "talk it through" with their abusers. There have been cases reported of young women experiencing intimate partner violence, that also manifests as economic and emotional abuse. The young women are involved in transactional relationships. In these cases it proved quite difficult to disentangle violence experienced by the young women, and for them to seek justice from enforce the law because of the nature of the transactional relationships that are also their source of shelter.

6. What are the impacts on women's access to justice? Are courts open and providing protection and decisions in cases of domestic violence?

The courts are opened on an 'emergency' only basis and Gender-Based violence, Domestic Violence was not considered an emergency. Community leaders, the Local chiefs and the Child and Gender Protection Unit (CGPU) took it upon themselves to take measures for the cases that were reported.

7. What are the impacts of the current restrictive measures and lockdowns on women's access to health services? Please specify whether services are closed or suspended, particularly those focusing on reproductive health.

The hospitals, more especially, Queen Mamohato II formerly known as Tsepong, reject any admissions to the hospital if the ailment was not COVID-19 related. There was minimal access to public health care and most women cannot afford private clinics and/or practices.

LPPA an organization that deals with HIV/AIDs, Cancer screening, Family Planning, Men's Clinic was open to the public but lacked adequate resources.

Pharmacies became the clinics with the public going to them as they were supposed opened 24hours.

8. Please provide examples of obstacles encountered to prevent and combat domestic violence during the COVID-19 lockdowns.

- The beginning of the lockdown there was a scramble and panic buying that left a lot of the vulnerable groups, women who sell in the streets not enough resources to buy to sustain life for total lockdown
  - Police and Military misuse of authority and power, including physical assault of citizens including those from the essentials services has led to fear of citizenry in accessing essential services.
  - The shelters and orphanages were not prioritized.
  - The budget allocated to women and children, businesses, informal businesses was never issued and that caused great havoc in the household.
  - The police prioritized people contravening COVID-19 regulations above any other case; they even rejected most domestic violence in the name of being over worked with COVID-19.
  - Victims were not able to report cases.
9. Please provide examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by Governments, NGOs and NHRIs or equality bodies.
- The Women's Law Clinic had a Sanitary towel drive on Menstrual Hygiene Day which was coincidentally during COVID-19 lockdown
  - Other women's organizations also held sanitary towel drives in more vulnerable areas of the country and sensitize adolescent of menstrual health.
  - Most organizations made substantial donations (clothes, food, blanket drives during the winter) to orphanages that were left vulnerable.
  - The minister of gender made official speeches to conscientize the country to issues of GBV, domestic violence and this was not previously done in the country under any circumstance.
  - Nokaneng App worked side to side with the Child and Gender Protection Unit (CGPU) to aware of cases in the country.
10. Please send any additional information on the impacts of the COVID-19 crisis on domestic violence against women not covered by the questions above.
- Most stakeholders believe that because Basotho men were frustrated with being retrenched from work and /or unable to go to South Africa they directed their frustration, anger and violence their families.
  - Not prioritizing many issues in society including domestic violence the CGPU was left with no resources to tackle matters effectively.
  - Lesotho's continued harmful rape culture escalated during COVID-19; prisoner amnesty to relieve overcrowding in prisons led to some convicted rapists being released, however the perpetrator was later reported for raping a young child and a warrant for his arrest was issued, which begs the questions 'what criteria did the correctional services use to let go of some of the prisoners for COVID-19?'. Cases of rape and sexual assault have been on a steep increase. Community leaders need to be sensitized and capacitated to address harmful statements that perpetuate sexual violence against women failing which held accountable even to the very things they say to public.
  - Lesotho has no Legal framework on technology related VAW. They uphold the notion of freedom of speech even above the clear abuse, bully that occurs over social media platforms like Facebook and the abovementioned statements from community leaders. There is no hate speech framework so there is no way to hold accountable anyone for any type of bullying and/or abuse.

- Hate speech is normalized as “someone’s opinion that they are entitled to. There are no avenues and means to report social media platform violence in Lesotho even traditional media cannot be punished they will just issue a retraction.
- The lack of information system in Lesotho makes it difficult to attain any contextual data on issues like gender-based violence, there is no data just assumption, estimations this makes it impossible to know exactly how many people are truly affected. The U.N. Lesotho database is the resource of data that we mostly reference.