

Women and Girls Safe Spaces: Technical Guidance Note for COVID-19

Purpose

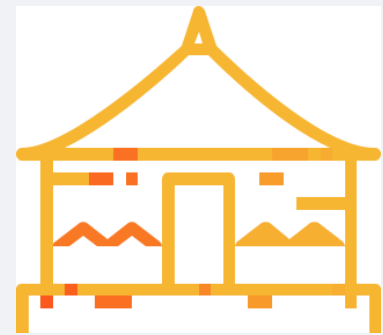
This guidance note aims to provide practical support to service providers operating Women and Girls Safe Spaces (WGSS) on how to adapt programming in the context of the COVID-19 pandemic. This note includes six sections:

1. Criticality of WGSS
2. Meeting WGSS standard objectives
3. Applying WGSS guiding principles
4. Mainstreaming attention to key concerns
5. Recommended WGSS Interventions, Adaptations, and Safety Measures across different phases/risk levels
6. Key advocacy points

Criticality of WGSS

As existing, pertinently placed, accessible, and trusted structures where women and adolescent girls' physical and emotional safety is respected, WGSS provide survivors with access to life-saving services, psychosocial support, referrals and relevant information related to their situation.¹² **WGSS should not close at the first sign of COVID-19 as they facilitate life-saving interventions.** Rather, WGSS should remain open as long as possible and activities should be adjusted to the risk realities of different contexts and used as centres for preparedness actions and information sharing with women and girls.

Recognizing that globally, and in many humanitarian contexts, GBV service providers are already noting a surge in intimate partner violence (IPV) and others forms of domestic abuse,³⁴ combined with the overwhelming resources required for the health response to COVID-19, establishing a WGSS continuity plan for vulnerable women and girls as a key entry point to



Women and Girls Safe Spaces are a minimum standard for GBV programming interventions in humanitarian settings. WGSS are considered essential services to meet the specific needs of women and girls affected by emergencies.

During COVID-19, WGSS are perfectly placed to provide safe service points for women and girls and should remain open.

¹ [Women and Girls Safe Spaces Toolkit, 2019](#)

² [Inter-Agency Minimum Standards for GBV in Emergencies Programming](#)

³ <https://www.bbc.com/news/world-asia-51705199>

⁴ [The impact of COVID-19 on immigrant survivors of gender-based violence, 2020](#)

critical life-saving, individualized services should be prioritized.⁵⁶ Even at the highest risk level, safe one-to-one service delivery should continue with the proper precautions put into place. **WGSS can be used as a key entry point and service point for continuity of care for women and girls, including sexual reproductive health services, when health services become overburdened.**

To reduce the risk of transmission, implementing agencies should improve hygiene practices, institute cleaning/disinfecting measures and screening protocols, and should also consider redesigning the WGSS to avoid congestion. Likewise, it is advised even during early phases of the COVID-19 response to reduce both the schedule of group activities and the number of participants to allow for enough space for recommended social distancing measures.

Self-isolation and quarantine pose increased risks to violence for women and girls. Women and adolescent girls who have been harmed or otherwise exposed to violence must have the opportunity to recover and immediately connect to services that can protect them, support their healing, and help reduce their vulnerability to future harm.⁷

In addition, the burden of elderly, childcare, and care for those who fall ill from COVID-19, will often fall to women and adolescent girls, while health resources may be shifted away from life-saving sexual and reproductive health services, increasing stress, work, and risks for women and girls. In most countries, nurses and lower-level health care providers are female, who face increased risk of being exposed to COVID-19 as frontline workers in addition to risks in the home as caretakers. In humanitarian settings, these exacerbated risks and barriers will further limit women and girls' access to services, information, resources and safety/ability to leave violent situations during COVID-19.






Recognizing the social stigma and discrimination associated with COVID-19, WGSS can provide critical, safe, and accessible services that recognize and addresses women's and girls' needs, concerns and perspectives.

⁵ [GBV Case Management and the COVID-19 Pandemic, 2020](#)

⁶ [Case Management, GBVIMS/GBVIMS+ and the COVID-19 pandemic](#)

⁷ [Women and Girls Safe Spaces Toolkit](#)

Meeting WGSS Standard Objectives in the context of the COVID-19 emergency⁸

	WGSS Standard Objective	Recommended Actions during the COVID-19 Response
	Facilitate access for all women and girls to knowledge, skills and a range of relevant services.	<ul style="list-style-type: none"> ➤ Share information on COVID-19, including information on prevention, mitigation, actions to take when sick, and available health services. ➤ Ensure WGSS are accessible to all women and girls, though restrictions may be placed on the number of people who enter WGSS at one time. Women and girls who are not well should be asked not to visit WGSS and given information on how to access remote support. ➤ Consider opportunities to utilise WGSS as safe and accessible service points for a range of essential services for women and girls, particularly SRH services, when health systems are overwhelmed with response to patients affected by COVID-19, adapting/upgrading WGSS where necessary.
	Support women's and girls' psychosocial wellbeing and creation of social networks.	<ul style="list-style-type: none"> ➤ Adapt group PSS activities (size, approach) according to level of risk. ➤ Organize remote PSS support activities through technology where feasible. ➤ Facilitate discussions on how to foster solidarity, even during lockdown. ➤ Disseminate information on COVID-19 through PSS activities/ structures.
	Serve as a place where women and girls can organize, access information and resources to reduce risk of violence.	<ul style="list-style-type: none"> ➤ Consult with women and girls about protection risks that might increase/emerge during the COVID-19 response and accompanying restrictions on movement. ➤ Share information on protection risks, including increased risks of intimate partner violence. ➤ Distribute dignity kits, including IEC on COVID-19 and available GBV services.
	Serve as a key entry point to specialized services for GBV survivors.	<ul style="list-style-type: none"> ➤ Where possible, offer one-on-one GBV case management and psychosocial support services through WGSS, maintaining appropriate precautions for staff and clients. ➤ Adapt WGSS to provide more private space for one-on-one meetings ➤ Update referral systems and share information on available GBV response services, including advertisement of remote services such as hotlines/helplines.
	Provide a place where women & girls are safe and encouraged to use their voice and collectively raise attention on their rights and needs.	<ul style="list-style-type: none"> ➤ Involve women and girls in preparedness and response planning. Consult with women and girls about their concerns and needs and help to elevate their voices to humanitarian and government decision-makers.

⁸ WGSS Standard Objectives are established in the [Women and Girls Safe Spaces Toolkit](#)

Applying WGSS Guiding Principles in the context of the COVID-19 emergency⁹

- ✓ **Empowerment:** WGSS, particularly during emergencies, can provide a forum through which information tailored to women's and girls' needs, questions and concerns related to COVID-19, including public orders and recommended actions, can be disseminated.
- ✓ **Solidarity:** Both as a physical site as well as a community-focused intervention, WGSS foster social trust and can provide opportunities to address xenophobia and stigma associated with COVID-19.
- ✓ **Accountability:** WGSS offer opportunities to engage and consult with women and girls to ensure that their voices, perspectives, and priorities are reflected and accounted for in COVID-19 response and recovery plans.
- ✓ **Inclusion:** Older women who may be particularly vulnerable to COVID-19, differently abled women and girls, as well as those with diverse sexual orientations, gender identities, and those living with HIV could face additional obstacles in securing information, services, and support during the COVID-19 pandemic. WGSS can provide critical opportunities to serve these populations.
- ✓ **Collaboration:** WGSS bring women and girls from across the community together and can provide opportunities to mobilize women-led networks in the COVID-19 response. Likewise, WGSS can be used as an alternative site for SRH service delivery when health facilities are overwhelmed with caring for patients affected by COVID-19.

Mainstreaming attention to key concerns in the COVID-19 emergency¹⁰

- ❖ **Inclusion & diversity:** The COVID-19 response should be attentive to intersecting nature of discrimination and barriers that diverse women and girls are facing and take action to ensure that programming is inclusive of women and girls in all of their diversity. Older women as well as women and girls who are differently abled are believed to be particularly at risk in this crisis. Barriers to accessing care and essential services are multiplied for older women and women and girls with disabilities. This means taking specific measures to mitigate risk for diverse and potentially higher risk populations so that WGSS are still accessible to them and ensuring that information related to COVID-19 is tailored to the diverse identifies and abilities of women and girls in target communities.
- ❖ **Adolescent girls:** During this time of uncertainty, girls are at increased risk of violence and distress. Girl children, and adolescent girls in particular, are particularly at risk of gender inequality and GBV in outbreak situations. In Sierra Leone, teenage pregnancy rates surged in some communities by up to 65% during the Ebola crisis.¹¹ Adolescent girls often live at the crossroads of childhood and adulthood and can be left out of services that are geared towards adult women or young children.
- ❖ **PSEA/ Safeguarding:** As vulnerabilities increase and opportunities become more limited, women and girls will face increased risks of sexual exploitation and abuse. WGSS must establish usual safeguarding and can additionally share information and offer opportunities to report or share feedback on new SEA risks arising from COVID-19.
- ❖ **Staff well-being and safety:** As frontline workers, the safety and well-being of staff must be prioritised, particularly for those providing services to GBV survivors. Ensure regular supervision for WGSS staff continues, and consider staff working in shifts to account for changes in caregiving responsibilities, routinely sharing information and setting up a 'self-care buddy' system.

⁹ The WGSS Guiding Principles are outlined in the [Inter-Agency Minimum Standards for GBV in Emergencies Programming](#) and the [Women and Girls Safe Spaces Toolkit](#)

¹⁰ Drawn from mainstreamed considerations across all chapter guidance in the [Women and Girls Safe Spaces Toolkit](#)

¹¹ UNDP, 2015. [Assessing Sexual and Gender Based Violence during the Ebola Crisis in Sierra Leone.](#)

Recommended WGSS interventions, adaptations, and safety measures during different phases/ levels of COVID-19 risk

Response /Risk level	Recommended WGSS Interventions, Adaptations, and Safety Measures
<p>Low/ Medium Risk Likely includes...</p> <ul style="list-style-type: none"> ▪ Sporadic infections ▪ Some restrictions on gatherings, but largely free movement of populations including NGOs ▪ Staff have increased anxiety and uncertainty about their safety ▪ Health systems preparing for response 	<p>Throughout low/medium risk response to COVID-19, appropriate precautions should be taken for WGSS to remain open. WGSS should serve as key service points, information hubs, and spaces to learn from, and support, women and girls. Plans should be established for implementing further restrictions and reducing WGSS activities to one-on-one services should risks increase.</p> <p>Precautions and structural adaptations</p> <ul style="list-style-type: none"> ▪ Orient staff and volunteers to COVID-19 risks and to required safety precautions and basic symptoms of COVID-19, providing opportunities to staff to share concerns and fears as frontline workers ▪ Implement a strict policy where staff, volunteers, and visitors do not visit WGSS when they are feeling ill ▪ Make personal protective equipment (PPE) available, in line with national and organisational protocols ▪ Ensure handwashing and sanitation stations are available and used by each woman and girl entering the WGSS/ hand sanitizing is available for all activities ▪ Implement environmental cleaning and disinfecting between activities and, at minimum, at least twice a day, particularly door handles and other frequently touched areas ▪ Avoid handshaking, hugging, sharing food, utensils, cups and towels – find alternative culturally acceptable ways to greet women and girls ▪ As a contingency, make plans and procure materials to adapt the WGSS interior to allow for more private, one-on-one meetings, respecting physical distancing (sphere) standards <p>Coordination and advocacy</p> <ul style="list-style-type: none"> ▪ Update referral systems and share information on available GBV response services ▪ Involve existing female health care workers and local women leaders in decision-making to ensure that response to COVID-19 outbreaks address the needs of women and girls in each community ▪ Share information collected by women and girls to inform preparedness planning ▪ Consult government and other sectors to explore options of hosting other essential services in WGSS, if health systems become overwhelmed. This could include SRH consultations for healthy women and adolescent girls, pre/post-natal care, nutrition/breastfeeding consultations, etc. <p>Adapted group activities</p> <ul style="list-style-type: none"> ▪ Limit size of group activities to no more than 10 at a time and introduce social distancing of at least 1m between visitors ▪ Suspend activities that involve direct contact (hair plaiting, henna, etc.) ▪ Hold group discussions to understand concerns of women and girls, as well as trusted sources/means of information and services that might be maintained during different response phases. Respect group size limitations and maintain space between participants ▪ Facilitate community safety planning exercises to better understand how COVID-19 might be changing risk dynamics

	<ul style="list-style-type: none"> ▪ Organize information sessions on COVID-19, including hygiene promotion and how to care for sick people within homes ▪ Host information sessions on SRH, including pregnancy and COVID-19, and family planning options ▪ Make IEC materials available on COVID-19 and protection risks ▪ Inform visitors of all GBV response services available, including remote service options such as hotlines/helplines ▪ Facilitate discussions on how to foster solidarity, even during lockdown. This might include setting times when women conduct similar routines or expressions of gratitude, or opportunities to remotely connect ▪ Assess whether women and girls have access to phones and where possible, make plans to maintain group PSS activities and social groups through video calls, WhatsApp, etc. Prepare for alternative means of communication: radio, public announcement through loudspeaker, hotlines and consider how to manage existing cases, communicating to women and girls <p>Individual support services</p> <ul style="list-style-type: none"> ▪ Make space available for individual consultations with distance of at least 1m between staff and visitors ▪ Continue to provide individual GBV case management and psychosocial support services to survivors through WGSS, if trained staff are available ▪ Review referral processes and adapt to limit in-person contact to promote safety and prevent the spread of COVID-19 <p>Community outreach and distribution</p> <ul style="list-style-type: none"> ▪ Ensure all community outreach activities include information on COVID-19, hygiene and prevention, and associated protection risks ▪ Provide targeted information and messaging, including on sexual exploitation and abuse. Consider ways that elderly women and women with disabilities (including hearing/sight impairments) receive information ▪ Consider alternative means of safe outreach, including phone messaging, radio, public announcements through loudspeakers or minarets, etc. ▪ Procure/update/preposition and distribute dignity kits, including IEC on COVID-19, including information on available services, menstrual materials for at least three months, and soap, hand sanitizer, other recommended and available materials ▪ Utilise community networks/ volunteers/ leaders to share messaging in a safe way that does not put them at risk
<p>Response /Risk level</p>	<p>Recommended WGSS Interventions, Adaptations, and Safety Measures</p>
<p>Medium/ High Risk <i>Likely includes...</i></p> <ul style="list-style-type: none"> ▪ Local transmission clusters ▪ Restrictions to essential movement ▪ Health systems nearing capacity limits 	<p>During medium/high risk response to COVID-19, functional WGSS should be maintained <i>at least for one-on-one service provision</i>. WGSS can provide critical service points for survivors of GBV and may also meet other service needs for women and girls where health systems are deemed unsafe or overwhelmed.</p> <p>Precautions and structural adaptations</p> <ul style="list-style-type: none"> ▪ Regularly update staff and volunteers on COVID-19 risks and required safety precautions, providing opportunities to staff to share concerns and fears as frontline workers ▪ Make personal protective equipment (PPE) available, in line with national and organizational protocols

- Staff feel threatened /request to stay home with their families

- Ensure all staff, volunteers, partners, and members/visitors understand COVID-19 risks, prevention measures
- Implement a strict policy where staff, volunteers, and visitors do not visit WGSS when they are feeling ill. Based on protocols, consider screening for fever
- Ensure handwashing/ hand sanitizing is available
- Implement environmental cleaning and disinfecting between activities and, at minimum, at least twice a day
- Avoid handshaking, hugging, sharing food, utensils, cups and towels – find alternative culturally acceptable ways to greet women and girls
- Adapt the WGSS interior to continue providing one-to-one services, respecting physical distancing (sphere) standards, as well as considerations for client confidentiality and safety
- Mark distance with tape/rope/other indications to separate visitors waiting to enter WGSS
- Prepare to close WGSS if risks reach highest level, including safe storage of materials and files

Coordination and advocacy

- Ensure that government, partners, and communities understand the changes in WGSS services; ensure compliance with social distancing orders
- Coordinate with government and other sectors to make WGSS available for one-on-one essential services beyond GBV case management, particularly to meet SRH needs. WGSS can serve as a useful service point for individual consultations and service delivery of healthy clients/patients when health systems are overwhelmed. Offering multiple one-on-one services through WGSS will also help to maintain the safety of the space by not stigmatizing survivors accessing GBV case management services
- Update GBV referral systems and contact information, including information on remote services

Adapted group activities

- Consider suspending all group activities and trainings
- Where possible, group activities and social networks may be maintained through video calls, WhatsApp groups, etc.
- Make IEC materials available on COVID-19 and protection risks
- Inform visitors of all GBV response services available, including remote service options such as hotlines/helplines
- Facilitate/Participate in planned, remote solidarity exercises

Individual support services

- Make space available for individual consultations with distance of at least 1m between staff and visitors
- Provide individual GBV case management and psychosocial support services to survivors through WGSS, if trained staff are available
- Review GBV referral processes and adapt to limit in-person contact to promote safety and prevent the spread of COVID-19
- Host additional one-on-one essential services, such as SRH services, where possible

Community outreach and distribution

- Continue safe outreach activities that limit direct contact, e.g. Phone messaging, radio, public announcements through loudspeakers or minarets

	<ul style="list-style-type: none"> ▪ Through safe means, share information on protection risks, including risks of SEA, and available GBV services ▪ Distribute dignity kits to WGSS visitors, including IEC on COVID-19, including information on available services, menstrual materials for at least three months, and soap, hand sanitizer, other recommended and available materials
Response /Risk level	Recommended WGSS Interventions, Adaptations, and Safety Measures
Highest Risk <i>Likely includes...</i> <ul style="list-style-type: none"> ▪ Health systems overwhelmed ▪ Movements limited to essential services ▪ Closure of most facilities 	<p>During the highest levels of risk, WGSS may continue to serve as important service points for women and girls. Depending on contextual factors and availability of staff, WGSS may be required to safely, and temporarily, close facilities</p> <ul style="list-style-type: none"> ▪ Advocate to keep WGSS open as part of essential services ▪ Regularly contact/update WGSS staff, volunteers, partners and WGSS member representatives, and community leaders ▪ Support remote response services ▪ Facilitate/participate in planned, remote solidarity exercises ▪ Continue online group activities and social networks that were started in medium/high risk phase ▪ If WGSS are closed, ensure safe storage of materials and files, particularly any files with GBV case management information, and lock facilities ▪ Post information on the reason for closure and plans to re-open ▪ Post IEC materials, including updated information on available GBV response services, including remote services ▪ Continue to support safe outreach/ messaging to share information on available GBV response services
Response /Risk level	Recommended WGSS Interventions, Adaptations, and Safety Measures
Transition/Recovery <i>Likely includes...</i> <ul style="list-style-type: none"> ▪ Significant reduction in cases ▪ Easing of restrictions on movement ▪ Increased feelings of safety among staff ▪ Continued attention to risks of infection 	<ul style="list-style-type: none"> ▪ Re-open WGSS as soon as allowable and staff feel safe ▪ Continue good hygiene and environmental cleaning ▪ Update protocols for staff and member safety and orient teams ▪ Update service mapping, referral pathways and IEC materials ▪ Re-institute WGSS services and activities, based on level of risk outlined above

Key Advocacy Points

- Critical GBV services, inclusive of Women and Girls Safe Spaces, should be declared essential with authorities vis-à-vis closure determinations, preparedness and response planning. WGSS not only help women and girls access lifesaving GBV response services but can also be used as venues for other types of support, such as sexual and reproductive health services, as health facilities become overstretched.
- Women and Girls Safe Spaces should not be shut down at the first sign of COVID-19; rather risk mitigation measures should be instituted to allow for safer implementation of WGSS activities to serve women and girls and contribute to preparedness, readiness and response actions.
- Donors should continue to fund Women and Girls Safe Spaces as essential to the broad COVID-19 response and should support partners to scale-up or adapt to the changing operational context.
- The GBV sub-cluster and other coordinating bodies should advocate for the criticality of Women and Girls Safe Spaces, and to highlight women's and girls' needs in COVID-19 preparedness and response plans, including Humanitarian Response Plans.
- Public health policies such as shelter-in-place orders should account for the specific safety and mobility needs of women and girls and should be designed in a manner that does not increase harm or impose life-threatening barriers to critical GBV services at Women and Girls Safe Spaces.

