The Feminist Humanitarian Network is a member-based network of grassroots and national women rights organisations (WROs), regional networks, international non-governmental organisations (INGOs) and individuals working to strengthen the agency and amplify the voices of women in emergencies, and to transform the humanitarian system into one that is guided by feminist principles. It facilitates space for its members to share experiences in humanitarian settings and develop collective solutions to overcome patriarchal practices and barriers.

FHN member, Badabon Sangho, led research in Bangladesh to better understand the context-specific impacts and challenges WROs face in responding to the Covid-19 pandemic, and the feminist solutions and community-based responses that have been developed and taken up by WROs throughout the crisis.

The key findings demonstrate that, despite challenges posed by Covid-19 around funding, partnerships and government bureaucracy, WROs in Bangladesh have been at the front lines of the Covid-19 response. However, they have not received the recognition they deserve and have often been excluded from decision-making due to patriarchal attitudes within the humanitarian system. Responding to violence against women and girls was a particularly key area where WROs played an important role.

Key Recommendations

1. There should be strong, gender-sensitive coordination and partnership between WROs and government agencies.

2. Humanitarian responses, including schemes and stimulus packages, should be distributed through local government involving WROs – this is currently managed by different government departments and agencies, and causes delays and mistargeting.

3. Partnerships between WROs and international NGOs should be direct rather than routed through national NGOs, who take a big portion of the budget. A funding network should be created for the big organisations to distribute equal funding and decision-making rights among their partners at the grassroots level.

Images have been provided by Badabon Sangho of their work undertaking this research, in responding to Covid-19, and beyond.
It is common knowledge that disasters, pandemics, or any emergency for that matter, impact women and girls differently to men. Women and girls face the additional risk of gender-based violence and discrimination during an emergency. In the context of Bangladesh – where there is already high prevalence of violence against women – the risk has clearly increased during the Covid-19 pandemic.

This research documents the role and humanitarian efforts of WROs in Bangladesh in Covid-19, to identify the challenges presented to them by the humanitarian system in this crisis, and the solutions they have established to overcome these challenges.

The research was based on qualitative methodology. In total, two focus group discussions (FGDs) and 14 key information interviews (KIIs) were conducted with members of WROs to gather the data. The WROs were selected on criteria related to their activity on gender-based issues and geographical presence across the country.

**Contextual background**

As Covid-19 numbers soared worldwide, many countries have adopted preventive measures, which include travel bans, working from home, lockdown, and most importantly, social distancing. These measures present challenges in Bangladesh, a lower middle-income economy with one of the world’s densest populations.¹

The government of Bangladesh imposed mandatory country-wide quarantine and lockdown for the period of 25th of March to 12th May, 2020. Movement of people was restricted and offices and businesses were closed. A total of 535,139 cases were identified and 8,117 people died from the virus.

Amidst the Covid-19 crisis, Bangladesh is facing an alarming shadow pandemic: the rise of violence against women. Since the onset of a nationwide lockdown in March, women throughout Bangladesh have reported increased levels of emotional, physical, and sexual violence, most commonly at the hands of their husbands. A telesurvey conducted by Manusher Jonno Foundation, a leading national NGO in Bangladesh, reported that some 4,249 women faced different forms of domestic violence in April 2020 during the lockdown. Of the survivors, 848 experienced physical violence and 2,008 emotional and psychological violence. Food and financial support was withheld from 1,308 women.² For some women, this was the first time they had experienced such violence, likely precipitated by economic stress, fear, and uncertainty surrounding the pandemic.
Women’s leadership and decision-making processes

Respondents had mixed feelings when asked if their leadership had been recognised in responding to Covid-19. Most WROs have been involved in awareness building events such as distributing posters and leaflets, however, these activities are not included in the national government’s humanitarian response such as cash aid for vulnerable households, relief distribution, and economic stimulus packages. WROs working at the national level shared that they have been given responsibility and opportunities to address issues with the National Disaster Management Council. While some WROs are members of different humanitarian response committees, they have reported that they do not have allocated roles and responsibilities in these spaces; their voices have not been heard in the committee’s decision making.

Disabled Children Foundation (DCF), a WRO working with disabled women and children, mentioned that when Covid-19 relief was being distributed through the chairman and members of the Union Council (local government administrative body), DCF’s team asked the chairman to include people with disabilities in the list. However, in most cases, they heard that people with disabilities did not receive additional support or help. Women with disabilities were discriminated against in terms of receiving support throughout the pandemic, and continue to receive little support throughout the pandemic.

WROs who are working with diverse communities such as sex workers, Harijans³, people with disabilities, women landowners, fisher-folk, women migrant workers, women labourers, ethnic minorities and indigenous women, and survivors of Gender Based Violence (GBV) were marginalised within the Covid-19 humanitarian responses.

A respondent mentioned that at Upazila level (sub-district level administration), a Hospital Management Committee formed, where the local Member of Parliament is acting as the chairperson of the committee. WROs and other grassroots NGOs are included in the committee as members, along with a mix of people from different background. However, most of the members are not aware of the purpose of the committee. The committee does not ask for suggestions from WROs or allow them responsibility. Respondents reported that the committee did not function during the pandemic, and overall, there was a lack of accountability.

All of the WROs added that they shared lists of vulnerable women and girls with the local government in order to ensure they receive support. In Mongla, most of the government agencies (such as the Coast Guard, forest department, etc.) contacted local WROs to arrange the distribution of food, health, and hygiene packages. Frustratingly, in some cases, a significant number of the listed vulnerable women and girls did not receive any support.

“There were challenges while working with local elected bodies of the Union Council. The participants we provided from our survey; union council leaders were not ready to accept that. They wanted us to go with their survey where we could find that many privileged people were being listed. This becomes a big challenge for us as according to the rules here we must keep the Union Council connected with our activities.”

WRO respondent, Nokshikatha.
Gender-based violence and protection of marginalised communities

Amid the Covid-19 pandemic, early and forced girl marriages have increased in remote areas in Bangladesh. Respondents located in remote areas such as Borguna, Rangpur, Patuakhali, Shamynagar, and Bagerhat, reported that girls from poverty-stricken families were forced into child marriage to ease financial burdens on the family caused by Covid-19. At the same time as this practice increased, law enforcement agencies and local administrators have been busy dealing with Covid-19. Some families took this as an opportunity to arrange marriages for their daughters.

Ain O Salish Kendra (ASK), a leading national WRO specialising in legal aid in Bangladesh, reported that between January and June 2020, there were 601 reported cases of rape (increasing from 76 in April, to 94 in May, and 174 in June), 107 deaths of women due to domestic abuse, and 103 cases of sexual abuse leading to nine suicides. It is very likely that the number of cases is actually much higher, as women’s restricted mobility in the lockdown means many are not able to report their abuse.

One of the challenges during the lockdown was that cases of gender-based violence (GBV) were difficult to report. A study by Manusher Jonno Foundation, a leading national NGO, reported that 1,672 women had experienced gender-based sexual and/or domestic violence for the first time in their lives during Covid-19. Furthermore, the opportunities to directly help women in distress are limited in lockdowns as survivors are often unable to get away from their abusers even for a moment and therefore cannot report the abuse – even by phone.

One WRO mentioned that their members who work as cleaners in hospitals and cities, as well as women returnee migrant workers, faced discrimination and hate-speech due to being perceived to carry the virus.

The leader of Bangladesh Harijan Okkoy Parishad responded that violence against women and girls has increased during the lockdown in the Harijan settlements. She mentioned that many male family members have lost their jobs due to the pandemic – as a result they are feeling frustrated and disheartened and have become addicted to alcohol. These factors are also increasing violence against women and children in these areas.

“So, imagine being stuck with your abuser 24/7, who is used to taking women as bait to relieve his nervous system and this pandemic just gave them a better chance of doing the same.”

Naripokkho, a leading feminist WRO network in Bangladesh

“In the Harijan Community, women are most deprived. There are pregnant women, women with babies. But they are doing the job of cleaning. Amid Covid-19, they were the ones who took the trash out of the hospital. There was no safety for them. Many of us got infected and died as well.”

Female leader of Bangladesh Harijan Oikya Parishad

One WRO working with ethnic minorities in Chittagong Hill Tracts (CHT) clearly explained the constraints that they faced during the lockdown period. The respondent mentioned that, before Covid, they received a lot of allegations related to gender-based sexual and/or domestic violence and would try to immediately relocate the survivor to a safe space. During the pandemic, they were unable to provide this service to domestic violence survivors, but instead offered advice and information about their rights and safety measures they can take, including offering to contact the local police on behalf of the victims.
However, during the pandemic, even when the police were contacted, they did not respond adequately. The tribunal on violence against women and girls that dealt with women’s rights and domestic violence issues was closed during the lockdown, even though this was exactly when the rate of domestic violence went up.

It was revealed in one interview that the government and local police prevented workers from one WRO from linking survivors to local support. As a result, they were unable to send their team members to arbitrate or for settlement.

Livelihoods and women’s economic opportunities

Covid-19 has had a significant impact on livelihoods of women in Bangladesh as 91.8% of women are employed in the informal sector. Domestic workers, owners and workers in micro, small, and medium enterprises (MSMEs), daily labourers, street vendors, cleaners, sex workers, women migrant workers and other informal workers have rapidly lost their means to earn an income. In addition, thousands of migrant workers, including women returnee migrant workers, have lost their jobs with no hope for reinstatement in the near future. Even in the formal sector, huge job losses of female workers in the ready-made garment (RMG) sector are being reported, and where garment factories have re-opened, safety measures are not being enforced and working conditions remain unsafe.

WROs responded that they lost many of their female volunteers during the pandemic, especially women working in the community. This was due to the extra workload women had to take on in the home including extra cooking, cleaning, and caring for family members who might not ordinarily have been at home. In addition, volunteers had to take hygiene measures which made working in the community more difficult.

Despite the lack of transport after the lockdown was declared, thousands of desperate garment workers travelled miles to the factories to keep their jobs. Many others just went out, driven by hunger and starvation, looking for food. Food is a real issue; state-organised emergency food relief activities are limited and lockdowns made it extremely difficult for many civil society organisations (CSOs) to continue with their relief activities.
Women’s employment in read-made garment (RMG) factories has enabled them to improve their influence in household spending and decision-making and has increased men’s participation in unpaid care work. With loss of employment due to the pandemic, opportunities for women’s continued empowerment have decreased as workers have lost their financial independence and, in some cases, become dependent on their families.

One WRO mentioned that vulnerable women landowners were pressured to sell their land at a low price – this land is often their only asset. During Covid-19, land brokers were active in the land investment areas and tried to influence women to sell their lands.

Women with disabilities were especially impacted by the pandemic and the situation continues to get worse. Women with disabilities depend on the disability allowance provided by the government as most of them cannot work – either because of their condition or because workplaces are not accessible. At the beginning of the Covid-19 crisis, the government announced a Covid-19 allowance which is available to all except holders of social safety net scheme cards. Initially women with disabilities who have disability cards could not receive the Covid-19 allowance.

**Partnerships, procedures and policies**

WROs’ respondents who work at the community level operate through their local networks and their face-to-face approach. During Covid-19 when movements were restricted, WROs with limited access and knowledge of technology struggled to operate and continue their everyday work.

Amid Covid-19, WROs in CHT faced extra challenges due to the separate procedures and policies in place in this area. In CHT, CSOs and WROs must go through three extra steps, especially when working in the CHT areas. First, the NGOs must send a letter to the CHT district, which will be passed by the district to the CHT district regional council. The regional council and ministry will consider the WRO’s request and then the NGO affair bureau will receive it. Finally, the bureau will grant the approval. Due to the pandemic situation, most of the officials were absent, meaning any humanitarian project took six to seven months to get approved. As a result, many communities in CHT received no support.

Unlike national and international NGOs who have had online platforms during Covid-19, this has not been feasible for many WROs and women’s groups as not everyone had access to technology or the internet. For many, their only means of communication was via mobile or landline telephones.
In many cases, meetings were held or attended only by those with access to and knowledge of modern technology.

Harijan Oikya Parshad women have also experienced another layer of discrimination due to stigma associated with their caste. Harijan Oikya Parishad, a WRO supporting Harijan women, has been requesting ‘risk allowances’ and assistance for their community, particularly those who are doing the vital job of cleaning hospitals, cities and buildings. Risk allowances are a cash grants given to people who are regularly exposed to the virus in their work, including government officials, police, doctors, nurses, journalists, and other professionals.

Harijan Oikya Parishad has communicated continuously with different ministries and even sent emails and letters to authorities asking to consider Harijan women members at risk. In every city, there is a minimum of 5000 Harijan people living in close proximity in colonies – they do not know if they are infected with Covid-19. However, the authorities refused to give the risk allowance or any assistance to Harijan people.

Naripokkho, a leading feminist WRO network in Bangladesh, also mentioned that some of their member WROs received funding in response to the pandemic. However, the NGO Affairs Bureau was temporarily closed during the pandemic and later only provided online approvals. But to approve a project, the NGO Affairs Bureau asked for a permission letter from the Upazila Nirbahi Officer (UNO). In many cases, the UNO did not approve the project. INGOs provided funds to the local NGOs and they also asked for a signed document checked by Deputy Commissioner-DC or UNO or their representatives, causing more bureaucracy and delays that were very challenging.

**Funding challenges**

It has been revealed that most of the WROs in Bangladesh do not have formal registration and procedures to complete the due diligence of INGOs. Donors usually say that if you are not registered or do not have a bank account then they cannot provide funding. It is not always possible for small organisations or community-based organisations to go through the whole process of registration and due diligence as it requires capacity in documentation and organisational policies.

Equal distribution of funds is a crucial issue for WROs because if big organisations get all the funding and do not give anything to smaller organisations, then WROs cannot implement programmes responding to GBV in the community. In Rangpur, one WRO mentioned that they are not able to support GBV survivors due to lack of funding. Without channeling funding to community based WROs, the monopoly of big NGOs will continue and deepen, and women in communities will bear the impacts.

Amid Covid-19, many larger NGOs and organisations offering funding discontinued their work with small WROs. In Bagerhat, two WROs stopped receiving donor funds. However, donors did not discontinue funding national and big NGOs. Both of the closed WROs worked on GBV issues in the community. As a result of the funding discontinuation, WRO workers in the community lost their jobs. This has impacted GBV programmes in communities.

WROs also experience challenges in writing project proposals in English. Committed WROs who are doing really good work are not well-known because they are not
fluent in English. In many cases, all the work was done by grassroots WROs but the big NGOs and/or networking organisations got most recognition and the major share of budget. There is also little budget allocation for WRO teams’ capacity building. The interviewed WROs all have extremely focused programmes with communities, they have long-term commitments to their community and it is difficult and distressing to simply remove activities when the project is phased out.

One WRO mentioned that during the pandemic they had to adapt the project proposals and most of them had to be shifted online so it was challenging for her team members to convince the donors to continue funding the projects. By convincing the donor, the project was passed for funding. However, at the NGO affair bureau the project was changed further in order to make the project align with the government official’s suggestion. For example, online training for women leaders was new to government officials so it was difficult to convince them of the value of these new methods and technologies. Many WROs had to show one type of project proposal to the donors and when it came to the government, WRO had to restructure it and show the in-person training instead of online training. Similarly, delivering online training posed difficulties due to unreliable internet connection.

“Donors always prioritise big NGOs for funding and leave out the small WROs. To be honest, WROs work is better than big ones. They can reach deeper into the grassroots. But the donor group questions their capacity. My question is how will they show their capacity with the fund.”

Ensure Legal Support through Local Movement and Actions (ELLMA)

One WRO mentioned that they could not even take on some GBV cases due to the funding crisis, and one-stop crisis centers could not be visited because of the lack of transportation.
FINDINGS: WROs SOLUTIONS

Feminist solutions to address challenges presented by the humanitarian system

Despite facing a range of significant challenges during the pandemic as described above, WROs played an integral role in supporting vulnerable women and girls.

All of the WRO respondents shared that they were at the frontline response to the pandemic with their own programmes and resources. Most of the WROs were involved in wider awareness-building activities about the symptoms of Covid-19 and how to avoid infection.

Five of the 14 WROs interviewed facilitated relief activities in response to Covid-19 using staff, board member and supporters’ donated funds. They received a few grants from donors and international NGOs, but not from government agencies. Relief activities like distribution of lunch packets to urban slum dwellers, dry food items for vulnerable women, cash money, health and hygiene packages were well-received. Those who received relief were selected by the WRO team and volunteers.

Addressing the needs of the community more efficiently: the role of WROs in responding to the crisis

Amid the first wave of Covid-19, WROs were at the frontlines of action and led many types of community-based initiatives. From general assessments of the situation in their community to awareness raising activities, WROs and their members initiated the following activities:

- Distribution of cooked food in boxes for vulnerable women and children
- Facilitation of Citizen Coordination Committees
- Facilitation of awareness activities on violence against women and girls
- Providing legal aid support to GBV survivors
- Prevention against Covid-19 by educating the community members on hygiene and hand washing techniques
- Distribution of hygiene kits (soap, masks and sanitiser)
- Providing relief materials like dry food, medicines, hygiene kits, tents etc.
- Conducting surveys and preparing lists of vulnerable women for inclusion in government-led relief activities
- Information dissemination about government relief and support programs

In response to the increased cases of GBV against women and girls during lockdown, WROs like SPApC, Badabon Sangho, ELLMA and Naripokkho have provided communication support and the referral of GBV survivors to other WROs. Naripokkho and DCF have extended the assistance to survivors through engaging their associate WROs who are working at the grassroots level. It is mentioned by ELLMA, SPApC, Badabon Sangho that online meetings with members and legal counseling to the survivors were the common approach, though the team and members were not confident in using the new tools and technologies.

Though Naripokkho is a rights-based and feminist movement building network organisation, amid the pandemic Naripokkho mobilised its volunteers and activists to extend their support to vulnerable and at-risk women and girls.
From its own funding they provided a three-month long allowance, around 1500 BDT\textsuperscript{10} per person, for 100 ‘floating’ sex workers (sex workers that are not attached to brothels and change locations in their work) and rescuers from the Rana Plaza incident who were in dire need. In addition, Naripokkh\textsuperscript{o} extended assistance to vulnerable members, providing 20,000 to 30,000 BDT according to their need. Furthermore, the WRO extended support to middle class women-headed households with 2-3 months’ worth food supply (around 10kg of rice, 2kg of pulses and cooking oil).

SPaRC, one of the WROs working with women and girls belonging to ethnic minorities in CHT area, reported that they initially completely refrained from delivering physical activities to protect their team members from infection or spreading the virus. Their team members are mostly from different villages of CHT so they used these individuals as local representatives to share information about Covid-19 including health precautions and restrictions with their neighbours via phone calls and social media.

Secondly, during the lockdown when people could not meet, they observed members were suffering from mental health related problems. Many of them had obtained suicidal tendencies and all were frustrated. In response, SPaRC started a feminist check-in for members to come and talk to one another and through sharing their own experiences try to find suitable solutions.

Thirdly, they provided help to those community organisations who continued face-to-face activities by giving them information and connecting them to other organisations. SPaRC also carried out many webinars providing opportunities for discussion and information exchange about common issues caused by the pandemic including the problems women were facing, GBV and which services were available.

Bangladesh Nari Sramik Kendra (BNSK), a WRO working with women migrant workers, provided women workers with menstrual hygiene products throughout the pandemic. They also provided lemons on a regular basis to provide vitamins for immune support and socially-distanced training for 10-12 people on how to wrap a cloth around a soap to help it last longer. Finally, BNSK prepared and delivered lunch for 250 vulnerable households by cooking rice and pulses with egg. Around 20 people volunteered to cook and deliver the food.

Badabon Sangho, a WRO working with women human rights defenders, provided food support for 220 vulnerable women-headed households. They also provided livelihood support to resume income-generating activities through sharecropping and organic farming.

**Collective strength & stronger partnerships**

It is clear from this research that WROs have a strong presence in communities and work closely with diverse, marginalised groups of women – those who suffer differently to men and boys during any crisis. It is important to maintain the gender lens in observing, analysing, planning and implementing any humanitarian intervention.

In Dianjpur, Patuakhali and Sathkhira, most of the WROs were in good coordination with government agencies as well as amongst themselves. On the other hand, WROs are being discriminated against by the big national NGOs. WROs have mentioned that networking and coordination amongst WROs and CSOs is really helpful, though it does not always happen.

Many WROs noted that every area or context is different in terms of language and culture – for example, WROs may find different issues and require a different approach for CHT than the coastal belt areas. In-depth, inclusive and intersectional research can help identify the root causes of problems and feminist WROs understand their local context better than most.

In such cases, international NGOs can play a role to build the capacities of WROs. International organisations work mostly with the established and/or big NGOs doing advocacy at national level and influencing policies. These bigger NGOs should look to WROs to create solid bodies of evidence
and on-the-ground experiences to influence feminist humanitarian responses which will ultimately influence the disaster management and response policies in Bangladesh.

“Some women believe in patriarchy. We need to work on that. People like us who believe in feminism if we work with them there will be a huge competition. So we need to make them understand these. We need to make issues-based women’s rights organisations more.”

WRO respondent

When asked how feminist humanitarian response differs from mainstream humanitarian response, most of the WRO members focused on “harmonisation of their resources”. As each donor has different standards and conditions NGOs must meet to receive funds, the majority of WROs are unable to apply. To combat this WROs suggest that donors should launch specific funds for WROs with appropriate conditions so that groups of WROs can apply and work together.

Indeed, a respondent from Supporting People and Rebuilding Communities (SPaRC) mentioned that WROs’ dependence on donors’ funding needs to change. It is difficult to raise funds locally for humanitarian responses, but this is one avenue of independent funding for WROs. She also added that long-term campaigns for change are difficult to sustain when funding is only for a specific period.

Coordination with government agencies

All of the WROs tried to coordinate with local and national government agencies in responses to Covid-19. Some of the organisations like DCF, BNSK, and Naripokkho were able to coordinate at national level with different departments and ministries because of their size and connections to national networking organisations. At the grassroots level, WROs like Badabon Sangho and ELLMA have coordinated awareness and relief distribution activities with Bangladesh’s Coast Guard, Forest Department and Deputy Commissioner offices.

A respondent from ELLMA mentioned that amid lockdown her organisation was concerned for the women and girls in prison considering their vulnerability to violence. Generally, NGOs and parents are allowed to visit inmates in prison. However, during the pandemic they were not allowed. ELLMA conducted online Zoom meetings with the Deputy Commissioner and women and children to follow up the situation. It was a feminist action amid the Covid-19 pandemic.

Bangladesh Mohila Parishad, Bagerhat District Unit, mentioned that in the pandemic, they reached out to support vulnerable women, including by helping them to produce cards to get free rice through government relief programs, distributing masks and providing advice and information. After the lockdown, Parishad members arranged a meeting and conducted a series of consultations. By that time, there was a severe mask shortage in Bagerhat and Khulna. Many associations started to make masks so they used some funds to distribute 500 masks and 200 sanitisers to 1000 people. They have also distributed dry and cooked food, powdered milk and biscuits for children and raised funds to help deprived families celebrate Eid. In order to make it confidential, the members used innovative methods like sending rice and pulses to vulnerable household’s doors in the darkness of night, receiving confirmation they received the food items by phone call.
CONCLUSION

Based on the views and opinions shared by WROs, women's groups and their members, local and central level government could improve its preparedness activities, taking a gender sensitive approach. Bangladesh’s government has delivered a sum of stimulus packages in response to Covid-19, but most of these are for business communities. Stimulus packages which were designed and delivered for marginalised groups of women like women returnee migrant workers, fisher-folk, small business holders and women with disabilities were not easy to access. Some of them were not known to the WROs and their members.

It is evident that it is at the grassroots level that the crisis hits the hardest. It is here that prevention for and recovery post any emergency must be led by WROs. Women and children are the most vulnerable in any crisis, yet the government and authorities tend to have a blanket approach to any disaster response. Different communities are vulnerable in different ways based on factors such as their gender, location, age, environment and disability status, therefore specific intervention and preparedness should be designed to respond to specific needs.

The local government and community-based organisations are critical actors in contributing to mitigating disaster risk in their respective communities. Therefore, human resource training, financial resources, a strong humanitarian response plan and infrastructural preparedness is needed to tackle any humanitarian crisis.

It is revealed in this study that the lack of the humanitarian response plan at the local level is forcing people to disobey the social distancing and other precautionary measures. Women and their communities are forced to work due to their economic conditions – they have no real choice.
RECOMMENDATIONS

The following recommendations were shared by the members of the WRO for local and national government and the international communities to strengthen the humanitarian system in Bangladesh and make it more gender sensitive.

Local government

- Develop the capacity of local elected bodies for developing the local humanitarian response plan. There should be capacity building for union parishad’s locally elected bodies so that they provide a gender-sensitive humanitarian response.

- Give emphasis to coordination policies and practices involving CBOs, WROs and government agencies while developing local plans. There should be strong, gender-sensitive coordination and partnership with WROs and government agencies.

- Ensure transparency and accountability for the response activities including how participants are selected – this should include a public display of the entire process. Union parishad’s women members should have important roles in the beneficiary selection process.

- It is suggested that WRO’s programmes include boys and men at the grassroots level activities to shift their patriarchal mindset.

National government

- Humanitarian responses including schemes and stimulus packages should be distributed through local government involving WROs – this is currently managed by the different government departments and agencies.

- In order to avoid duplication and increase advocacy and influence, each of the WROs should work on separate issues and/or with separate marginalised groups like harijan women, women with disabilities, women landowners, sex workers etc.

International community

- Partnership between WROs and international NGOs should be direct rather than routing through national NGOs who take a big portion of the budget. A funding network should be created for the big organisations to distribute equal funding and decision-making rights among their partners at the grassroots level.

- Support to the WRO should be long-term instead of just the project period, to allow WROs to build on previous projects and affect long-term change.

- International NGOs should share global tested tools and methods to help build the capacity of WROs.

- WROs should build a solid body of grassroots evidence to influence international as well as national policy actors.


3 Harijans in South Asia are discriminated against by the caste system, a social structure which treats some people as ‘untouchable’.


5 Retrieved from: http://www.askbd.org/ask/

6 Harijans in South Asia are discriminated against by the caste system, a social structure which treats some people as ‘untouchable’.

7 Chittagong Hill Tracts (CHT) is a post-conflict zone, originally home to 11 hill tribes but now most of the tribes’ land has been occupied through a state-sponsored transmigration program which started in the late 1970s. The three districts in CHT have a different administrative and judiciary system as people from ethnic minorities have their own traditional systems.

8 An Upazila Nirbahi Officer (UNO) is the chief executive officer of an Upazila (sub-district) and a mid-level officer of the Bangladesh Civil Service.

9 The Citizen Coordination Committee is made up of journalists, women leaders and local elected bodies. Before Covid the Committee advocated for local issues with the administration but during the pandemic, the Committee assisted in raising public awareness of the virus.

10 Bangladesh taka.
This report is part of wider FHN Research looking at the challenges and feminist solutions taken on by WROs in response to Covid-19 in 8 country contexts.