

CONCEPT NOTE

On

SIDE EVENT

Presented at the 59th Session of the Commission on the Status of Women

The Impact of Ebola on Women, Men and Children in Liberia

1.0 Background

The ongoing EVD crisis, which started in West Africa early this year, has been described as the biggest outbreak in history, and is designated as posing a public health threat of international magnitude. By late November 2014, the World Health Organization (WHO) reported 15,351 cumulative cases¹. With the epicenter of the outbreak in the Mano River Basin, Guinea, Sierra Leone and Liberia account for nearly all (99.8%) EDV cases (suspect, probable and confirmed). The situation in Liberia has been particularly grave, with nearly half (46%) of the cumulative cases in the region, and about 42% (2963/7082) case fatality rate.² From the onset of the second wave of EVD in Liberia on May 23, 2014, the Ministry of Health and Social Welfare (MoHSW) has recorded 7,168 cumulative cases, with a case fatality rate of 42%, corroborating the findings of WHO³. The outbreak in Liberia has had widespread hot spots in Montserrado, Margibi, Lofa, Bong, Bomi and Grand Bassa Counties.

The spread of EVD represents one of the greatest health challenges that Liberia has faced since its independence. The virus has not only exposed the inadequacies of the health system, but also shaken the fabric of social life as it carousel through communities tearing families apart and taking the lives of health workers. The Government of Liberia has requested international assistance to deal with the rapid spread of the virus across the country.

Rationale:

The virus outbreak has taken a serious toll on Liberia. All sectors of essential services in both public and private sectors are left devastated; the toll did not only crippled institutions, at least 170 health workers and foremost medical doctors died of EVD. Several dozens of victim

¹http://apps.who.int/iris/bitstream/10665/144117/1/roadmapsitre_21Nov2014_eng.pdf (WHO, 2014)

²http://apps.who.int/iris/bitstream/10665/144117/1/roadmapsitre_21Nov2014_eng.pdf (WHO, 2014)

³Ministry of Health & Social Welfare Ebola Daily SitRep (No. 191, 22nd November, 2014)

families and survivors suffer stigmatization, isolation and denials. This case of disengagement has adversely affected the local production of basic foods and service delivery. At many international fronts, Liberia and Liberians were being comprehensively stigmatized and subjected to untold varieties of inclement receptions.

Health Care Workers are however at the center as the direct point of contact in the fight to treat, contain and to chase Ebola out of Liberia; it is they who have to ensure both at clinical and community levels that the virus does not spread from patients to care providers; from care providers to other care providers; and from Health Care Workers to their families; and from families to their respective communities. The negative impacts generated by this outbreak can be seen the case of the women and children.

Goal and Expected Outcomes:

The ultimate goal of this side event is to rally partnership for effective, efficient and sustainable intervention in the campaign to contain the spread of the Ebola virus and to transform the energies being spent for stigmatizing response countries and communities into taking shared responsibility toward Ebola prevention and into saving human life. It is expected in the next few days, weeks and months to see evidence of the interventions resulting from the partnerships and/or supports which may have evolved from this presentation. It is expected that international humanitarian actors and donors would take supportive rolls that allow the Liberian women increased capacity for addressing the post Ebola recovery process.

Women:

Anecdotal evidence suggests that more women were contracting the virus, owing to their care giving roles within the home and wider community. In the absence of functional health facilities and overstretched Ebola treatment centres, it was women and the girl children who continued to bear the burden of the epidemic as they have been at the frontline to provide care to infected relatives and the sick: serving as wives, mothers, daughters, nurses and midwives. The current Maternal Mortality ratio for Liberia (1072/100,000 births)⁴ will surge in the wake of closure of primary health care facilities to cater to the basic and reproductive health needs of communities.

Contrary to these anecdotes, preliminary surveillance data from the Ministry of Health indicates a reverse of this trend, with slightly more men being infected with EVD than women⁵, with more death reported among men than women. Nonetheless, no research has yet been done into possible reasons for this apparent anomaly. However, without adequate gender disaggregated data it is difficult to appreciate the differential effects of EVD on women and girls, and their male counterparts. This weakness does not only affect data classification, analysis and interpretation to inform a proper gender outlook, it undermines efforts at designing and

⁴Preliminary findings: LDHS, 2013

⁵Ministry of Health & Social Welfare Ebola Daily Sitrep (22nd September, 2014

undertaking evidence-based interventions to curb the epidemic and mitigate its cascading impacts, and engender early recovery.

There is an increased burden of care for women as some families have lost members who were a major source of income. Women are also highly and as such highly susceptible to the disease given how it is transmitted. Some of the infected people are not willing to go to the health centers for care, and as such families are left with the burden to care for them leading to a high risk factor for women who are generally/traditional caregivers.. In addition, some suspected cases included pregnant women and as such hospitals were increasingly turning away pregnant women for fear of Ebola. In some cases, pregnant women exhibiting these symptoms are treated as suspected case and isolated from their families.

Additionally with the closure of borders by the Government and ban on the sale of bush meat affected women vendors, particularly women who are engaged in cross border trade ability making it difficult to meet the daily needs of their families.

Children and other key population:

Children are also affected as recent reports indicate a rising number of children orphaned by the disease, reportedly as high as 2000 orphans (UNICEF, 2014). The stigma associated with survivors is affecting both women and children who are ostracized by the communities upon their return. Key populations including people living with HIV are also affected within the context of access to sexual and reproductive health commodities and access to supplies of anti-retroviral drugs. According to reports from the County Health Teams, the administering of ARV drugs has not been active since August 2014.

The CSW will be used as space for Liberia, as a country to highlight the many challenge experience by women, girls and other vulnerable groups and share best practices on how CSOs, particularly women led organizations, and groups supported the government's effort to contain the possible spread of the disease, and to educate the public about prevention.

Justification

The EVD crisis in Liberia has gone beyond being just a health problem and is fast eroding the social fabric and economic infrastructure of the country. The socio-economic impacts of Ebola on women and girls in Liberia have not gone unnoticed. The livelihoods of women involved in agriculture, trade (local, regional, and international) and other economic activities have indeed been affected gravely. There are concerns of continuing incidence of Gender Based Violence (GBV) - sexual violence, exploitation and abuse, coupled with limited access to water and sanitation facilities. Long standing traditions and cultural practices are further deepening the vulnerabilities of women and girls.

As a result, an assessment survey is being conducted to determine the comparable impacts of EVD on women and men in Liberia. In addition to generating evidence on the gender

disaggregated effects of EVD, the study will contribute to the growing discourse on gender in emergency, articulating gender perspectives of knowledge, beliefs and practices regarding Ebola; women's leadership and participation in the national response, and communities' coping mechanisms and perception regarding the promotion of early recover.

Research areas

- A. Livelihoods/agriculture: access to finance, loan payments, savings, impact on business revenue, cross border trading, employment, trade/markets, impact on the household e.g. food security, income generation.
- B. Access to health services: clinics/hospital functionality, availability of services, e.g. pregnancy, sexual/reproductive health, perception of health practitioners' attitudes, access to child health, cost of health care, alternative health services available to communities.
- C. GBV/ Protection: incidence and recurrence of GBV, types of violence, ability to access protection, HIV testing and treatment, GBV reporting and referral mechanisms,
- D. WASH: access to services, maintenance of facilities, water practices, hygiene and sanitation practices especially hand washing.

UN Women and Oxfam are leading the partnership on the study, working along with other stakeholders, particularly the Ministry of Gender, Children and Social Welfare, other UN agencies, WASH Consortium, implementing partners, etc. UN Women and Oxfam have committed both expertise and funding resources to work with LISGIS to underwrite the study.

With the issues and challenges highlighted in this documentation, the Liberian delegation is sourcing support from partners to hold a Panel Discussion as a Side Event on The Impact of Ebola on Women, Men, Children and other vulnerable group. The Side Event will focus on the following:

- Study conducted on the impact of Ebola on Women and Men;
- Women Organizations role in the fight against the Ebola Virus Disease;
- Grass root women approach in handling families affected by Ebola

Panel Discussants will be comprised of MoGCSP, Representative of a Women organization and Grass root woman.

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