Food Insecurity

As every country around the world navigates unprecedented restrictions as a result of the COVID-19 pandemic, the Women’s Refugee Commission (WRC) is working directly with humanitarian partners on the front lines during this crisis to advance research-based advocacy. Critical to that is hearing from our partners about how the pandemic is affecting the lives of displaced women, children, and youth. To date, organizations and individuals from across four continents have responded.

Here’s what we know so far about food insecurity

Wherever nutritional needs are unmet, families employ difficult and risky coping strategies, from restricting intake — which disproportionately affects women and girls in households — to forcibly marrying adolescent girls into wealthier households to reduce expenditure on girls’ basic needs.

From Afghanistan to El Salvador to Nigeria, we heard overwhelmingly from our partners that the loss of income for migrants, refugees, and local communities and the shuttering of services as a result of lockdowns means that food insecurity is an immediate threat to the well-being of displaced women, children, and youth.

Refugees who had been able to start small business, such as street vending, have seen those new ventures disappear as interacting with customers and suppliers becomes dangerous. Displaced communities that were reliant of cash transfers for food prior to the pandemic have, in some cases, seen cash transfer amounts reduced while, alarmingly, food prices continue to increase. In some cases where host governments are distributing emergency food rations, refugees have been excluded from these distributions.

Food is so scarce in some places that parents are resorting to child marriage for their young daughters, and women and girls have turned to survival sex/selling sex to avoid starving.

Displaced persons with disabilities and members of LGBTQI+ populations are facing increased and unique food scarcity challenges, as safe spaces and mobility assistance programs have become inaccessible during lockdowns.

Border closures around the globe as a result of the pandemic, many of which happened overnight, have meant that many displaced women and children are unable to return to their homes. Consequently, they have been separated from food supplies and children have been separated from caregivers and parents. “Our parents are locked down outside the settlement,” said a young girl in Kyaka II refugee settlement in Uganda. “How are we going to get food and money?”

Displaced women in Afghanistan report their first priority is not sanitizer or masks, it is food. A widow raising five children in Kabul said, “We know what COVID-19 is, but we don’t know how to feed our children.” In South Sudan, an area long vulnerable to food insecurity, the pandemic has disrupted food supply routes, leaving displaced communities further marginalized and in desperation.

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What can be done?

As global agencies such as the World Food Program (WFP) and the United Nations High Commissioner for Refugees (UNHCR) assess their own plans to address the food insecurity plaguing displaced persons around the world, it is important to know that there are key courses of action needed to ensure that women and girls are not left behind in efforts to address food security.

- **Leverage cash and voucher assistance (CVA) with age, gender, and diversity lenses to support food security.** CVA can be a key tool to help families afford food and limit the distance and time required to meet their needs, and thus their exposure to COVID-19. Women and girls are primarily responsible for procuring and preparing food and often consume the least; women and girls with disabilities face heightened risks of deprivation. By helping to address the financial constraints of the household, CVA can increase women’s and girls’ access to food within the household.

- **Use technology for timely and safe delivery of CVA.** Technology, such as money transfers through mobile phones and phone consultations to assess needs and monitor the progress of interventions, can reduce person-to-person contact and thus exposure to COVID-19. Access to technology within the household is often gendered and also different based on age and ability. Due diligence is needed to ensure the benefits of technology are maximized and its use does not exacerbate inequalities within the household — including who within the household is being consulted, whose needs are elevated, and who has access to and control of CVA.

- **Proactively design programming to reduce exposure to gender-based violence (GBV) and to enhance the safety of women and girls.** Traveling to purchase or harvest food and to collect water or energy sources such as firewood is often the responsibility of women and girls and increases their exposure to GBV, such as sexual assault. These activities are now even more dangerous with the risk of contracting COVID-19. Programming designed to help must identify and mitigate these risks to ensure that women and girls are safe.

- **Make linkages with social safety nets.** Short-term CVA to meet immediate food needs during COVID-19 will not solve chronic vulnerability. Linking CVA with government-led social safety nets will increase access to assistance for the most marginalized and improve host governments’ abilities to be inclusive of displaced populations and address this and future pandemics.

- **Strengthen and adapt livelihoods programming.** While many livelihoods may not be able to resume immediately, programming to support households to adapt their business plans for social distancing will help families meet their nutritional and other basic needs and to transition off of humanitarian assistance sooner rather than later. Further, these adaptations will lead to innovations and new markets, products, and services. Working with female entrepreneurs to identify what kind of assistance they need (for example, access to credit and training) will not only help restart trade but make markets more inclusive in the long run. As livelihoods are strengthened, families will be able to move away from risky coping strategies, such as early marriage.

- **Collaborate with local partners.** Local organizations, including those that are women-led and youth-led, have unique contributions to make to CVA. They are uniquely placed to understand needs and implement appropriate solutions.

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