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Arab NGO Network for Development
شبكة المنظمات العربية غير الحكومية للتنمية

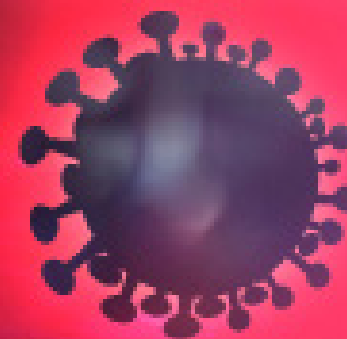
News Bulletin

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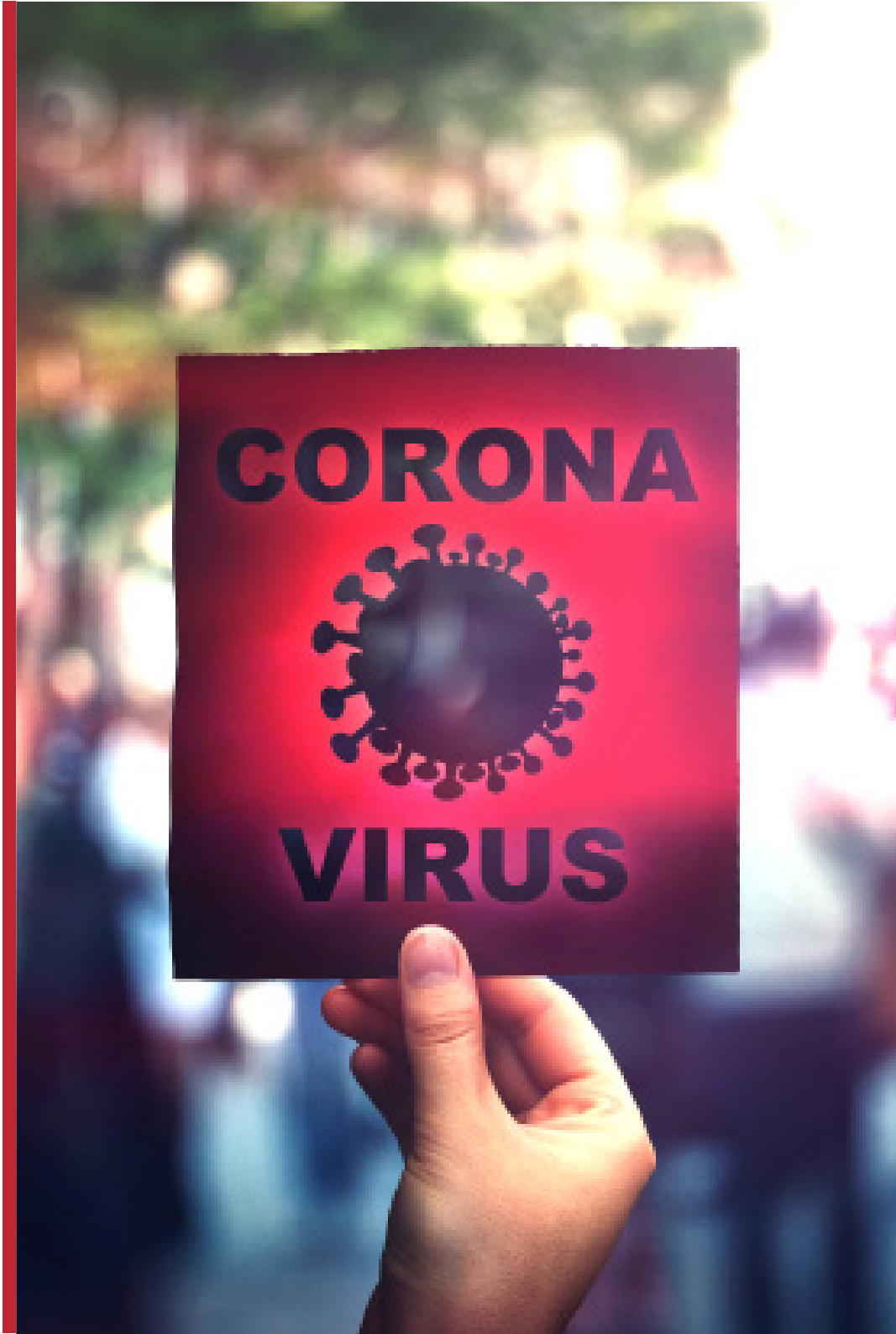
THE PANDEMIC'S TREMENDOUS EFFECT ON THE ARAB REGION

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CORONA



VIRUS



Updates from the region

The spread of COVID-19 in the Arab region has taken out lives, increased vulnerabilities, but also significantly exacerbated the multiple crises affecting the region, which is enduring wars and conflicts, political turmoil, revolutions, and complex transitions. Once this pandemic is over, it is almost certain that the region will not be the same.

To better understand the direct repercussions of the health crisis, the Arab NGO Network for Development (ANND) sent out a short questionnaire to its members and partners across the region, and the results and challenges seemed to be remarkably similar. All countries shared great concerns over challenges on the economic level, followed by difficulties on the social level, and to a lesser extent on the security level. Although there hasn't been official figures and numbers reported on behalf of the governments on the impact of the virus on the social and economic sectors, the situation remains dire in most of the countries.

Vulnerabilities of the labor market

Workers enrolled in informal employment were reported the most vulnerable (90%), followed by workers in the private sector (78%), in the health sector (60%), education sector (37%), and public sector (11%). For instance, workers in informal employment constitute a major bulk of the labor market (more than 50% on average in the Arab region), are not bound by the labor laws, and work on a day to day basis, with no guarantee of wage nor social protection; as such, when the economic activities came to a halt as a result of lockdown and confinement, the vast majority of workers have become vulnerable and lost their source of income. Workers in the private sector have been exposed to increased risks of dismissal from jobs, reduced wages, or nonpayment of wages. Although some countries such as Lebanon, Jordan and Bahrain provided facilitations and support for

the private sector to maintain its operations and employees, many businesses have shut down. Doctors, nurses and workers in the medical field are found to be more exposed to the virus, especially in countries that lack appropriate infrastructure and preventative care such as in Iraq, Egypt, Tunisia and Algeria, and countries whose medical sector has collapsed as a result of conflict such as Yemen.

Responses of governments

Amid the vast spread of COVID-19, Arab governments took immediate responses (some on a slower pace) to mitigate the risks associated with the virus. These mainly include declaring state of emergency, halting all economic and social activities, closing all borders, imposing curfews, allocating care centers for the infected by the virus, and forcing confinement and testing on new comers.

Moreover, some countries have provided support to the private sector to maintain jobs and operations in times of closure, rescheduled household's debts such as in Lebanon and Jordan, reduced or eliminated certain bills such as electricity bill in Bahrain and Mauritania, and provided small monthly cash or in-kind assistance for the poor households such as in Iraq, Morocco, Tunisia, Lebanon, Bahrain and Egypt. Although these initiatives seem to be fair, their actual contribution to the households are very low compared to the great challenges imposed on the social and economic levels, and hence do not seem to be sufficient nor efficient to ease the real and greater effects of the health crisis. Most of the countries have initiated and supported distance learning to compensate for the closure of schools and universities, but indeed, the lack of adequate infrastructure and quality of public education have complicated the process, and rendered distance learning a luxury nor workers nor attendees of public education can afford. This has especially

widened the gap among students attending private establishments who are equipped with more resources and capabilities, and those attending public ones.

Initiatives by the civil society:

The civil society in the Arab region has been mobilized to combat the spread of the virus and guarantee efficient responses that can ease the consequences associated with COVID-19. Many have been mobilized on the field by providing direct aid and support, monitoring cases and trends, volunteering and responding, and others have multiplied their advocacy efforts and calls to protect the vulnerable and all segments of the society, including for instance migrants, refugees, and prisoners. The civil society has suggested fair and transparent models and mechanisms for aid assistance provided by governments, contributed in sharing knowledge about the virus and spreading awareness in all localities, and more importantly, continue to demand greater partnerships with the public sector to be able to truly reach and assist as many people as possible.

Civil society organizations (CSOs) have overall all suspended their activities that require physical attendance, respected the confinement policies and developed new ways to facilitate work from home and made efficient use of the broad social media and communication tools, while in parallel, they have increased and gathered efforts and networking among them to guarantee a broader reach and better responses.



The faltering response to the COVID 19 crisis in the Arab region

Zahra Bazzi, Arab NGO Network for Development

Regional Context

The COVID-19 health crisis added to the multidimensional crises in the Arab region and their manifestation in conflicts, wars, economic and social inequalities, and the increasing number of refugees and migrants. It could lead to severe repercussions at the economic, social, and political levels. According to an [ESCWA preliminary](#) estimate, the region will lose at least USD42 billion in 2020 due to the Corona pandemic. ESCWA also considered that the global spread of the virus and the growing impact of low oil prices could aggravate income losses. Unemployment is expected to increase by 1.2 percentage points, meaning the loss of around [1.7 million jobs](#). The Arab region registers some of the highest rates of inequality around the world, and [informal employment](#) accounts for 50% of jobs. It also lacks universal social protection systems and is thus unable to protect workers and ensure their dignity during work stoppages.

The region also hosts unprecedented numbers of refugees and migrants living in grim conditions who will face additional repercussions as the quarantine continues. For women, who already face social, political, and economic exclusion in the region, the crisis meant additional social marginalization. Cases of [domestic violence](#) rose dramatically during the quarantine, amid additional complications related to difficulties faced by women in access to assistance, whether from friends and family, from helplines, or the application of the law. This situation explains the fear of the magnitude of the expected social impact of the current crisis.

Furthermore, most countries in the Arab region suffer from a financial deficit, brought about by their adopted economic policies, weak

production capacities, and high borrowing rates. It is especially true in countries such as Lebanon, Jordan, and Tunisia, which top the list of Arab countries in terms of the heavy per capita share of the debt. Debt service has become a burden on State budgets, reducing its ability to respond to social emergencies. On the political level, the impact of the crisis began to materialize at the start of the health closures. The pandemic temporarily emptied the streets of protesters in Algeria, Lebanon, and Iraq. The region's armies regained public squares in the name of the quarantine. There are fears that the [regimes might exploit the epidemic](#) to increase their control and thus limit and suppress freedoms. This trend is apparent in the attempts to impede civil society from participation in response operations and related public policymaking in particular.



Government Responses in the Region

Country	Financial and Social Measures
Jordan	<ul style="list-style-type: none"> (1) Postponing sales tax collection local and imported health goods. (2) Allocating 50% of maternity insurance revenues to material assistance for the elderly and sick. (3) Applying price ceilings for essential products. (4) Postponing 70% of the value of customs duties for selected companies and reducing the private sector's social security contributions.
Lebanon	<ul style="list-style-type: none"> (1) The government established a national solidarity fund for in-kind and cash donations. (2) The Ministry of Interior announced the extension of all deadlines related to taxes and duties. (3) The Ministry of Social Affairs adopted a plan in collaboration with Municipalities, Social Affairs Centers, and the military to distribute solidarity baskets containing food and disinfectants for families affected economically or financially by COVID-19. Cash assistance is also in process.
Iraq	<ul style="list-style-type: none"> (1) The Central Bank of Iraq established a fund for donations from financial institutions, with initial contributions of USD20 million. (2) The Central Bank announced the suspension of interests and payments for small and medium enterprises through the targeted lending initiative ("One Trillion Iraqi Dinars" initiative). It encouraged banks to extend maturities on all loans.
Palestine	<ul style="list-style-type: none"> (1) The Palestinian Monetary Authority postponed the payment of monthly/periodic loans for all borrowers for the next four months and the tourism and hotel sectors for the next six months. It also prohibited the collection of fees, commissions, or additional interest on deferred payments.
Egypt	<ul style="list-style-type: none"> (1) The government announced a USD6.4 billion (100 billion Egyptian pounds, 2% of GDP) stimulus package to mitigate the economic impact of COVID-19. (2) It increased pensions by 14%. (3) It reduced energy costs for the entire industrial sector, provided real estate tax exemptions to the industrial and tourism sectors, and intensified subsidies for exporters. (4) As part of the EGP100 billion, the government earmarked 50 billion for the tourism sector that contributed approximately 12% of Egypt's GDP, 10% of employment, and about 4% of revenue, as of 2019. (5) It extended the moratorium on the agricultural land tax law for two years. (6) It reduced stamp duties on transactions and taxes on dividends and postponed the capital gains tax until further notice.

Morocco	<p>(1) The authorities created a special fund for managing the epidemic, with a value of about USD1 billion, funded by the government and voluntary contributions from public and private entities. This fund will cover the costs of upgrading medical facilities and supporting companies and families affected by the epidemic.</p> <p>(2) Those registered with the pension fund who become unemployed will receive 2,000 dirhams per month and can postpone debt payments until June 30. Besides, all companies can postpone social contribution payments until June 30; companies with an annual turnover of fewer than 20 million dirhams can defer tax payments.</p>
Algeria	<p>(1) In response to the oil price shock, the authorities announced their intention to cut current spending by 30% while keeping wages intact and protecting spending on health and education. The government is also preparing a supplementary financial law, which will include measures to mitigate the economic impact of the virus. In particular, the law will include measures to compensate for losses incurred by companies.</p> <p>(2) Individual and corporate tax returns and payments were postponed, except for large companies.</p>
Mauritania	<p>(1) The government reduced the interest rate from 6.5% to 5%, the marginal lending rate from 9% to 6.5%, and reserves requirements from 7% to 5%.</p>
Tunisia	<p>(1) Tunisia announced a TND2.5 billion contingency plan. The package includes postponing payments for communications and information technology tax and other taxes and social contributions, value-added tax exemptions, value-added tax refund procedures, speeding up payment, rescheduling taxes, and customs arrears. It aims to provide liquidity for the private sector, to reduce layoffs, and to protect the most vulnerable, especially in the informal sector.</p> <p>(2) The plan also includes expanding budget allocations for health expenditures, in addition to setting up a fund of TND100 million to purchase equipment for public hospitals. In social terms, this also includes cash transfers for low-income families, the disabled, and the homeless.</p>
Yemen	No Procedures

Source: Information gathered from the IMF's monitor of crisis response policies in MENA countries.

The above table, in addition to consultations through ANND's framework, indicates that the level of economic and social response to the crisis has remained below par. Despite the compelling impact of the crisis on the economic and social situations, government responses were lacking. They allocated aid through targeting, which did not follow any comprehensive approach. The response focused on countries that initiated measures to refocus regulations and public policies as is and to adopt economic approaches without

placing people at their center.

As the crisis proves once again, neoliberal approaches are incapable of protecting citizens and their resilience in dealing with such shocks. Austerity trends followed around the world are some of the main reasons that led to the inability to face the Corona crisis. They have led to the exhaustion of health systems even in developed countries, who became unable to respond to crises and epidemics. Notwithstanding, Arab countries did not take the initiative to rethink the adopted general policy approaches. Their responses stuck to the same general directions and fragmented approaches that seek to support businesses through tax exemptions, deferral of debt obligations, and support for small and medium-sized companies. All the while, aid to marginalized groups remains inadequate, and there is no evidence of any steps to rethink the current social protection systems. On this basis, responding to the crisis requires comprehensive approaches addressing the immediate dimension through rapid interventions to limit the collapse and seek to protect productive and decent-work-generating economic sectors. Such approaches should be part of a long-term strategy based on lessons learned from the crisis and in the proposals for an alternative development paradigm with universal human rights at its core. Addressing a crisis of global proportions requires cooperation and synergy between countries. However, quarantine measures that imposed border closures were accompanied by countries closing upon themselves and focusing on national crisis response initiatives. They failed to take into consideration its long-term global repercussions, which will bounce back to all countries. This isolationist approach is repeated in the Arab region amidst the faltering framework of its regional institutions and political divisions, which were unable to push towards regional cooperation to face the crisis. Low oil prices and their disastrous impact on Gulf Cooperation Council (GCC) countries came to reduce the possibilities and opportunities for cooperation, although Arab cooperation is needed now more than ever.



International Cooperation under COVID-19

May Makki, the Arab NGO Network for Development

The world today is facing a crisis of a global character. This means that this crisis won't hit poor nations only, but rich ones as well. However, while rich nations might have the ability to mobilize trillions of dollars for recovery, poor nations will not be able to do the same. With the sharp increase in unemployment and poverty levels, and the collapse of health systems all over the world, evidence so far suggests that developing countries will be hit the hardest. Countries in conflict and fragility in particular will be the most vulnerable. In the Arab region alone, **8.3 million** people will fall into poverty due to COVID-19, and at least **1.7 million jobs** will be lost. Addressing the challenges in one part of the world will not solve the problem, however. This should eventually lead us to think about solidarity, equality, justice and fair distribution. No wonder aid has been central to the discussions around this pandemic. There is a certain need for "outsourcing", as economies, especially those already under stress, fail to secure necessary resources to provide adequate response to the pandemic. UN has been **speaking** of a new "Marshall Plan" of a \$500 Billion worth of grants targeting health recovery, as well as "helicopter money" and debt jubilee. And interestingly, international financial institutions like the IMF have been also speaking of debt relief and cancellation. So where does the world stand vis-à-vis these efforts?

UNCTAD **estimated** the financing gap for developing countries for the next two years of around 2-3 trillion dollars. Looking at **ODA levels** for 2019, numbers are nowhere where they should be, to meet the 0.7% GNI requirement of donor countries. The \$500 billions, according to UNCTAD, make up only a quarter of the last decade's missing ODA. On the other hand, in terms of the **quality of ODA**, it is important to note that ODA targeting poverty and health sector has been decreasing, while ODA loans have been increasing at

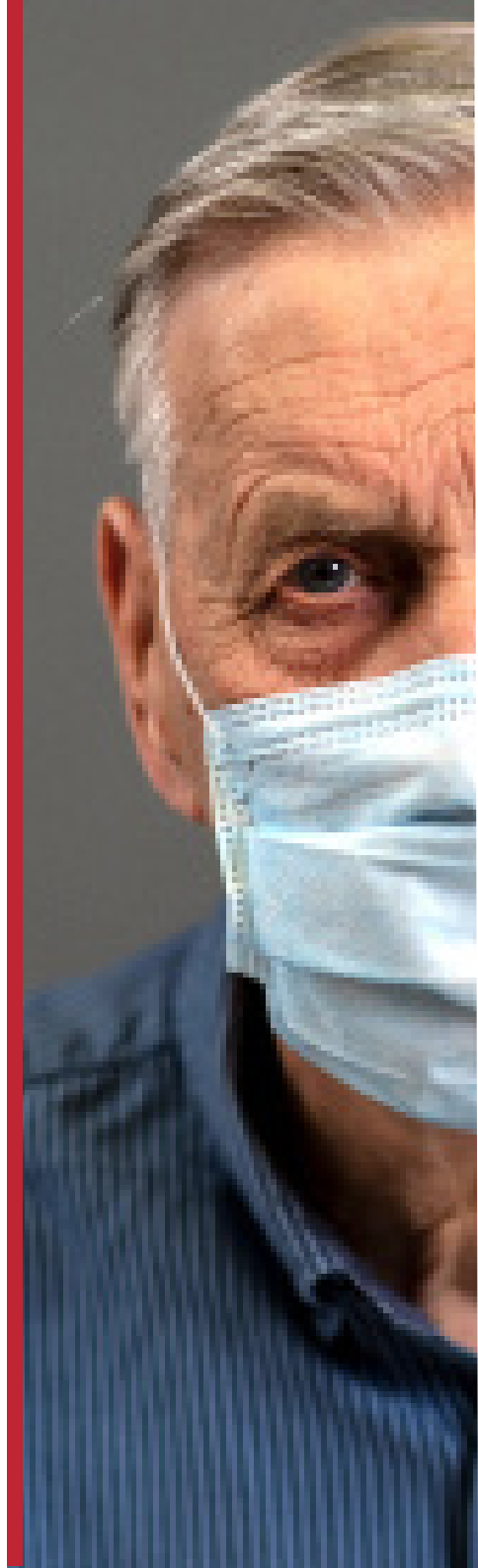
the expense of grants and concessionality. Moreover, **debt relief** is only at a total of 0.1 USD billion or less than 0.1% of ODA.

It is also important to mention that many countries entered the COVID-19 outbreak already at a risk of facing unsustainable debt crises. Globally, repayments on public external debt in developing countries are estimated at nearly \$3.4 trillion in 2020 and 2021 alone. Among the countries of the region, Lebanon, Tunisia, and Djibouti which are facing **huge debt service** on their public external debt. While IMF called for debt relief for a selected list of 25 countries at risk, among which Yemen who is considered to be at moderate risk of debt distress, this initiative should only be seen as a step in the right direction for **two reasons**. The amount of debt relief is still minor compared to total debt, and it should not be at the expense of other aid sources. The group of G20 have also announced bilateral **debt suspension** for 77 countries; however, the amount of debt relief still falls short from the money needed by developing countries to face the COVID-19 pandemic. Moreover, this is only a suspension rather than a cancellation, which means indebted countries are still facing the risk of falling into unsustainable debt crises.

Finally, when we speak of international cooperation, it is important to discuss the development model that is being promoted today. This pandemic specifically has shown us that the public sector was more flexible and efficient in responding to people's needs. This crisis shows us that more effort needs to be put in strengthening the public sector, especially when it comes to basic needs such as medical care. However, involvement of the private sector in development is being increasingly promoted. PPPs are being heavily promoted today, even in sectors such as education and health, and more aid is being channeled today through the private sector thanks to new

innovative instruments of blended finance. While we acknowledge the importance of developing and building an effective productive and employment-generating private sector in the region, IFIs' discourse, manifesting most recently by the Spring meetings statements, shows a continuous promotion of privatization of public services and PPPs. Another lesson learned from the crisis as well, and the need for resilience under lockdown pressure, is the importance of a comprehensive social protection policy that addresses that needs of the most vulnerable and that leaves no one behind. This should be translated into concrete actions by international institutions to acknowledge social protection as a priority, especially as social protection systems in the region have suffered over the years in countries such as Jordan and Egypt under the intervention of IFIs.

Now more than ever there is a need to speak of the importance of building and strengthening national systems, since they are the prerequisite for efficiency and durability. Among the principles of **aid effectiveness** and **effective development cooperation** is using developing countries national systems, ensuring inclusive development partnerships, and stressing the ownership of development priorities by developing countries. These principles relate to the concept of localizing aid, which means allowing developing countries the leadership in their own development efforts and agendas. In short, the world today stands at an opportunity of reforming aid and cooperation systems. Localizing aid, putting more effort into strengthening public services and making them more efficient, taking debt relief measures one step further, and increasing the quantity and enhancing the quality of ODA are crucial measures if international cooperation was to provide the world a way out of this multidimensional crisis.



Addressing the Epidemiological and Economic Situation in Tunisia Under COVID-19

Nayla Tlili, Tunisian Association of Democratic Women (ATFD)

As COVID-19 arrived in Tunisia on 2 March 2020, the government took several proactive measures to address the epidemic. By April 2020, the Ministry of Health announced that a total of 949 infections had been registered, including 38 deaths and 216 recoveries. The crisis revealed that only 240 beds were available and distributed among some coastal states and Greater Tunis, at a rate of three beds per 100,000 inhabitants. The Tunisian Ministry of Foreign Affairs also announced the death of more than 40 Tunisians in France and five in Italy, stressing that repatriating the bodies will be impossible due to border closures and that diplomatic missions will cover burial expenses there.

Preventive measures included the announcement of a national health lockdown, a curfew from 8 PM to 6 AM, closure of all land, air, and sea borders, banning all gatherings, closing markets and bathhouses, adopting a one-shift system (five hours per day), restricting movement between cities, and closing all major factories with a high density of workers.

Based on some reports and studies, four possible scenarios might face the Tunisian economy due to the COVID-19 crisis. The first and least critical will come about if the spread is contained, minimizing economic repercussions. The second case is the limited spread of the virus. The third relates to a wide-spreading epidemic, the difficulties entailed in its control, and significant economic impacts. The fourth and most critical represents the loss of control of the outbreak, the inability to contain the ensuing health crisis, and, thus, the failure of containment measures. It also includes more economic risks affecting all sectors, which are already stalled due to the continued public quarantine.

According to current assumptions, the rate of economic growth will be in the range of 1.75% in the first scenario and around (negative) -1.86% in the fourth and most economically dangerous scenario. The latter will lead to a productive shock in the tourism, air transport, and maritime transport sectors, ranging between 20% and 50%, and 10% in other areas such as textile, mechanical, and electrical industries. The fourth scenario will entail a GDP loss in the range of (negative) -5.26%. Unemployment could increase between 1.53% in the first scenario and 4.15% in the fourth, amounting to a total of 19% seeking jobs. It adds to the need for external financing in the range of 6.2% to 29.1%, accordingly.

On the social level, comprehensive quarantine measures and decisions to suspend activities by governments have had economic and social impacts on securing the basic needs of most groups, where women bear the most sizeable burden. As with all disasters, epidemics, and crises, COVID-19 exposed the devastating impact of inequality in all societies, both in developed countries with medical, logistical, and service provisions and among other countries struggling to survive with limited capabilities. The crisis revealed a gap between classes and segments within the same society, including in Tunisia, where the comprehensive quarantine led to the loss of many jobs and the lack of daily income for segments working in the informal sectors and male and female daily workers. These conditions are exacerbated for poor rural and urban women, especially for low-income and daily-income families in the fragile and informal sectors. They find themselves today unable to provide a livelihood and living in fear of a spreading epidemic and lack of food and health security.

This crisis revealed the extent of fragility in public health services, as a result of

liquidation and disintegration in favor of the private sector. It also reiterated the importance of the public health sector and its strategic role in achieving health security. It is also a sector where more than half of the workers are women who sacrifice, face direct danger, and are at the frontlines of the struggle against the deadly epidemic, despite threats, risks, and unequal family and household responsibilities.

Despite the economic and social situation, difficulties in securing food, and psychological pressures experienced by families, most women endure double burdens in the household. They are forced by the patriarchal distribution of social tasks between the sexes to provide food, hygiene, and child care needs. The presence of the whole family throughout the day, with a multitude of moods and requests, leads to additional psychological pressures. Having children confined at home around the clock could lead to family tensions and mothers having to bear extra responsibility and painstaking mental and psychological effort.

Urgent and medium-term measures must be expedited to confront the economic and social impacts of COVID-19, including the review of economic and financial policies to enable countering its social effects. The public quarantine crisis resulted in the emergence of social difficulties based on the scarcity of many consumables and the high prices of others. Fragile sectors were first to be harmed, leading to a state of social tension, whose direction depends on the organization of crisis management in the coming days. Signs of social protest against living conditions and the loss of decent living necessities are appearing. Many rural residents of Jendouba governorate made a distress call to provide them with basic foodstuff. The district of Al-Manihala in Ariana Governorate in the capital witnessed

protest movements recently against the lack of social measures to accompany the comprehensive quarantine. The situation could lead to the rise of social movements due to difficulties faced by citizens in obtaining their basic needs and many Tunisians losing their livelihood.

Civil Society and NGO Initiatives

A full-day telethon was organized on 20 March 2020 collecting cash donations of around TND27.1 or EUR8.7, including 6.1 million raised and 21 million in confirmed promises. On 27 March, the Tunisian Professional Association of Banks and Financial Institutions announced the collection of TND112 million (EUR35.5 million euros donated by nine Tunisian banks). Its total contributions amounted to TND 194 million or EUR62 million on 21 April. The government established the 1818 Fund for financial donations to support its efforts in combating the epidemic, mainly due to its weak capacities in the medical field.

Within the framework of the initiative announced by the Ministry of Human Rights and Constitutional Bodies and in support of the national effort to prevent the novel Coronavirus, a group of municipalities, civil protection units, the Tunisian scouts, the Tunisian Red Crescent, and civil society associations, each according to its field of activity, aimed to intervene quickly to address the worsening situation:

- Providing in-kind donations of cleaning materials, health supplies, and medical masks for anyone in need (Association for Development and Strategic Studies, Maram Association, Tunisian Association for Positive Prevention...).
- Contributing to improving the population's living conditions by providing aid and distributing food to the needy.

- Surveying volunteers and placing them under the authority of the National Committee for Disaster Prevention and Response and organizing emergency response and regional committees (Tamaget Association, Young Doctors Association...).
- Directing human capacities (volunteers, activists...), financial capabilities, and in-kind assistance to the National Disaster Prevention Committee and the National Fund 1818 to collect donations earmarked for the pandemic.
- Initiating a green line, under the supervision of organizations and societies, to report suspected infections, abuses, and lack of respect for government decisions (I Am Watchful Organization, Young Doctors Association...).
- Taking urgent action and solidarity initiatives with vulnerable groups.
- Creating a listening cell and listening and counseling centers to identify citizen concerns and provide appropriate advice.
- Monitoring all association initiatives to contribute to the fight against COVID-19 (Association Advisory Center).
 - Organizing online seminars on important issues related to the epidemic and encouraging citizens to do more, give more, take full responsibility, and be fully aware of the imminent danger (Nomad Association, Tunisian Water Observatory).
- Determining effective measures to address the lack of discipline and recklessness, which will have severe consequences for social segments.
- Continuous monitoring of all public, commercial, and service spaces and trying to organize them so that they do not become the focus of the virus outbreak.
- Providing the required means of protection for medical and security personnel and those of the National Army on the frontlines.
- Enabling exceptional measures related to the health and social fields to contain the threat of the virus.

Report on ATFD Quarantine Activities

Tunisia entered the stage of general and comprehensive quarantine starting on 22 March 2020, leading the Tunisian Association of Democratic Women (ATFD) to harmonize its functioning and activities to provide services to women victims of violence in particular.

It launched legal guidance and psychological care services on the phone in its Listening and Guidance Centers for Women Victims of Violence in all chapters (Tunis, Sousse, Kairouan, and Sfax), which recorded a significant increase in demand during the quarantine, compared to the previous period. ATFD also used Listening Center databases to set a preliminary list of women victims of violence in a difficult social situation that included 80 beneficiaries. They each received a solidarity grant of TND300 (USD100), for a total amount of TND24,000 (about USD8,000). ATFD also donated TND20,000 (approximately USD7,000) to the National Fund to Tackle the COVID-19. Notably, since the beginning of the crisis, ATFD began to publish a set of recorded messages with its activists on various topics of concern to women related to the quarantine. ATFD also launched a national campaign to combat violence against women (VAW) (العنف_ضد_النساء_يقتل_كيف_الوباء #بيزي), involving more than 250 political and rights activists. They shared their pictures with slogans against VAW, in addition to publishing three PSAs on social media platforms. The campaign saw extensive interaction and comprehensive media coverage.

The Education Committee continued its university study activities through coordination meetings between the various activists of the young people clubs in ATFD's multiple branches to complete the final projects of the training sessions. The committee also made sure to hold consecutive meetings between young men and women and its members to share experiences. A distance training course on citizenship and political rights for women was set for 8-9 May 2020. Moreover, ATFD's Economic and Social Rights Committee maintained its periodic meetings

virtually, which restricted the ability of some of the association's activists outside the capital to participate. The committee continued to supervise its current projects (three main projects) and drafted the materials for the national campaign for advocacy for decent work for domestic workers (national study, comics, policy papers, and brochures). Work is also being strengthened and focused on monitoring and documenting violations related to economic and social rights during the quarantine and working to provide legal guidance and psychological care to women victims. Some of the recipients of the solidarity grant are women who have been received by the Asma Fanni Observatory for Economic and Social Rights.

Along with other civil society organizations, ATFD sent several calls and messages to the authorities, including:

- An open letter to the President by 12 associations and organizations calling for the release of the highest possible number of prisoners to prevent the spread of COVID-19 in prisons. The Presidency of the Republic responded to this call by granting special legal amnesty to 1420 male and female prisoners.
- A call to withdraw the proposed law threatening press and media freedoms. The relevant authority later withdrew the bill.
- An urgent call to public authorities to ensure continued access to sexual and reproductive health services.
- A message to the Supreme Judicial Council to request prompt intervention to ensure that women, especially women victims of violence, have access to justice during the quarantine. The Council responded positively to this message.

The association held a meeting with the minister in charge of human rights, constitutional bodies, and civil society outreach as part of a delegation of national NGOs advocating for the settlement of the refugee situation in Tunisia, particularly in the current conditions.



ATFD's Main Campaign Demands

1- Drawing the attention of the government and human rights, political, and public health opinion to the exacerbating social situation resulting from the quarantine. Growing groups of families in which women bear the responsibility of spending, in cases of widowhood, divorce, or poverty, are losing income, in addition to vulnerable work situations of husbands, which is akin to economic violence against their children's sustenance.

2- Announcing the increasing frequency of VAW during the previous weeks. The Listening and Counseling Center in Tunis alone, for example, received calls from 33 women victims of violence in only 11 days (from 26 March to 6 April), including a migrant woman. It also registered 26 listening sessions and 15 legal guidance sessions, which is in line with the Ministry of Women Affairs' numbers indicating a 7-fold increase in violence.

3-Noting the lack of parity for women in media, which limits sensitization, awareness-raising, and advocacy processes to confront the epidemic, in addition to efficient and effective communication capacities demonstrated by most of the women who intervened on media and communications platforms, including journalists, experts, and officials. Moreover, preoccupation with the epidemic, the challenges of the health crisis, and its economic impact reduced the opportunities for dealing with VAW issues, which brought back the wall of silence on the suffering of women in these circumstances.

Therefore, ATFD addressed the following demands to the government and public opinion:

1- We call on the Ministry of Women, Family, Childhood, and Elderly Affairs to set an urgent strategy involving women's associations and relevant ministries to define mechanisms to address the rising violence against women and draft prevention measures and particular

protection priorities as formal structures have become unable to absorb the number of victims.

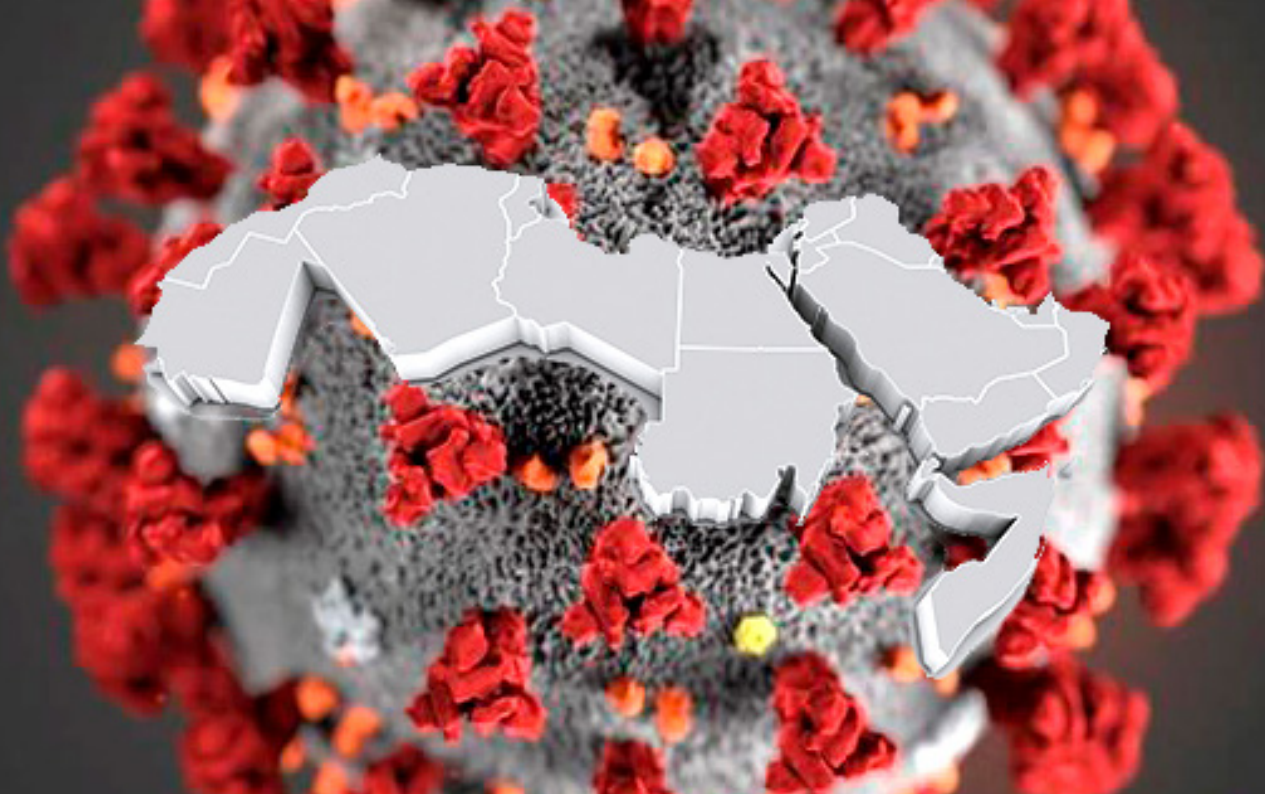
2- We call on the Ministry of Interior to deal seriously with violence complaints received from victims and adopt special provisions for working groups to ensure continuity around the clock and throughout the week, including subsidizing phone lines to allow notification as per Law 58 of 2017.

3- We call on the Ministry of Health to continue providing health and hospitalization services for women victims of violence and provide them with preliminary medical reports to assist in the complaint procedure, through a special process for women victims of violence in all public hospitals.

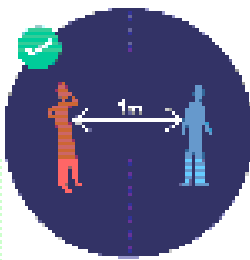
4- We call on the Ministry of Justice to establish an emergency mechanism for filing complaints of violence, going directly to the Public Prosecutor, even if by e-mail or mail. We also call on the Ministry to follow urgent and exceptional procedures, including providing women with adequate information and allowing access to services safely, in light of the absence of shelters and services to assist women victims of violence and their children, or lack thereof.

5- We call for the immediate activation of Chapter 26 of Law 58/2017 regarding the elimination of violence against women, by taking urgent protective measures against victims with the mere permission of the prosecutor and at the request of the competent teams, until the return of the normal functioning of the courts, and raising protection demands at a second stage to family courts.





WASH HANDS FOR 30 SECONDS



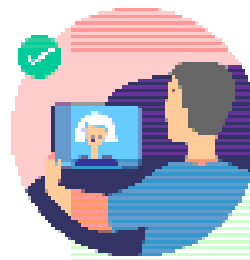
MAINTAIN SOCIAL DISTANCE



COUGH OR SNEEZE INTO YOUR ELBOW



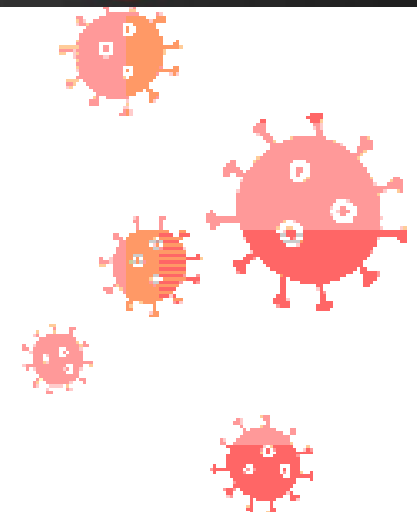
WEAR A FACE MASK AND COVER YOUR MOUTH & NOSE



REACH OUT TO PEOPLE ONLINE





AVOID AIR AND PUBLIC MASS TRANSIT





The Arab NGO Network for Development works in 12 Arab countries, with 9 national networks (with an extended membership of 250 CSOs from different backgrounds) and 23 NGO members.

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