

Food security, VAWG and Nutrition



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Query: Please provide an overview of the recent evidence of the threats to food security caused by locust outbreaks and COVID-19, and how this might impact on violence against women and girls. Please draw on wider evidence regarding the links between violence experienced by women and girls, food insecurity and nutrition related outcomes

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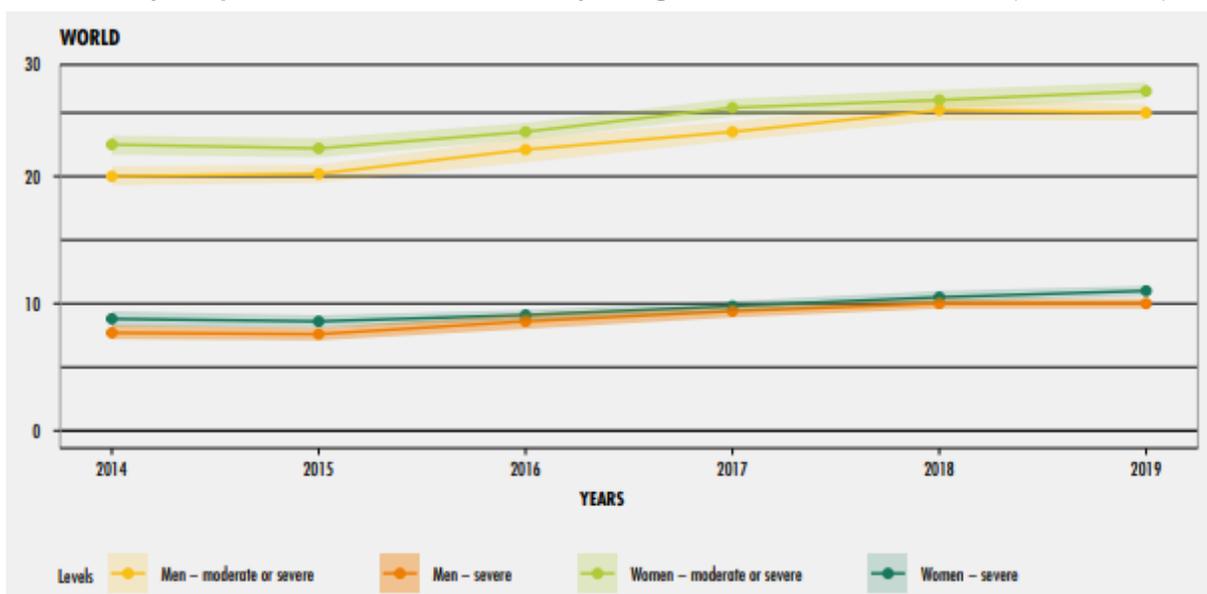
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1. Overview

Globally, food insecurity is increasing. In 2019, nearly one in ten people were exposed to 'severe'¹ levels of food insecurity – around 750 million people. The UN's flagship hunger and nutrition report estimates that nearly 2 billion people are affected by moderate or severe food insecurity. Food insecurity is higher among women than men, and in the last year the gender gap has widened (see figure below). The UN has warned of a 'hunger pandemic', with food insecurity and malnutrition likely to worsen in the next year due to COVID-19 and unprecedented locust outbreaks (FAO, 2020a).

Globally the prevalence of food insecurity is higher in women than in men (FAO, 2020a)



¹ People experiencing severe levels go for entire days without eating, due to lack of money or other resources to obtain food. People who are moderately food insecure do not have regular access to nutritious and sufficient food, even if not necessarily suffering from hunger. – see FAO's [Food Insecurity Experience Scale \(FIES\)](#).

This rapid research query looks at the threats to food security caused by two specific shocks to global and regional food systems - locust outbreaks and COVID-19, and how this might impact violence against women and girls (VAWG). It is important to note that, while not the focus of this query, there are long-term threats from conflict and climate change which also undermine food security, and both are closely linked to COVID-19 and locust outbreaks:

- **COVID-19:** The UN has warned that movement restrictions associated with COVID-19 are likely to disrupt agricultural production, supply chains, domestic markets, food processing, and most importantly the capacity to purchase food as the global economic crisis affects people's livelihoods (FAO, 2020a). Despite initial fears, global food supply chains have remained stable but locally there have been food price spikes, with some countries being particularly high risk due to their reliance on food imports and their food insecurity ranking (by the Global Hunger Index). COVID-19 is expected to have the greatest impact on food security and nutrition in low and middle-income countries (particularly conflict-affected countries), but it is also likely that pockets of food insecurity will appear in population groups and countries that have not traditionally been affected (FAO, 2020a).
- **Locust Outbreaks:** There are also growing concerns about the threat to food security and livelihoods from locust outbreaks. The three 'hotspot' areas are the Horn of Africa, Red Sea, and Southwest Asia, although locust outbreaks have been reported in South America and parts of Europe. Efforts to control the locust outbreak have been hampered by mobility restrictions and shortages of protective clothing and equipment related to COVID-19.

Evidence of the impact of COVID-19 and locust outbreaks on food insecurity and how this in turn affecting VAWG is still at an early stage and not yet well documented. The situation is also rapidly evolving. Evidence from similar global and regional shocks to food systems, such as public health emergencies, food crises, and locust outbreaks, suggests the following potential impacts (examples are provided in Section 2 and 3):

- Disruptions to agricultural production, food supply and prices that increase food insecurity may lead to increases in household tensions and domestic violence against women and children.
- Hunger and food insecurity may make women and girls more vulnerable to exploitation, including engaging in transactional sex.
- Food distributions may put women and girls at additional risks of sexual exploitation and abuse by aid workers and others responsible for distributing food aid.
- Food insecurity may also increase the pressure on families to marry girls at young ages as a coping mechanism to 'protect' girls and sustain families, which may be further compounded by school closures due to public health emergencies and locust outbreaks.
- Stigmatisation of people who are suffering from or recovered from COVID-19 may further reduce their access to food distributions.

The wider evidence base on the links between VAWG, food insecurity and nutrition related outcomes suggests several multi-layered links (see Section 4):

- **Intimate partner violence (IPV):** Globally, there is evidence that food insecurity is an important risk factor for both women's experiences of IPV (e.g. studies from Brazil, Ethiopia, and Nepal) and men's perpetration (e.g. studies from South Africa, Cambodia and Papua New Guinea).
- **Violence by in-laws, siblings and against children:** There is also evidence showing that households which are food insecure are more likely to experience other forms of domestic violence, including by in-laws and siblings, suggesting a household cycle of food insecurity and violence, with potential intergenerational linkages. Studies have also found that food insecurity is linked to peer violence between children, including DFID-funded research from Pakistan and Afghanistan.
- **Sexual exploitation, abuse and harassment:** Several studies show that food insecurity can increase women and girls' engagement in transactional sex and other forms of sexual exploitation

in exchange for food. Studies show that women living with HIV face specific challenges around sexual exploitation and transactional sex as food insecurity is associated with worse clinical outcomes. Adolescent girls are also at high risk of sexual exploitation during external shocks to food systems, due to perceptions that girls need less food than others. Humanitarian emergencies present increased risks of SEAH relating to food distribution and food insecurity.

- **Child, early and forced marriage:** Food insecurity and poor nutrition outcomes can be both causes and consequences of child, early and forced marriage. More research is needed to understand the dynamic between food insecurity and marriage as studies of the West Africa Food crisis (2012-13) showed that child marriage increased in some communities but decreased in others depending on localised factors.
- **Nutrition-related outcomes for women and children:** There is a considerable body of evidence showing that IPV can compromise children's growth and nutritional outcomes, including substantially increasing a child's risk of stunting. There is a small but growing evidence base showing that IPV also predicts poor physical health and nutrition in women, particularly during and immediately after pregnancy. There is also evidence that women and girls who have a history of being subjected to violence (particularly sexual violence) are more likely to develop eating disorders that lead to poor nutrition-related outcomes.

Further research is needed to understand who is most at risk, and how this varies by context. The evidence reviewed for this query identifies the following groups as being at highest risk: pregnant and lactating women, older women and widows, refugees and displaced persons, poorer households, pastoralist communities, and women and girls with chronic conditions or weakened immune systems.

2. Threats to food security from COVID-19

The United Nations has warned of a 'hunger pandemic', with COVID-19 predicted to have a more severe impact on food insecurity than the global food crisis of 2007-2008 (Beasley, 2020; Zhou and Delgado, 2020). There are increasing concerns about the impact of COVID-19 on food availability and prices. Globally, movement restrictions have disrupted the transport and processing of food and limited the availability of agricultural labour. Food prices are also being impacted by protectionism policies (e.g. tariffs and export bans), particularly in countries which rely heavily on food imports (FSIN, 2020). Food price spikes tend to be localised and depend on a variety of factors, including how integrated local markets are into global markets, harvest performance, seasonality, infrastructure and security (FSIN, 2020). A new COVID-19 Food Price Monitor that tracks localised spikes has raised a number of 'red flags' such as in Uganda where food prices increased by 15% from March-May (Hernandez et al, 2020). The diagram below identified countries which are most vulnerable to food shortages based on two variables: (1) their reliance on food imports (as a percentage of all merchandise imports); and (2) their food insecurity ranking. Countries that are likely to be seriously affected are those already facing protracted food crises, mostly in conflict-affected countries or countries transitioning out of conflict, such as the Central African Republic and Yemen (Zhou and Delgado, 2020).

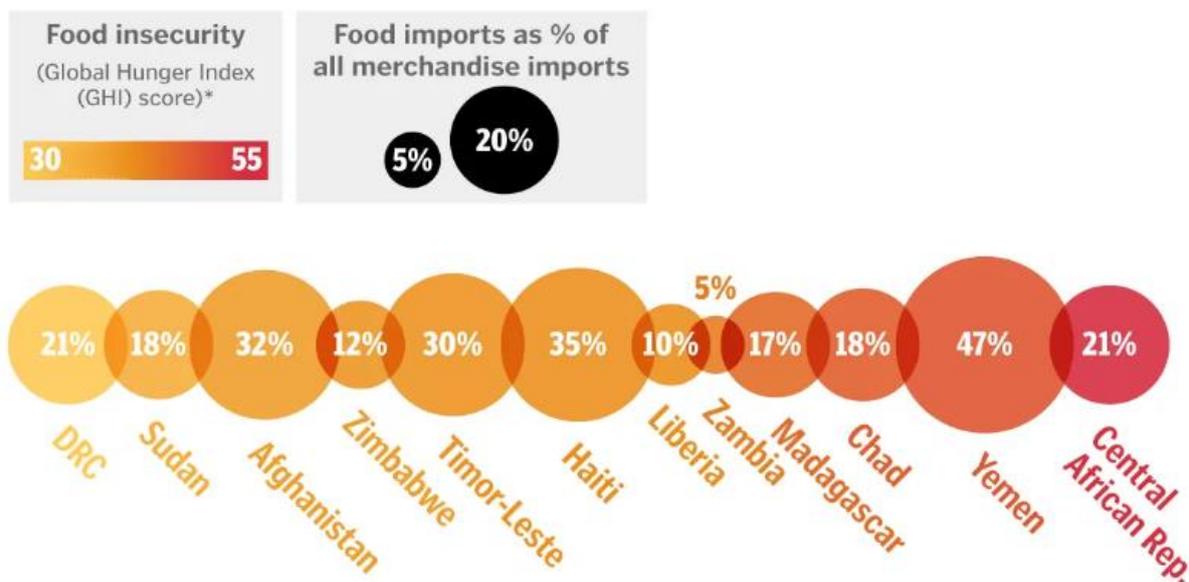
Impact of COVID-19 on food security: Key Statistics

COVID-19 could double the number of people suffering acute food insecurity from 135 to 265 million unless swift action is taken (WFP, 2020).

Agricultural production is predicted to contract by up to 7% in Africa due to COVID-19 related trade blockages. The most optimistic scenario is a 2.6% contraction (World Bank, 2020a).

Food imports could decline by as much as 25% (or as little as 13%) in Africa due to higher transaction costs and reduced domestic demand (World Bank, 2020a).

How much do the world's most food insecure countries depend on food imports?
 (Based on data from 2019 Global Hunger Index, World Bank, OEC – Debinski and Turrisi, 2020)



*GHI scores are on a 100-point severity scale, where 0 is the best score (no hunger) and 100 is the worst.

To date, global food supply chains have remained resilient. The greatest threat to food security comes from the economic impact of COVID-19 on jobs and livelihoods, particularly where there are gaps in social protection systems (OECD, 2020). Vulnerable groups of women and girls at highest risk of acute food insecurity include older women, women and girls with chronic conditions or weakened immune systems, pregnant and lactating women, migrant and domestic workers, refugee and displaced women and girls, and poorer households. Before the COVID-19 crisis began, more than 820 million people were already chronically food insecure (World Bank, 2020b).

Evidence from previous public health emergencies show the complex links between disease outbreaks, food insecurity and VAWG. This query conducted a rapid assessment of the evidence from outbreaks of Ebola (in West Africa and DRC) and cholera (in Yemen), as well as any emerging evidence from COVID-19 (globally) and identified the following impacts:

- **Increases in domestic violence against women and children** driven by tensions in the household related to food and financial insecurity. For example, the Ebola outbreak in West Africa significantly impacted food security through a combination of factors. Quarantine measures limited access to foods and markets, reduced food trade, and lowered domestic harvests, leading to higher food prices while household income reduced (ACAPS, 2016). In addition, many women in the informal sector in Liberia lost their livelihoods as most were engaged in food businesses which collapsed because customers were afraid to eat their food and the produce was perishable (Korkoyah and Wreh, 2015). UNHCR (2020) has cautioned that increasing food insecurity during the COVID crisis is likely to place women at heightened risk of domestic violence, particularly where women are primarily responsible for procuring and cooking food for the family. In Uganda, qualitative research has found that increased food insecurity and hunger as a result of COVID-19 related lockdowns and loss of livelihoods has increased household conflict and tension: “The lack of food leads to verbal abuse and eventually ended in physical violence” (Kabonesa and Kindi, 2020: 13).
- **Food insecurity can make women and girls more vulnerable to sexual exploitation, including engaging in transactional sex.** For example, during the Ebola outbreak in Sierra Leone, there were

reports that the Ebola burial team sexually exploited girls in one village by providing food and money in return for sex (Kostelny et al, 2016). Also in Sierra Leone, another study found that 76% of children said that they did not have enough food to eat during the Ebola outbreak. This was reported to be more common with older children (ages 11-18) than younger children (ages 7-10), and particularly among girls. Hunger and poverty led to increased risks of sexual exploitation, exacerbated by children being out of school or losing relatives to Ebola (Risso-Gill and Finnegan, 2015).

- **Sexual exploitation and abuse by aid workers and others responsible for food distribution.** During the Ebola outbreak in West Africa, over one million people in quarantine required food assistance from the World Food Programme (WFP) by December 2014 (ACAPS, 2016). The final evaluation of the WFP's response to the Ebola Virus Disease (EVD) in West Africa notes that there was a clear commitment to protect beneficiaries of food distribution from sexual exploitation and abuse, with a clause included in all Field Level Agreements with partner organisations. Beneficiaries were also informed that assistance was free, and assessments were conducted to identify any risks of SEA and mitigate them (Shepherd et al, 2017).
- **Food insecurity can also increase the pressure on families to marry girls at young ages** to lessen food needs, gain bride wealth and improve the economic well-being of the girl (IASC, 2015). In Yemen, a combination of conflict, cholera, food insecurity and COVID-19 are driving increases in child marriage as a coping mechanism to protect girls and sustain families (UN News, 2020).
- **Stigmatisation of people who are suffering from or recovered from disease outbreaks can further reduce their access to food distributions** (IASC, 2015). During the Ebola outbreak, stigmatisation and fears about contamination led to some communities denying access to food for EVD survivors (CARE, 2020; ACAPS, 2016).

Emerging evidence from COVID-19 suggests a potential impact of food insecurity on violence against women and girls, although there is little evidence to date that links directly with food security. The Inter-Agency Standing Committee (IASC) has produced interim guidance on gender and the COVID-19 alert which includes messages related to food security, nutrition, gender and GBV, such as:

Gender and GBV Action Points for Food Security and Nutrition during COVID-19

- Any food security, agriculture and nutrition needs assessments should include a robust gender component and results should be used for gender-responsive targeting and programme design.
- Following WHO Coronavirus disease (COVID-19) guidance, promote the active participation of women, girls and other at-risk groups in all food security, agricultural and nutrition assessment processes.
- The food security response must ensure that women and child-headed households, other at-risk groups and small-scale producers and traders– especially in quarantined, locked-down locations or self-isolation- are identified and targeted for food assistance, including in-kind and agricultural inputs distribution and cash-based transfers.
- Women and girls, including older women, pregnant and nursing women and girls, in all household types should be targeted by malnutrition prevention and response initiatives.
- Food assistance and emergency agriculture support and agricultural livelihood-saving interventions should be designed, delivered and monitored with the engagement of women, men, girls and boys from different socioeconomic and indigenous groups in the affected populations.
- Food security and nutrition-related responses should understand and address the unpaid care and domestic work of women and girls, and include women-targeted interventions for the most vulnerable women and girls.
- Food distributions, and emergency agricultural support should not put women and girls at additional risks, including long journeys to and from distribution points. Therefore, it is paramount that specific

protection vulnerabilities that affect their exposure to food insecurity and GBV be taken into consideration.

- Regulate and timetable food distributions to avoid large groups congregating to avoid viral spread.
- All employment made available through food distributions should, where feasible, be made available on a gender parity basis.
- Establish alternatives to communal cooking areas in camp/settlement settings, such as increased distribution of cooking stoves, cooking fuel and utensils. Strategies to support to women's agricultural productivity and marketing activities will be essential, to reduce the detrimental effects on the wellbeing of rural people, and ensure the provision of food to urban and peri-urban areas.
- Investment in women's leadership and recognize their crucial contributions to the COVID-19 response, to ensure that both men and women's needs during and after the epidemic are adequately met.
- Targeted interventions for the youth, especially girls, to provide them with more opportunities for social and economic development, and information and communication materials.
- Use of gender transformative approaches to help address women's work burden and time poverty by challenging negative gender norms and unequal power dynamics at household level, leading to a redistribution of tasks and responsibilities, with men and boys progressively being more engaged in unpaid care and domestic

Source: IASC's (2020 Gender Alert for COVID Outbreak (2020: p.10)

3. Threats to Food Security from Locust Outbreaks

The UN has warned of an “**extremely alarming and unprecedented threat to food security and livelihoods**” from locust outbreaks (FAO, 2020b). A single swarm can contain up to 80 million locusts. The locusts can change behaviour ('gregarise')² and migrate over large distances – sometimes up to 100km in the direction of the wind. Desert locusts are one of the most destructive pests and can eat their weight in agricultural produce a day (Suri, 2020).

There are three locust hotspots where locusts are currently present a threat to food security and livelihoods:

the **Horn of Africa** (northwest Kenya, eastern Ethiopia, and parts of Somalia and northeast Uganda); **the Red Sea** (Yemen, Saudi Arabia, and Sudan-Egypt border); and **Southwest Asia** (Iran, India, Pakistan and Nepal) (see diagram below). Beyond these hotspots, locust outbreaks have recently been reported in Italy,³ Brazil, Paraguay, Uruguay and Argentina,⁴ and the situation continues to rapidly evolve.

2020 Locust Outbreaks: Key Statistics

42 million people in severe acute food insecurity in the three regions affected by the crisis.

1km² locust swarm can eat the same food as **35,000 people** in one day.

400 times increase in locust numbers in six months.

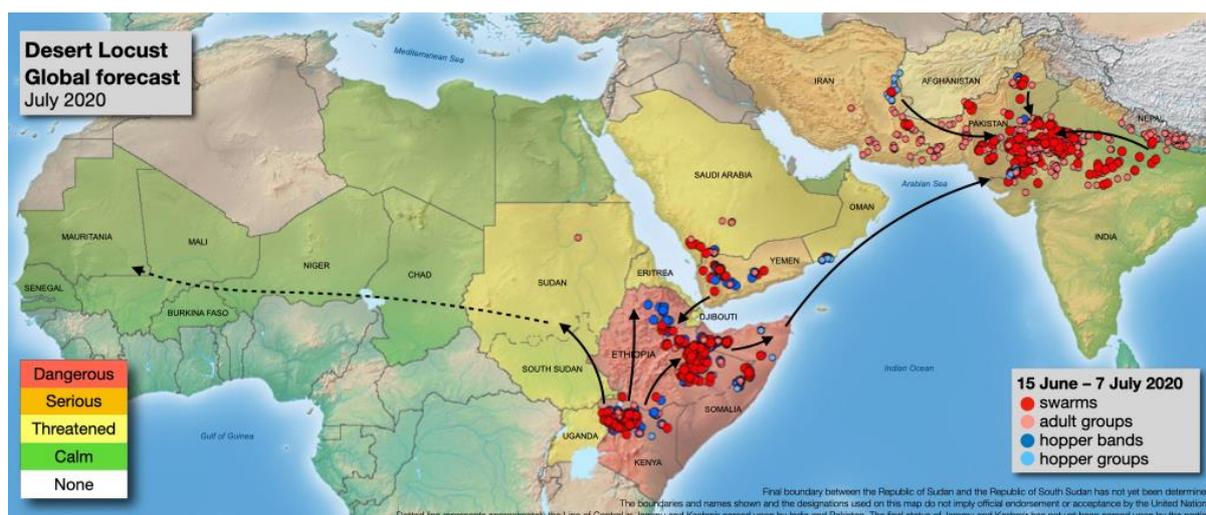
Source: FAO (2020c)

² For example, they change their physiology, brain, coloration, body size, become attracted to other locusts and begin to move in coordinated functions (Baskar, 2020).

³ Reuters: <https://www.reuters.com/article/us-italy-locusts-climate-change-trfn/hit-by-coronavirus-and-wild-weather-italy-now-battles-locusts-idUSKBN23X16Q>

⁴ Bloomberg: <https://www.bloomberg.com/news/articles/2020-06-25/brazil-argentina-issue-warnings-as-locust-swarm-crosses-region>

FAO's Desert Locust Watch⁵ (July 2020)



Some experts have linked the current locust outbreak to climate change, with unusually heavy rains in the East African region creating favourable conditions for locusts to breed and increase in number. In October-November 2019, rainfall was more than 300% above average in the Horn of Africa. The Arabian Peninsula also experienced several unusually severe cyclones in 2019, which helped spread locust outbreaks over greater distances and with little 'energetic cost', thereby giving the insects more energy for reproduction (Dunne, 2020).

Locust activity is exacerbating food insecurity and hunger in countries with already high levels of food insecurity, such as Ethiopia, Kenya, Somalia and Yemen. Tens of thousands of hectares of crops and pasture have been damaged in the Horn of Africa, in a region where 11.9 million people are food insecure (FAO, 2020b). Depending on the time of year, a locust outbreak can destroy between 50% to 80% of crops in an area (Baskar, 2020). In Ethiopia alone, the locust outbreak has destroyed over 350,000 metric tons of cereal, almost 200,000 ha of cropland, and 1,350,000 ha of pastureland, leaving more than one million Ethiopians in need of food assistance as a result (FAO/Government of Ethiopia, 2020).

Studies of previous outbreaks show that locust-related production losses are a driver of food insecurity, with widespread social and economic impacts on affected communities. For example, in Mauritania, 60% of household heads became indebted in Mauritania during the 2003-2005 locust outbreak. In Mali, children were less likely to go to school due to economic pressures, with girls being disproportionately affected (Cressman, 2016; Baskar, 2020). Similarly, in Madagascar, children's education was badly affected by the 2013 locust outbreak as parents could no longer afford school costs and were forced to withdraw children from school (FAO, 2013).

Where women are responsible for household food security, locust-related food shortages have the potential to exacerbate various forms of VAWG, including intimate partner violence and exposure to child marriage or sexual exploitation and abuse. The International Rescue Committee have warned that women are likely to face increases in violence as harvests fail and food prices skyrocket due to the locust outbreak in East Africa (IRC, 2020). In northern Kenya, there have been reports that pastoralist communities are increasingly removing their daughters from school, sending them to 'coming-of-age' cutting ceremonies and marrying them early in exchange for dowry money due to the devastation to livestock and resources created by drought and locust outbreaks (Wadekar and Swanson, 2020). However, few studies of previous locust outbreaks have looked at the direct impact of locust outbreaks on different forms of VAWG.

⁵ FAO Desert Locust Watch: <http://www.fao.org/ag/locusts/common/ecg/75/en/200708forecastE.jpg>

Efforts to control the locust outbreak have been impeded by the challenges associated with COVID-19. For example, protective clothing (e.g. overalls, boots, goggles, masks) is imported mainly from China, where it has been diverted for use to control the spread of the virus. Other equipment needed to control the pests (e.g. pesticides and fumigators) have also become more expensive and difficult to obtain due to cargo supply chains being grounded by the COVID-19 pandemic (Byaruhanga, 2020).

4. Wider evidence on links between VAWG, food insecurity and nutrition-related outcomes

The evidence suggests a complex and multi-layered association between violence, food insecurity and nutrition-related outcomes. This section summarises the key evidence on the connections and pathways between VAWG, food insecurity and nutrition-related outcomes for both women and girls directly affected by violence, and indirectly for their children. It also highlights some of the evidence of the links between sexual exploitation, abuse and harassment (SEAH), food security and nutrition in emergencies.

Food insecurity as a risk factor for intimate partner violence (IPV)

Globally, there is a well-established body of evidence that food insecurity is an important risk factor for IPV perpetration and victimisation (Ellsberg et al, 2008). Examples of studies looking at the links and pathways between food insecurity and IPV include:

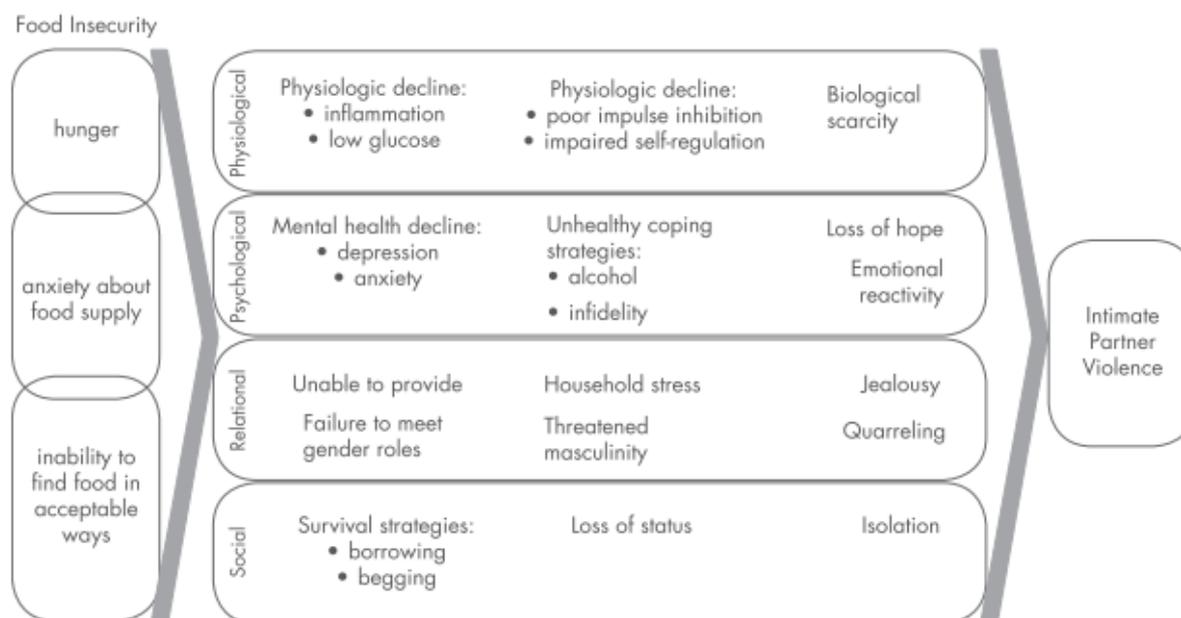
- **Brazil:** Food insecurity was associated with physical IPV in a study of 1,019 households in Salvador, Bahia, north-eastern Brazil. Couples reporting minor and severe physical violence were more likely to be experiencing household food insecurity, compared with households not reporting physical violence (Ribeiro-Silva et al, 2016).
- **Ethiopia:** The prevalence of IPV was significantly higher among married women from food insecure households (66%) as compared to women in food secure households (24%), according to research⁶ among currently married women in Arba Minch town (Andarge and Shiferaw, 2018).
- **Nepal:** Married women who were food insecure had higher odds of emotional and physical IPV, but not sexual IPV, after adjusting for individual and household level demographic variables. according to analysis of data from the Nepal Demographic and Health Survey (Diamond-Smith et al, 2019)
- **Ecuador:** A study of a food transfer programme on the northern border of Ecuador showed that food transfers reduced physical or sexual violence by 30%. The authors suggest that the main ways in which the food transfers helped reduce IPV were by reducing stress and conflict within couples, improving household wellbeing, and women's decision-making and self-confidence (Buller et al, 2016).
- **Cambodia and Papua New Guinea:** Food insecurity was associated with men's increased perpetration of sexual and physical IPV, according to a survey of 10,178 men aged 18-49 in the UN Multi-country Cross-sectional Study on Men and Violence in Asia and the Pacific (Fulu et al, 2013).
- **South Africa:** Food insecurity was associated with doubled odds of IPV in a study of 2,006 partnered men living in a peri-urban settlement near Johannesburg. The links between food insecurity and men's perpetration of IPV persisted after controlling for socio-demographics, relationship characteristics and neighbourhood factors (Hatcher et al, 2019).

There are several potential pathways linking food insecurity to IPV, although further research is needed to explore these pathways and confirm causality. Most pathways focus on women's experiences of sexual, physical and emotional IPV, including suggestions that: (1) Women who are food insecure may be more likely to stay in violent partnerships for the provision of food; (2) Women in

⁶ A community based comparative cross-sectional study was conducted among 696 currently married women (15-49).

violent relationships may be more likely to be food insecure if their partners also control women’s access to food; (3) The stress caused by food insecurity could trigger couple conflict and violence; (4) Food insecurity causes poor nutritional status, which contributes to depression and mental health conditions, which in turn contribute to marital arguments and violence. The diagram below shows different pathways between food security and men’s perpetration of IPV. The authors observed two pathways linking food insecurity to men’s perpetration of IPV, based on their research in South Africa: (1) A complex pathway whereby food insecurity increased men’s depression, which directly increased perpetration of IPV and indirectly increased IPV by worsening relationship quality in terms of controlling behaviours and quarrelling; (2) Food insecurity increases couple quarrelling, which triggers IPV (Hatcher et al, 2019).

Conceptual framework linking food insecurity to intimate partner violence perpetration
(Hatcher et al, 2019)



There are patterns of violence associated with the agricultural cycle, for example physical violence often increases in the ‘hungry months’. A FAO study in Uganda observed an increase in violence against women during May and June when households experienced food shortages (cited in Irish Joint Consortium on GBV, 2010).

Food insecurity is also associated with domestic violence by other family members (e.g. in-laws) and violence against and between children

More broadly, there is also evidence to suggest that households which are food insecure are more likely to experience other forms of domestic violence, including by in-laws and siblings. For example, DFID-funded research from Afghanistan found that physical violence by mothers-in-law, sibling-in-law and siblings was highest in families with more food insecurity and where women borrowed money or food frequently. The authors observe that women with a physically violent mother-in-law are more likely to beat their children frequently, thereby contributing to a culture of household violence (Jewkes et al, 2019).

Several studies have also found that food insecurity is linked to peer violence between children. In Pakistan, children⁷ who were food insecure were more likely to experience peer violence. Girls who

⁷ 1752 children in 40 public schools (20 for girls and 20 for boys), in Hyderabad, Pakistan.

were victimised and perpetrated violence, and boys who perpetrated peer violence scored higher on the hunger measure⁸ than those who did not (Karmaliani et al, 2017). Similarly, in Afghanistan, peer violence between children⁹ has been linked to food insecurity (Corboz et al, 2018).

Food insecurity may increase various forms of sexual exploitation of women and girls

There is also evidence that food insecurity can increase women and girls' engagement in transactional sex and other forms of sexual exploitation in exchange for food. Studies have shown how women who engage in these forms of transactional sex due to food insecurity also reported less power to demand protection during sex and often stayed in violent or abusive relationships for food (Chop et al, 2017). Women living with HIV also face specific challenges around sexual exploitation and transactional sex, as food insecurity is associated with poor clinical outcomes. Food insecure pregnant and lactating women living with HIV are at increased risk of mother-to-child transmission of HIV, due to the additional nutritional requirements (Chop et al, 2017). Examples of studies that explore the links between food insecurity and sexual exploitation include:

- **Uganda:** Food insecurity is linked to risky sexual behaviour and transactional sex, according to qualitative research with individuals living with HIV/AIDS. Women often felt compelled to engage in transactional sex to provide food for themselves and their children, particularly after a husband's death (Miller et al, 2011).
- **Swaziland:** Qualitative research with female sex workers living with HIV identified a "risk cycle of hunger, sex work, and HIV infection" (Fielding-Miller et al, 2014: 1). Food insecurity was often the driver to begin sex work and the primary motivation to engage in sex without a condom. Respondents also expressed concern that hunger would affect the progression of the disease, as well as specific worries about taking antiretroviral therapy treatment for HIV on an empty stomach.

Adolescent girls are often the most food insecure and are at risk of sexual exploitation during external shocks to food systems. In many contexts, households perceive that girls need less food than others, which is reinforced by social norms that male household members are more important and productive (VAWG Helpdesk, 2020). For example, there are reports that girls are particularly vulnerable to food insecurity and sexual exploitation in the ongoing Southern Africa food crisis, caused by repeated drought, flooding, and economic crises and now exacerbated by COVID-19. The price of food staples have doubled within a year, and there are reports of girls as young as 12 selling sex to buy food, sometimes for less than the price of a loaf of bread (Batha, 2020; Plan International, 2019).

Humanitarian emergencies present increased risks of SEAH relating to food distribution and food insecurity

Food insecurity in humanitarian contexts also presents increased risks of sexual exploitation, abuse and harassment (SEAH). The existing evidence suggests that women may be more likely to engage in transactional or 'survival' sex to offset the food insecurity associated with humanitarian emergencies (Formson and Hillhorst, 2016). Research in Burundi by CARE found that local officials responsible for putting together lists for targeted food distributions were sexually exploiting women on the beneficiary list. Women in the focus groups described a 'well-founded fear' that if they did not provide sexual favours, they would be excluded from the lists of food aid beneficiaries. The most vulnerable women and girls were widows and single women without husbands or grown-up males who had no

⁸ The food security/hunger measure used was the percentage of children who went to school without breakfast and bed without dinner. 26% of boys and 18% of girls reported going to bed without dinner, with a similar percentage saying they went to school without a meal.

⁹ 770 children - grade seven and eight students in secondary schools (seven girls' and four boys' schools) in three districts of Jawzjan province.

money to bribe village heads to be included on the list and no-one to protect their reputations (Zicherman, 2016).

Although food assistance during emergencies can help reduce the incidence of survival sex or 'sex for food', it also presents risks of SEAH and other unintended consequences. Several studies have found that women and girls are at increased risk of SEAH to and from food distribution points, as well as cases of aid workers sexually exploiting women and girls in exchange for food assistance (Pattugalan, 2014). For example, a study in Syria found that women and girls were being sexually exploited by men delivering food aid on behalf of the UN and international charities. It gave examples of women and girls marrying officials for a short period of time for 'sexual services' to receive meals. The scale of the exploitation was so widespread that some Syrian women refused to go to food distribution centres for fear that people would assume they had provided sex in exchange for the food aid (Landale and O'Dowd, 2018; GBVAoR, 2018).

Food insecurity and poor nutrition outcomes can be both causes and consequences of child, early and forced marriage

During times of food insecurity where resources are limited, there is growing evidence that rates of child marriage often increase so that poor families do not have to feed their daughters (Girls not Brides / ICRW, 2016). This often sets off a cycle of food insecurity and poor nutritional outcomes, as girls who marry at a young age often experience higher rates of anaemia and malnutrition (Ibid, 2016). Research with adolescent girls in South Sudan and in refugee camps in northern Uganda found that the food crisis and economic downturn had increased the risk of child, early and forced marriage. Girls who were living with extended families were particularly vulnerable to forced marriage, primarily driven by male relatives such as uncles and cousins wanting to collect bride price (Lee-Koo, 2018; Plan International and Monash, 2018).

However, child marriage does not always increase in emergencies, particularly where mass displacement has not occurred. For example, after the West Africa Food crisis in 2012/2013, research in Niger found that some communities in Maradi perceived that child marriage had increased, while in Tillaberi and Dosso, communities observed child marriage had *decreased* during the food crisis. The authors note this could be partly related to ethnicity, partly due to families not being able to afford to organise weddings as well as related to whether young men leave rural areas to seek work in cities, therefore indefinitely delaying a marriage that had previously been arranged (Plan International, 2013). More research is needed to understand this dynamic better and how it plays out in different contexts.

VAWG has an impact on nutrition-relation outcomes for women and their children

There is a small but growing body of evidence showing that VAWG, particularly intimate partner violence, predicts poor physical health and nutrition in women, although most of it focuses on the period during and immediately after pregnancy. Partner violence is often linked to household decision-making, in turn linked to decisions about who gets fed (and what they eat). Whether or not women are able to make decisions about food production, preparation and consumption are often good indicators of women's bargaining power within the household. There is also a considerable body of evidence which shows that women and girls who have a history of being subjected to violence (particularly sexual violence) are more likely to demonstrate a range of negative behaviours leading to poor nutrition-related outcomes, including inappropriate eating behaviours (food restrictions, self-induced vomiting) and eating disorders (anorexia nervosa and bulimia nervosa), as well as episodes of excessive food intake and, in certain countries, a more prolonged tendency towards obesity. For example, research from Colombia showed that patients with a history of sexual abuse were not only more likely to have eating disorders, they were also more likely to drop out of treatment and relapse (Rodriguez et al, 2005). An

Egyptian study of the 2005 Demographic and Health Survey found higher odds of obesity among women who reported any prior sexual, physical or psychological domestic violence (Yount, 2011).

There is a considerable body of evidence showing that IPV can compromise children's growth and nutritional outcomes. A study of 42 large national Demographic and Health Surveys found that maternal exposure to IPV substantially increases a child's risk of stunting (Chai et al, 2016). Researchers have also observed a 'dose-response relation' between violence and nutritional outcomes, with the highest probability of poor nutritional outcomes found in those women and children with the most frequent and recent incidents of violence and abuse (Ackerson and Subramanian, 2008; Jejeebhoy et al, 2010). Research on the pathways between IPV and children's nutritional outcomes suggest there are several possible explanations for the link, including maternal depression, lack of ability to access household resources for herself and the children, and poor physical condition of the mother in the case of extreme IPV (Ferdousy and Matin, 2015; Chai et al, 2016). Most studies highlight the need to incorporate efforts to address IPV in maternal and child health and nutrition programmes and policies.

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Annex 1: Methodology and research gaps and limitations

This rapid research query has been conducted as systematically as possible within the research time. The methodology is described below.

Search strategy: Studies were identified through searches using Google. Due to the rapid and recent nature of the evidence, evidence was also identified on Twitter and other social media. Key search terms included: coronavirus, corona, COVID-19, locust, GBV, IPV, domestic violence, child marriage, violence, abuse, harassment, exploitation, food insecurity, hunger, nutrition, food crises.

Criteria for inclusion: To be eligible for inclusion, evidence had to fulfil the following criteria:

- **Focus:** Evidence of the threats to food security caused by locust outbreaks and COVID-19, and how this might impact on violence against women and girls, as well as wider evidence regarding the links between VAWG, food insecurity and nutrition related outcomes
- **Time period:** January 2000 – July 2020.
- **Language:** English
- **Publication status:** publicly available – in all cases published online.
- **Geographical focus:** Global, but focused on low and middle-income countries

Limitations included:

- **Official data on violence against women and girls following COVID-19 and locust outbreaks limited.** Evidence at this stage in the pandemic and locust outbreak is mostly anecdotal. For this reason, several news articles, and case studies were included in the research. Some of this included think pieces that predicted certain trends based on past pandemics, like Ebola.
- **Limited research on the pathways** by which external shocks to food systems such as public health emergencies and locust outbreaks can exacerbate different forms of VAWG, including how different drivers of violence change.
- **Limited evidence on the impact on vulnerable groups with nutritional requirements**, such as pregnant and lactating women and women and girls with chronic conditions or weakened immune systems, as well as **groups that are at higher risk of VAWG or food insecurity**, for example adolescent girls, older women and widows, refugees and displaced persons, poorer households, pastoralist communities.
- **Lack of longitudinal research** on the long-term implications of IPV and violence against children for nutritional outcomes and well-being at different ages and into adulthood.
- **Geographical gaps**, with most studies of a limited geographical scope and focused on South Asia or East Africa.
- **Few studies on the impact of sexual violence in conflict or in humanitarian settings** on nutritional outcomes; most studies focus on intimate partner violence

About Helpdesk reports: The VAWG Helpdesk is funded by the UK Department for International Development, contracted through Inclusive Societies Department (ISD). This helpdesk report is based on 6 days of desk-based research and is designed to provide a brief overview of the key issues and expert thinking on VAWG issues.

VAWG Helpdesk services are provided by a consortium of leading organisations and individual experts on VAWG, including Social Development Direct, International Rescue Committee, ActionAid, Womankind, and the Institute of Development Studies (IDS). Expert advice may be sought from this Group, as well as from the wider academic and practitioner community, and those able to provide input within the short time-frame are acknowledged. Any views or opinions expressed do not necessarily reflect those of DFID, the VAWG Helpdesk or any of the contributing organisations/experts.

For any further request or enquiry, contact enquiries@vawghelpdesk.org.

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