



The charity for  
girls' equality

**RED ALERT:**  
**5 REASONS WHY THE COVID-19  
PANDEMIC WILL SEVERELY  
IMPACT THE WORLD'S POOREST  
AND MOST VULNERABLE**

# THE MAGNITUDE OF THE COVID-19 PANDEMIC IS BEING FELT IN ALL CORNERS OF THE WORLD – NEVER IN OUR LIFETIMES HAVE MOST OF US EXPERIENCED A CHALLENGE AS TRULY **UNIVERSAL AND UNIMAGINABLE** AS THE ONE WE ARE NOW FACING.

It can be hard to look away from the relentless and horrifying news footage from some of the world's most developed and wealthy nations: first it was the silent, empty streets of the Chinese mega-city Wuhan; then the overwhelmed hospitals of northern Italy and France and heartbreaking accounts of medical workers who likened intensive care wards to "war zones". Next London fell, and now New York, where the death toll from the virus has now soared into the tens of thousands.

Even so, the impact this pandemic will have in lower-income countries with fragile health systems is on track to dwarf what we've seen in high-income countries. As their curves flatten and cases begin to escalate in developing nations, aid organisations are preparing for an utterly devastating humanitarian crisis.

While the number of recorded COVID-19 cases in Africa, the Pacific, South Asia and Southeast Asia now appears lower than Europe, China and the US, [experts say](#) the virus is now spreading rapidly throughout these regions and could soon tear through poor, displaced and conflict-affected communities. Africa now has [tens of thousands of recorded cases](#), with cases jumping by 43% in just a week. This has prompted the World Health Organisation (WHO) to warn that the continent could become the next epicentre of the global outbreak. Recent projections released by the University of Indonesia warn that [up to 240,000 people in Indonesia could die](#).

New modelling by the United Nations University indicates COVID-19 may push more than half a billion people into poverty and food insecurity; with global poverty reduction set back 30 years. The World Food Program's annual Global Report on Food Crises (GRFC 2020) has highlighted that the virus could push the world into a "hunger pandemic" that will lead to "multiple famines of biblical proportions" within months if action is not taken.

This will all put millions of children at significant risk; girls, in particular, face increased threats of sexual violence, discrimination and abuse. [The UN has said](#) US\$2.5 trillion will be needed to fight this "looming financial tsunami" in the developing world.

Plan International Australia's Director of Programs Dave Husy said the communities and individuals they worked with were already extremely vulnerable due to limited access to services and support.

"Their resilience has been degraded over time, meaning that their ability to see through these shocks – through psychological and economic resilience, and in more severe cases the food security of their households – has been eroded," Mr Husy said.

**Outlined on the following pages are five of the biggest challenges the world's most vulnerable communities are facing:**



## 1 Many countries lack access to clean water, soap and information on COVID-19 prevention that is crucial in protecting against the virus

Three billion people in the world's poorest communities are [unable to wash their hands at home](#) due to a lack of clean water, soap and effective hygiene practices. This makes it incredibly difficult, in these communities, to follow the WHO's sanitation protocols to fight an infectious disease such as COVID-19.

Plan International Australia's Program Development Officer Sara Sinada works in disaster response in South Sudan and Myanmar. She recalls working in a South Sudanese village with access to just one water pump. "There were often six to seven people in each family, living in a single hut, with children and women sent to collect water in a large pot that had to last the family the entire day. There were just so many hands dipping into the pot, for drinking and cleaning and cooking and washing. Given COVID-19, just that thought is anxiety-inducing," Ms Sinada said.

"But without a safety net, how can they even begin to combat this virus? Unless we can help these communities to have a secure source of water, soap and secure food for children, we can't really ask them to stay home," she added.

In the dense Rohingya refugee camp of Cox's Bazar in Bangladesh – which houses almost one million people, with more than 40,000 people per square kilometre – toilet and hand-washing facilities are

communal and vital ground water supplies are a "huge challenge" according to Riyas Mohammed, Plan International's Director of Programs in Cox's Bazar.

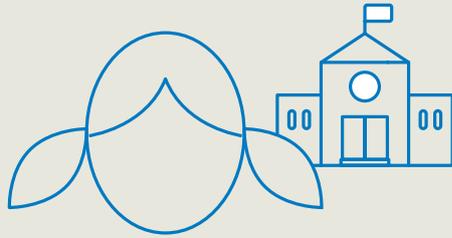
In the Solomon Islands, Senior Water Sanitation and Hygiene (WASH) Officer Erick Hale said remote island communities have poor access to proper sanitation, clean water and soap, and social norms like spitting out betel nut and children sharing ice blocks and drinks bring extra challenges to fighting the virus.

Stopping and slowing the spread of COVID-19 is critically important to support fragile health systems. That's why Plan International is stepping up its WASH programming, particularly across the Pacific and refugee camps such as Cox's Bazar in Bangladesh where aid workers are providing clean water facilities, hygiene kits and hand-washing education. Investing in water and sanitation systems is one of the most cost-effective strategies for increasing pandemic preparedness – these serve as barriers to human-to-human transmission of COVID-19 in homes, schools, health care facilities and communities.

## 2 Child safety and education is under threat

According to UNESCO studies, it's estimated that a staggering 89% of the 1.5 billion children enrolled in education are currently out of school because of COVID-19 school closures.

This includes 743 million girls, of which more than 111 million are living in the world's least developed countries where access to education is already a struggle. Poor access to computers and the

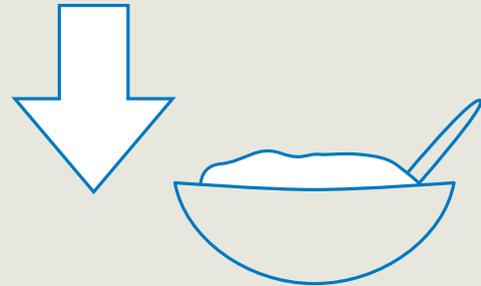


# 743 MILLION

THE AMOUNT OF GIRLS CURRENTLY  
OUT OF SCHOOL BECAUSE OF COVID-19  
SCHOOL CLOSURES

# 500 MILLION

THE AMOUNT OF PEOPLE THAT UN MODELLING  
INDICATED COULD BE PUSHED INTO POVERTY AND  
FOOD INSECURITY BY COVID-19.



internet makes remote learning an impossibility in some of these communities; nor is online learning equal: boys in low and middle-income countries are 1.8 times more likely than girls to own a smartphone that can access the internet.

In Mali, Niger and South Sudan, three countries with some of the lowest enrolment and completion rates for girls, closures due to the COVID-19 pandemic have forced more than four million girls out of school.

Ms Sinada said the majority of parents and carers worked in the informal economy – farming, fishing, as market sellers and drivers – and stopping work was not an option. “Unfortunately home schooling is not an option in South Sudan. Children are missing out on education as they wait out this pandemic, so the risks they face are amplified. Nobody is going to stay at home and watch their children go hungry. Children are therefore often out in the community, or out with parents at work.”

This pandemic is already starting to repeat patterns of increasing violence in the home. During the 2014 Ebola outbreak, girls were isolated at home and rates of sexual violence, trafficking, child labour and child marriage increased dramatically. In times of crisis, girls are also at greater risk of pregnancy. COVID-19 is likely to interrupt access to vital sexual and reproductive health. During the Ebola epidemic in Sierra Leone, adolescent pregnancy increased by 65%. Girls living in the least developed countries are acutely vulnerable to a diversion of resources away from other key medical services.

Plan International is addressing these issues through:

- Training community members who are well-placed to care for children through the outbreak;
- Driving public health awareness of COVID-19 via TV, internet, radio and posters to ensure that everyone, including children and girls, are looked after during

this pandemic; and

- Providing targeted psychosocial support to vulnerable households and children, such as women and girls at risk of gender-based violence and children living on the streets and in refugee camps.

“Our responders are giving parents and carers the support and advice they need to provide a supportive and calming environment for children who often get missed during times of crisis. It’s hugely important because this support specifically deals with psychological anxiety,” Dave Husy, Director of Programs, added.

### 3 Dense, populous cities and refugee camps make social distancing a luxury

Epidemiologists have pointed out that coronavirus hotspots – and the virus’ speed and spread – are greatly affected by [population density](#) – just look at the outbreaks in New York, London and of course, aboard cruise ships. The biggest challenge for internally displaced people is that refugee camps are extremely crowded.

“We don’t have the luxury of social distancing, we don’t have the luxury of providing everyone with the basic facilities people need to wash their hands,” Mr Mohammed said of the Rohingya refugee camp in Cox’s Bazar, where a typical dwelling often houses two families.

“In a large crowd, if someone has symptoms, tracing and isolating will be a challenge, and treatment will be a major challenge because of lack of facilities inside and outside the camp. That’s why the government is working really hard to prevent this virus from getting inside the camp. The best chance we have is to make sure we keep the number at zero.”

## 4

## Community health and medical infrastructure is already fragile and many countries are in a food crisis

With clinics and hospitals in low-income countries already facing limited or no availability of personal protective equipment, a very small number of ventilators per capita, only a handful of intensive care beds and limited ability to isolate infected patients, fears are mounting that COVID-19 will be far more lethal than it has been in developed countries.

“New research has shown that South Sudan has a population of 12 million people yet just 12 ICU beds and, alarmingly, four ventilators for the entire country,” said Ms Sinada. “That’s a shocking and frightening statistic: one ventilator for every three million people.”

Worryingly, the [WHO](#) has also reported that at least half of the world’s 7.6 billion people could not access the essential healthcare they needed even before the COVID-19 pandemic. Many of these communities – in particular children – are already suffering from heightened rates of malaria, dengue fever, HIV and tuberculosis.

Aid workers are also worried about the colossal food shortage impact COVID-19 could have in Southern Africa – where millions are already facing an unprecedented hunger crisis due to severe drought and flash floods.

According to the World Food Program, 821 million people go to bed hungry every night all over the world, however COVID-19 could push a further 130 million people to the brink of starvation by the end of 2020. Analysis shows that if food relief is not provided,

300,000 people could starve to death every single day over a three-month period.

“It’s very, very concerning,” Mr Husy said. “Often when disease hits these communities, we see a spike in food and commodity prices, so you get a double hit: the financial capability of household diminishes and prices are rising at the same time as food is becoming more scarce because of climate impacts.”

“Countries at risk may face an excruciating trade-off between saving lives or livelihoods or, in a worst-case scenario, saving people from the coronavirus to have them die from hunger,” he said.

Plan International Australia has been a long standing leader in supporting food security programming, and is working with the global COVID-19 response to assist countries to assess food security risks, and if appropriate begin developing relevant food security programs that meet rigorous program standards in meeting priority needs.

Girls and women’s specific health needs also risk being sidelined as a result of the pandemic. During the Ebola crisis, maternal death rates in West Africa increased by 70 per cent as resources were diverted to respond to the outbreak. The number of women giving birth in hospitals and health clinics dropped by 30 per cent.

“Under the pressure of a pandemic like we are seeing, it’s not only the inability to deal with COVID-19, but it’s actually the inability to maintain existing health services – for instance, for malaria prevention and management, or for maternal and neonatal childcare, so that’s a huge worry. The general health services will buckle and then we will be in a situation of having a major health crisis from the virus in addition to a general health services crisis,” Mr Husy added.

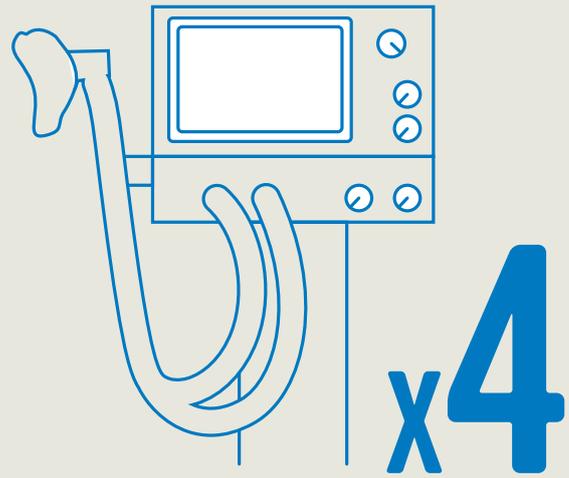


Plan International Sudan’s emergency response team training health care providers on using Personal Protective Equipment (PPE) correctly.



# 3 BILLION

THE AMOUNT OF PEOPLE IN THE WORLD'S POOREST COMMUNITIES THAT ARE UNABLE TO WASH THEIR HANDS AT HOME DUE TO A LACK OF CLEAN WATER AND SOAP



THE NUMBER OF VENTILATORS IN SOUTH SUDAN, WHICH HAS A POPULATION OF 12 MILLION PEOPLE

## **5** Communication networks are weak, allowing damaging misinformation to spread

The 2014 Ebola outbreak in West Africa taught us that in countries with weak communication networks and a lack of trust in governments, misinformation spreads like wildfire. Conspiracy theories, rumours and stigma in these vulnerable communities often run rife. This makes the communication work of trusted humanitarian organisations such as Plan International even more important. Girls, women and other marginalised groups are also least likely to have access to technology. In low-and middle-income countries, 165 million fewer women than men own a mobile phone.

In refugee camps in Bangladesh and Myanmar, where governments have enforced internet blackouts and phone restrictions, the situation is even worse. In April, 26 international humanitarian agencies including Plan International called on both governments to restore full access to mobile data and telecommunications in Cox's Bazar and Rakhine and Chin states to ensure that refugees, displaced populations, conflict-affected and host-communities can access life-saving information about COVID-19.

"The mood in Cox's Bazar right now is one of fear because the messages [the refugees] are getting about COVID-19 are limited. There's no TV, no radio, no internet and that is very difficult because the lack of information can cause panic. They've already suffered through a war; they're not ready to face another challenge like this. That fear is very real. You can see it when you speak to people," Mr Mohammed said.

"Women and girls are also particularly vulnerable in the Rohingya camp because the information does not reach women and girls as much as men in the community, that's why we make it a very particular target in our information planning – we need to make sure the information goes to men and women equally, as much as possible. When you have community volunteers that are sharing the information, we have 50-50 between genders. Information will save lives," he added.

**“TO STOP COVID-19 ANYWHERE  
IT MUST BE STOPPED  
EVERYWHERE, OTHERWISE THE  
VIRUS COULD CYCLE BACK TO  
COUNTRIES THAT THOUGHT  
THEY WERE SAFE”**



15-year-old Fatima is living in a camp in Nigeria for those internally displaced by the 10 years of war with Boko Haram. Fatima attends school in the camp but for the past month has not been able to go as her school has been closed to prevent the spread of COVID-19.

**It's critical to keep in mind that as we flatten the curve here in Australia, the virus will begin to escalate in poorer nations. We may well eradicate the virus on our home soil but we will never truly defeat this virus unless all of the curves are flattened, everywhere.**

World Bank economists and global health experts have warned that if we do not help the developing world beat COVID-19, we face the pandemic rebounding across the world again in further destructive outbreaks. The window to controlling COVID-19 in these communities is rapidly closing.

“To stop COVID-19 anywhere it must be stopped everywhere, otherwise the virus could cycle back to countries that thought they were safe,” Ms Sinada said.

“Everybody now has a role to play – not just aid organisations but governments and individuals, too – in helping to prevent the disease from reaching those most vulnerable to it,” she added.

Plan International has now declared an unprecedented Red Level Global Emergency across the entire organisation. This pandemic is

the single greatest threat to children's rights and equality for girls, in both its scale and its severity.

Each of us can help support those around the world who will be hit the hardest. You have more power than you think to help stop COVID-19. Plan International is on the ground in the world's most vulnerable places and we are determined to fight this virus.

Let's stand together as a global community and make sure no one is left behind. Help lessen the effects of COVID-19 on these communities by making a donation, now.

**[plan.org.au](https://www.plan.org.au)**



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