Valor behind the Burqa: Afghan women’s fight against Covid-19

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Abstract
The paper studies the gendered impact of the pandemic in a war ravaged Afghanistan. For majority of Afghan women, the onslaught of Covid has exacerbated their already dire condition and adversely impacted their social, economical, physical and cultural aspects of life. The research also underlines that the imposition of lockdown has caused the reversal of war gains. The paper also highlights the notable works of various Afghan women carried out during the corona pandemic that has contributed to their emancipation and upliftment of the society at large. It brings forth strong and courageous women who are combatting terrorism, everyday conflicts, frequent bombings, societal restrictions and now the deadly coronavirus and yet contributing majorly in re-building the Afghan society. This paper is an attempt to dispel the dominant narrative of their state of helplessness and despondency around Afghan women before the withdrawal of American troops and Taliban takeover. Both primary and secondary sources have complemented this research.

Keywords
Covid 19, Afghanistan women, Taliban, terrorism, pandemic

Introduction
The hasty withdrawal of American troops from the two decades of Afghanistan war and the sudden takeover by the Taliban have rattled Afghan society. In such a grim scenario, where Afghans were clamoring to save their lives from the radical and extremist policies of the Taliban, coronavirus was certainly an afterthought. But Afghans have long been prominently synonymous for their courage and strength, to the extent that they have been hailed for building a graveyard of powerful colonial empires in their country. But surprisingly it is not only the men but also the Afghan women who have braved the odds of bombing, terrorism and brutal patriarchy and yet managed to fight, survive and contribute to the peace building of Afghan society. This article deals with the problems faced by
Afghan women during the onslaught of the coronavirus pandemic from 24 February 2020 to April 2021 and the efforts made by them to counter it.

Afghanistan faced a double whammy on 24 February 2020 when the first case of coronavirus struck the country. In a population of approximately 39 million, on 25 April 2021, Worldometer showed that 59,015 Afghanis have been infected by coronavirus, causing the deaths of 2,592 and recovery of 52,489 (Worldometer, 2021). This was all amidst raging conflict, faltering peace agreements and an uncertain future for Afghanistan.

But the Health Ministry had a starkly different story to tell. Afghanistan’s Health Minister Ahmad Jawad Osmani stated that nearly one third of the population had been infected with coronavirus (Cousins, 2020). The limited capacity of testing in the country had led to limited disclosures of the virus cases. Dr Mathew Verghese, an orthopedic surgeon who also runs India’s last polio ward in St Stephens Hospital, attributed the high number of cases to the weather of the country (personal communication).

He said Afghanistan being a cold country encourages the growth and spread of the virus. He also said that the population of Afghanistan was not protecting and masking itself against the virus. Since Afghanistan inhabits a culture of close-knit communities, the regular social interactions made the coronavirus numbers worse. Prof. Kamaluddin Sahem, Assistant Professor at the Regional Studies Centre, Academy of Sciences of Afghanistan, further explains that Afghanistan has a long-standing tradition of large families and a culture of dining at the same table that led to a surge in coronavirus cases. Nevertheless, Dr Verghese was relieved that Afghanistan has a relatively young population so most people showed only mild symptoms (personal communication).

Dr Hakim Haider, Associate Professor, Head of Statistics Department, Institute of Economics, Academy of Sciences of Afghanistan, reveals myriad reasons for the increasing spread of the virus in the country. He says that disrespecting social distancing had a large part to play in causing the spread. The use of crowded city buses and of taxis and greetings through physical touch, particularly the women who kiss each other while meeting, led to the exacerbation of cases. Haider adds that Afghans also have disbelief towards the virus. At the outset of the virus, Mullahs were wrongly preaching in the Masjids that “Covid 19 is not killing the Muslims. It only kills the non-Muslims (Kafirs).” And the God-fearing country Afghanistan believed them that if God wants Muslims to be killed by the virus, then Muslims will definitely be killed, otherwise they will remain untouched and unscarred (Haider, personal communication). Therefore, the population remained defiant to the virus and offered Namaz (prayer) collectively in the mosque five times in a day. Haider also states that due to low purchasing power, many Afghans could not afford sanitizers, masks and visits to health centers. Even during the lockdown in Afghanistan, the poor Afghans continued traversing to urban areas to earn their livelihood. He also adds that the aid received from governmental and non-governmental institutions like the World Health Organization and friendly neighbor India had not been able to make much headway in dealing with the virus as it was pocketed by corrupt officials. The rampant corruption worsened the health crisis in Afghanistan (New York Times, 2021).

The pervasiveness of corruption also took away the sheen of the 0.5 million Astra Zeneca Covishield vaccines supplied by the Indian government under the Vaccine Maitri initiative and the international COVAX program for 20% of the Afghan population in February 2021 (ANI News, 2021). High-ranking officials in Parliament, Ministers, Commanders and their family members were inoculating against the virus and the poor and marginalized were left out in this battle against coronavirus. Haider further adds that the vaccines were being stored in a depot (storage) and then sent to friends in Tajikistan, Iran and Pakistan as gifts. He mentions that there is also a lot of suspicion hovering around vaccines owing to non-transparency. In the name of
vaccinating people, the earlier vaccination team conducted covert operations for finding terrorists and handing them over to the government or to foreign forces. Osama Bin Laden was caught in this way when the vaccination team went door to door to search for the most dreaded terrorist. Afghans are also of the view that vaccinations have a hideous Western agenda of sterilizing the Muslim population (Haider, personal communication). Haider suggests that the triumph over the deadly virus can be achieved when transparency is adopted in the vaccination program and its reach is extended in the poorest and remotest districts.

The article will explore the impact of the coronavirus on Afghan women. It will analyze the adversities encountered and the resiliency built by them for combatting the virus. The information and data in the article have been procured from both primary and secondary sources. Dr Verghese, one of the five real-life heroes saving the world whom Bill Gates mentioned in his blog GatesNotes, was interviewed in St Stephen’s Hospital on 7 April 2021. The data and views of Dr Haider and Prof. Sahem were procured through a mailed questionnaire on 18 April 2021. United Nations and Human Rights Watch reports, newspaper articles and websites have aided this article.

**Confronting coronavirus and conflict**

The coronavirus pandemic has been compounded manifold by the socio-politico-economic uncertainty prevalent in Afghanistan. The country has been wrecked by 20 years of long war, political fragility, severe social and economic insecurity, repression and perpetual violence and has been a hotbed of terrorism. All this has adversely impacted the lives of Afghan women, leading to the denial of their basic rights and confinement to their homes where they experience untold violence. Coronavirus has further receded the gains made in terms of achievements in women’s rights. This section will deal with the adverse impact of the pandemic on Afghan women.

**The enfeebled state of education**

On 14 March 2020, Afghanistan closed all schools and educational institutions, impacting 9.5 million children in public schools and 0.5 million children in community-based education classes (Human Rights Watch, 2020). If the re-gaining of territories by the Taliban was not enough to disparage the two decades of war gains by the foreign forces on Afghan soil, then coronavirus devastated the remnants of the development achieved. According to UNICEF, 3.7 million Afghan children are out of school, out of which 60% are girls. And in the conflict zones and Hard to Reach (HTR) areas, an alarming 85% of girls are not going to school (UNICEF, 2018). The Education Ministry, however, reports that 5 million children are out of school (Mehrdad, 2021). Palpably, the actual figures have a different story to tell. The pandemic has further exacerbated the state of education. Forceful marriages took place where the parents married off their daughters without considering the age of the groom and other vital considerations. Loss of employment of parents and economic despondency made them marry their daughters at an early age so that they can have a bride price from which they can run their families and also have one less mouth to feed. A surge in child labor was also reported as parents forced their children to work in order to earn extra income. In a country where 90% of the population lives below the poverty line, parents often rely on children for their sustenance (Omid, 2020). This has led to increasing school dropouts. Children in Afghanistan are also vulnerable for working long hours with little or no pay. The long gap in resuming the education in campuses has impacted their learning, and even distance learning on radio, television and internet did not make much headway as the
population had little access to it. A whopping 70% of the population has no access to electricity (Mehrdad, 2021). And as of January 2021, only 22% of Afghans have an internet connection (Kemp, 2021). Things were much worse for the female student, as domestic responsibilities are added to her schoolwork. On average, Afghanistan women spend 18.7 hours a day on unpaid care and domestic work, whereas men spend 5.6 hours a day (Human Rights Watch, 2020). During Covid-19, 83% of women reported an increase in their domestic work (Human Rights Watch, 2020). There is a lurking fear that the dropouts and marginalized will not be able to return to school. Firstly, a lack of sanitation facilities in schools will keep girls away. Post-Covid, it becomes imperative for every school to up their sanitation facilities. Girls who have started menstruating will find it difficult to continue their education given poor toilet and water facilities. But this is difficult to come by in poorer countries like Afghanistan. Afghanistan allocates 3% of its GDP to education and that also goes unutilized (Human Rights Watch, 2020). The Incheon Declaration and Framework for Action for the Implementation of Sustainable Development Goal 4 says that equitable and inclusive learning can happen when least developed countries spend a minimum of 4% GDP on education (Human Rights Watch, 2020). Secondly, prior to the pandemic, the number of girls attending schools was already declining in many provinces. Human Rights Watch data revealed that in 2016–2017, 0.2 million fewer girls attended school in comparison to the previous year 2015–2016 (Human Rights Watch, 2020). This can be attributed to increasing attacks on schools. Much worse is that even in pandemic times, the attacks on schools did not ebb. Rather, the surge in attacks led to closures of more girls’ schools. A massive 722 schools were closed due to insecurity, impacting more than 0.3 million students (Human Rights Watch, 2020). Even three months into the pandemic, between 1 April and 30 June 2020, UNAMA (United Nations Assistance Mission in Afghanistan) reported nine attacks on schools (Relief Web, 2020c). Thirdly, the girls who have been internally displaced will find it difficult to re-join schools as the transfer documentation work will prove to be an impediment. Also, people who have returned to Afghanistan will face obstacles in getting an education, as essentials like food, water and shelter become more important than providing education to their children. And the children who were also dependent on schools for the provision of minimum nutrition have been deprived of it since lockdown. To counter the adverse impact of the pandemic on education, the government of Afghanistan launched a distance learning education program for class 1–12 students. Social science subjects were taught through the radio and science subjects were taught on television. In areas where there was no internet or television connection, the government promoted face-to-face teaching of small groups of 5–8 children in the open air under strict Covid guidelines of maintaining social distance, wearing masks and using hand sanitizers (Mehrdad, 2021; Relief Web, 2020b).

Further marginalization of disabled Afghan women

Afghanistan already fares the worst in the Global Gender Gap report of the World Economic Forum. Not to mention women with disabilities, who face double stigmatization. One stigmatization is for being a woman, which is considered to be a secondary class to men and whose ‘honorable’ role is considered to be that of a mother and wife confined to and responsible for household chores. The second stigmatization is for being a woman distorted with disabilities who is not accepted by society and is socially excluded. The onset of coronavirus further exacerbated their dire situation. The majority of women with disabilities who already have a meek supply of income, food, nutrition, health care and education have been severely impacted. Their mobility
has become further limited, as there is a constant fear of coming in close contact with a Covid carrier. Women with disabilities in remote districts also have difficulties in travelling to hospitals that are located more than 100 km away from a physical rehabilitation center and these are so resource scarce that 20 out of the 34 provinces are not equipped with disabled-friendly services and infrastructure (Accessibility Organization for Afghan Disabled, 2007). The paucity of women health professionals is also a concern. In Afghanistan, only 2% of medical doctors and 15% of nurses are women (UNICEF, 2020).

**Domestic violence**

Gender-based violence is rampant in Afghanistan. Ninety percent of women in Afghanistan have faced some kind of violence from their intimate partners. And the arena of violence is the home (Maranlou, 2021). The home is usually considered a place that harbors safety and dignity. But in Afghanistan, home is a place where women are most commonly deprived of their dignity, beaten for trivial reasons like burning food, a crying child and remnants of spots on washed clothes (Hossaini, 2020). Even prior to the pandemic, Afghanistan was the worst place for women. In the Global Gender Gap Report 2021, Afghanistan was ranked the lowest (World Economic Forum, 2021).

The pandemic has caused the loss of jobs and economic despondency in families, with men not able to provide food at home. According to Islamic rule, it is the duty of men to earn a living for their family. Loss of employment and lockdown confined them to their homes and they vented their anger and frustration on their wives. A report by the Ministry of Women’s Affairs, Attorney General Office’s Elimination of Violence Against Women department and the Afghanistan Independent Human Rights Commission revealed that the overall reporting of violence against women has decreased. But there has been a spike in the incidents of extreme violence of stoning by informal courts, killings, suicides and extreme physical abuse. There was a rise of 56% of such cases (Hossaini, 2020). The reasons for the decline in the reporting of cases were that they were surrounded by male members at home during the pandemic. This made it difficult for aggrieved women to approach the authorities. Secondly, the lockdown led to the unavailability and inaccessibility of government authorities. This caused an increasing number of women to seek refuge in shelters (Hossaini, 2020).

The government did take some measures to contain the unabashed spread of this shadow pandemic. Helplines were launched where women’s problems were listened to but this could not improve the condition of women. Some women talked about the close time they spent with their families to bond and be together but these were unmarried women (Hossaini, 2020).

One can find an apparent link between violence at home and extremism in Afghanistan society. Those societies where women are disrespected, beaten up and deprived of their basic dignity and human rights cannot have peace in their societies. Violence at home breeds violence in society (Ahmadi, 2020).

**Economic adversity**

The global economy has taken a major downturn, resulting in loss of jobs and employment opportunities, the shutting down of businesses and SMEs and restrictions in the movement of trade and goods. It has been estimated that 96 million people will be pushed into poverty by 2021 and that 47 million of them will be women (UN Women, 2020).
Of course, the real figures will be much worse. Fifty-four percent of Afghans were already living below the poverty level before the pandemic (Relief Web, 2019). The pandemic has further pushed the poorer countries into economic abyss. An International Rescue Committee survey found that 63% of women who worked in the informal sector have lost their jobs (International Rescue Committee, 2020).

Women have also not been able to manage and develop their businesses, as they have had to spend more time looking after their family members who have been confined to their homes due to lockdown.

Another significant fallout of the economic crisis that unfortunately went unnoticed was the increase in drug abuse. The loss of jobs added to the stress and anxiety and more people resorted to drugs to overcome it. This negative coping mechanism brought more land under opium cultivation as more people were finding it profitable to earn a livelihood by cultivating opium after losing their jobs. Since opium cultivation is a very labor-intensive process and there is a lack of cheap labor, it put an additional burden on women and children as they too were made to work on lands. Men under the influence of drugs were also unleashing more extreme violence on women and children at home, making women unfit to work both at home and in the field. To escape the emotional and mental abuse, women resorted to drugs. Women who returned from Iran were also taking drugs to adjust to their new life in Afghanistan. This will lead to serious repercussions for Afghanistan’s peace-building process, security and stability, as the coming generation will be unstable and dependent on drugs. It will also deprive the Afghan society of women’s rights and human rights and dent its sustainable development (UN Women Asia and the Pacific, 2020).

The fragile health system

On 12 May 2020, when the entire world including Afghanistan was grappling with Covid, terrorists carried out the most brutal and shameful attack on women when they were in their most vulnerable state. Women in the maternity ward in Dasht-e-Bahraich who had just delivered their babies were killed. Sixteen mothers, one midwife and two newborns succumbed to the attack (Médecins Sans Frontières, 2021).

This gruesome incident amidst the specter of coronavirus narrates how difficult it is for women in Afghanistan to battle both the ills. On 15 June 2020, Médecins Sans Frontières (MSF) took the difficult decision of withdrawing from the country, leaving Afghans to their own fate. For a country already reeling under the paucity of medical professionals and medicines and a poorly developed medical infrastructure, the decision of MSF adversely impacted mothers and babies. A 2018 report stated that 140 hospitals have had to be shut down due to attacks by militants (Ahmadi et al., 2020). These attacks continued in pandemic times. Three female polio vaccination workers were shot dead in Jalalabad, as vaccines are looked at with suspicion as an attempt by the West to make the Muslim population sterile or as a ruse to catch militants hiding in Afghanistan. The Ministry of Public Health of Afghanistan stated that only 27% women have contracted the Covid infection (Williams, 2020), but the real figures tell a different story. The low reporting of Covid numbers amongst women is attributed to myriad factors. Cultural restraints are a predominant reason, where male family members do not permit women to leave the house. Secondly, Afghanistan has a centralized testing system where the testing happens in 11 allocated lab centers only (Ahmadi et al., 2020). These centers are situated so far out that it can take two hours and sometimes an entire day to reach them. Also, the capacity of labs has been pathetically meagre, as they could test only 2000 samples a day (Faiez, 2020). Women were also apprehensive in accessing the
hospitals, as the latter lacked Personal Protective Equipment (PPE). There was a danger that civilians may contract the virus when they go for consultations in hospitals. In this case, women’s reproductive health was sidelined and they took to traditional treatment where the deliveries were happening at home, many times putting the life of the mother at risk. The death rate of women during childbirth is high in remote areas of Afghanistan. There is a high probability that women will get infected with the virus from their family members, since men go out to work and they are casual in protecting themselves by wearing masks and often do not wear masks at all. Men bring the virus into their one- or two-room house, affecting their big, inter-generational families. The health of women is also considered to be a low priority, and deaths from chronic diseases are common amongst women in Afghanistan (Sahem, personal communication).

Afghan women are also not comfortable being treated by male doctors. Male family members and elderly women do not allow women to take treatment from male doctors. The country has very few female doctors, as education is not encouraged among women in Afghanistan. Sahem informed that the situation was improving in urban areas where men allowed their wives to go to health centers and get treated by male doctors. He also pointed out that numbers of female medical staff are also increasing in cities (Sahem, personal communication).

The returnees from Pakistan and Iran, the countries that faced the massive outbreak of the virus and a dwindling economy, were also at the receiving end, as they have to live in dungeons with many people without any social distancing, or with basic facilities of sanitation and masks.

Entrepreneurship and innovation amongst Afghan women

The New York Times carried a story aptly titled ‘Covid can’t compete. In a place mired in war, the virus is an afterthought’ (Abed and Zucchino, 2020). The two decades of war and the lingering danger of a reversal of the war gains made in Afghanistan due to the withdrawal of foreign forces have certainly faltered the faith in the spirit of the political system but the resilience of the human spirit in Afghanistan has remained unscarred. In a country where two thirds of women are out of the educational system, Afghan women of all hues have courageously come forward and are doing their bit to pull the country out of the virus (Human Rights Watch, 2017). They have found a progressive way to convert every crisis into an opportunity to re-build their country.

The coronavirus first struck in Herat when some Afghans returned from Iran. Afghans at that time were not aware of another looming danger. When the cases rose astonishingly, former Governor of Herat Abdul Qayum Rahimi opened a design challenge for building ventilators. The country owns around 200 ventilators for its 39 million population (Hadid and Ghani, 2020).

Afghan Dreamers, a group of five teenage girls, competed in the design challenge. Balancing it with their normal classes, they spent four months building a low-cost, low-tech and hand-operated ventilator. These teenage girls had never ventured into the field of medicine before and were dedicated solely to robotics and programming. But with the crisis striking their country hard, they committed themselves to the cause. Somayya Farooqi, 18, head of Afghan Dreamers, has spent time since childhood in her father’s car mechanic workshop where she observed, learned and also sometimes helped her father in the repair of the cars despite being the only girl child amongst her brothers. Already under a severe resource crunch, Somayya’s father drove the girls to the car workshop that is 20 km away from the city, where they collected spare parts of old Toyota Corollas to build a prototype of the ventilator. The team looked for an open source design on the internet and came across a low-cost and low-tech design by the Massachusetts Institute of Technology (MIT) in the US named MIT E-Vent. They also received guidance from experts at Harvard University.
After feedback from doctors and the Ministry of Public Health, Afghan Dreamers continued to reform and upgrade their ventilator machine. The ventilator reportedly works for 10 hours and costs US$700, which is much less than a traditional ventilator which costs US$20,000. The Ministry of Industry and Commerce of Afghanistan also donated US$10,000 to the team and secured some land where the ventilators can be produced on a large scale (Billing, 2021).

Afghan Dreamers was founded by Roya Mahboob in 2017. She is a tech entrepreneur who runs STEM (Science, Technology, Engineering and Mathematics) and Robotics classes for girls with the purpose of inculcating the learning of science and developing a scientific spirit. Though Afghanistan now boasts of the innovation made by the Afghan Dreamers, the achievement did not come easy at all. A conservative country overrun by the Taliban, the education of girls is a far distant dream. According to data by UNICEF, 3.7 million Afghan children are out of school, of which 60% are girls. In the conflict zones and remote, inaccessible areas of Afghanistan, a staggering 85% of out of school children are girls (Billing, 2021).

The other dominant challenge that Afghanistan faces is of a paucity of resources. Haider also states that innovation made by Afghan Dreamers was in the knowledge of general public but the Ministry of Health in Afghanistan and the World Health Organization did not encourage it for the reason that the “health mafia trade” might get into jeopardy. Haider includes corrupt officials, insurgency financiers and drug traffickers in the health mafia trade. Therefore, corruption becomes an important concern that stymies the growth prospects of the country. But discrimination is not limited to their own country. They faced biases across the globe. Afghan Dreamers were not able to participate in a contest in America, as their visas were rejected many times (Chokshi, 2017). It is feared that Afghans will go to the USA for the purpose of education, become academics and then settle permanently in the country. Afghan Dreamers were only allowed to visit America and participate in a contest when Donald Trump made an intervention (Chokshi, 2017).

But all these myriad challenges could not deter the spirit of Afghan Dreamers. Rather, they gained confidence and went ahead in designing two new innovations. The first was the UVC Robot that is equipped with UV sterilization lamps to combat Covid-19 by sanitizing indoor areas. And the second was the disinfection robot called the Spray Robot that sanitizes both indoor and outdoor areas.

Another story of courage published by Reuters and further taken up by YahooNews and the Jakarta Post is that of a 21-year-old woman, an international graduate who opened her art gallery christened the Namad Gallery and employed 10 people in it (Hakimi, 2020). Marzia Panahi, an art lover and entrepreneur, set up her art gallery in September 2020 when the coronavirus was at its peak. Perturbed by the surge in unemployment, Panahi wanted to at least help herself and a few others to battle the economic shadows of the pandemic. With more than 60% of the Afghan population below the age of 25, unemployment is a prime concern amongst youth (Hakimi, 2020). And the onslaught of Covid further deteriorated the economic conditions not only in Afghanistan but also across the world. Panahi through her art gallery also aimed to revive the traditional art of Afghanistan and give vent to the creativity of young Afghans.

In another show of courage, a group of women in Afghanistan turned adversity into opportunity when they turned their street snacks mobile cart into a sanitizer cart. Forty solar-powered mobile carts made from spare parts of motorbikes that sold rice and burgers were stranded due to the lockdown (Farzad, 2020). These mobile carts famously called ‘Banu’s Kitchen’ in Afghanistan were supported by UNDP to pull women out of poverty. The other significant aims were to combat the social and economic discrimination faced by women, to inculcate a sense of confidence and also to educate on climate change. Women in Afghanistan have struggled hard to sustain their livings amidst harsh social
taboos. They are seen and accepted in Afghan society in the traditional role of being a homemaker. They remain ‘honorable’ only when they remain confined to their household work and do not ‘stray’ from this. To combat poverty and sustain the livelihoods of their families, the women ventured into the business of selling food from the mobile carts. The UNDP supported the running of 40 mobile carts. Before this, women in Afghanistan had never run a mobile cart, as the traditional cultural norms of Afghanistan prevented Afghan women from being cart vendors. But when the UNDP launched this initiative, the underprivileged women in order to break free from penury resisted conservative social mores and applied in huge numbers. The women resisted the ridicules of passers-by, and through determination they have made their place in the urban areas of Afghanistan. But when coronavirus struck, these stranded carts were converted into sanitizer carts. They contributed immensely in the efforts of the Afghan government by disinfecting 2400 businesses/shops and providing free sanitization facilities of handwashing and masks to around 14,000 people on a daily basis (Relief Web, 2020a, 2020b, 2020c). Complementing their successful efforts to contain the pandemic, the Afghanistan government decided to float 700 more carts to sanitize and disinfect every corner of Kabul to wipe out the virus (Relief Web, 2020a, 2020b, 2020c).

High hopes were also running for an all-women bank branch of FINCA that was opened in 2018 in the buzzing city of Kabul (Farmer, 2020). All the staff, including cashiers, administrators, the branch manager, the credit supervisor, the management information systems operator and five credit officers, were women. Exclusively meant to serve Afghan women, the significant aim of the bank was to economically empower marginalized and under-privileged women and encourage a spirit of entrepreneurship in them. Women in Afghanistan have traditionally not been given a say in financial matters. To combat this and provide women with financial literacy, it was indeed a significant move by the bank to include women in the mainstream financial sector and support them with Shariah compliant financial services, from individual loans, house loans and group loans to SME loans to microfinance graduates. Also, given the conservative set-up of the country where women are kept behind the purdah and talking to males is not considered appropriate, a women-run bank makes the environment comfortable and amiable for the women customers to discuss, gain knowledge of and share their experiences and entrepreneurship opportunities. FINCA also boasts that 61% of their customers are women, who have a good record of re-paying their loans (Finca Canada, 2018). In a story carried by the Telegraph, branch manager Shakila Shewa says “Women know the problems of women. They are more honest mostly than men. They pay their loans on time. This special branch is very beneficial for them” (Farmer, 2020).

For this reason, the government was keeping an eye on FINCA’s women customers who have availed loans to set up small businesses and employ people that will also be providing a fillip to the flailing economy of Afghanistan. The success of the branch was also noteworthy since typically a branch takes 12–16 months to become profitable but it took only nine months for the all-women branch to do so. And there was an interesting finding that women were 50% less likely to default than men (Farmer, 2020). The Afghanistan economy had been impacted due to the Covid lockdown and the government was looking for holistic and myriad measures to uplift the economy. Afghanistan is also mired in political instability, with frequent conflicts, Taliban’s suppressive rule and unending violence that have battered its financial pillars. Giving support to small ventures would have provided employment and given money to women who would have invested in the education and health of their family. Shakila Shewa quotes her favorite example where a 10,000 afghani loan was provided to a woman to set up her carpet business which now employs 12 workers (Farmer, 2020).

After the success of the first branch, FINCA opened a second branch in March 2021. The new Nehr-e-Shahi branch has already gained popularity, with over 1500 clients. The two strategies that
pulled Afghan women towards the financial area are that the loans provided were free of collateral and that the guarantee to repay loans was given by a group of friends.

The First Microfinance Bank FMFB (A), the largest microfinance institution in the country, also has an all-women bank branch in Dasht-e-Barchi and intends to open two similar branches in Herat and Mazar-e-Sharif (AKDN, 2017).

With only 7% of Afghan women having a bank account in the country (Nosher, 2020), civil society and government had a lot of trust embedded in these financial institutions that would have provided a platform for women to create and participate in the economy and would have also paved the way for future Afghan women.

In the Covid-19 Business Pulse Survey, conducted by the International Finance Corporation and World Bank in partnership with USAID, 88% of businesses reported a significant decline in their sales that caused job losses or meant employers had to send workers on leave or reduce their working hours. The state was so grim that in 60 days of Covid-19, 37% of firms laid off at least one employee and 23% lost their jobs. This put Afghans in a further impoverished state (IFC, 2020).

Such initiatives taken by banks to promote gender-sensitive loans would have aided in economic recovery and pulled people out of poverty.

In another historic feat achieved by Afghanistan women when the world and the country were battling against coronavirus, KamAir flew its first flight that was staffed by an all-women crew. This is the first time in the history of South Asia and more so in a country where women are confined behind the purdah and not permitted to work outside the realm of their homes. The KamAir flight took place on 24 February 2021 but the news was released only in March to coincide with International Women’s Day on 8 March. It was also historic for another reason that the country’s first female pilot officer aged 22, Mohadese Mirzaee, piloted the flight (Pallini, 2021).

In a written response to a mailed questionnaire, Sahem mentions the valor of Afghan women in Badakhshan province. These women were previously working in the handicraft industries. Seeing an opportunity in the non-availability of hygiene products on the market, the Banu Professional Institute started manufacturing masks of a much better quality and at a cheaper rate than imported ones. These masks were produced under the guidance of medical specialists and an NGO ‘Actide’. The Badakhshan Department of Women’s Affairs welcomed this initiative.

**Conclusion**

June 2021 brought the third wave of coronavirus to Afghanistan. The Delta variant of the virus caused a spike in the number of infections. Half a million doses of Covishield from India and 0.7 million of Sinopharm from China did not create enough protection to develop herd immunity (Rahim and Nossiter, 2021). In the midst of the coronavirus pandemic, the most crucial decision of a drawdown of American troops created immense political, social and economic uncertainty. This caused a reduction of sources of foreign funding when Afghanistan needed it the most, and on top of this the relentless state of conflict marred the opportunities for rebuilding the state infrastructure. But it did not mar the spirit of Afghan women. It is important to highlight the resilience and courage of Afghan women who were battling not only the virus but were also braving the age-old patriarchal norms and fighting the Taliban suppression to contribute to the peace building of Afghanistan and to rebuilding their own lives and those of their families.
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