LETTER TO THE EDITOR

Increments of gender-based violence amid COVID-19 in Bangladesh: A threat to global public health and women’s health

1 | INTRODUCTION

Sexual violence against women (SVAW) is one of the severe forms of gender-based violence. Sexual violence covers activities that vary from verbal sexual harassment to sexual pressure for involuntary penetration. According to the World Health Organization (WHO) defines sexual violence is “any sexual act, attempt to obtain a sexual act or other act directed against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting.” Globally, about 30% of women face sexual violence by their intimate partner or non-partner in their lifetime.1 Also, the severe form of SVAW is rape, defined as “physical violence against the body with coerced penetration of the vulva, anus, or oral cavity”. SVAW is an anti-human activity. It has many potential health consequences. Besides killing and suicidality, SVAW has some long-term impact on their reproductive, mental, and behavioural health. The violence against women has significantly increased across the world during health emergencies in the COVID-19 pandemic. Therefore, this increased sexual violence might create a long-term impact on their well-being even after the pandemic crisis.2 So, it is unacceptable, and there is no scope to see this as scattered incidences.

2 | SVAW IN BANGLADESH

Specific statistics regarding sexual violence in Bangladesh are limited. In general, about 60% of Bangladeshi men show violent manners with close partners.3 Moreover, Bangladesh has ranked second in terms of the prevalence (49.7%) of SVAW after Ethiopia (58.6%).1 However, the social and economic effects of lockdowns and movement restrictions due to the COVID-19 pandemic have created high exposure of women to their abusive partners or non-partners. The present condition of pandemic crises has accelerated the existing violent behaviours or created new forms of violence against women by their intimate partners or non-partners.1 According to the prediction of the United Nations Population Fund, domestic and sexual violence has increased by 20% during the COVID-19 worldwide.4 A Bangladeshi human rights organization, Odhikar, reported 16,256 rape cases from 2001 to 2020 in Bangladesh. Among the cases, child victims, gang rape, killed after rape, and victims who committed suicide after being subjected to rape were 52.8%, 19.5%, 5.7%, and 0.6%, respectively. Odhikar reported the highest number of rape cases (1,538) and gang rape incidences (345) in Bangladesh in the year 2020. The increments were 42.4% and 17.3% from 2019. Additionally, we observed 57 related deaths during the ongoing pandemic.5,6 A study reported that before the rape and any other methods of sexual violence, most of the victims were mentally tortured and heavily beaten.7 Moreover, one study reported that mental torture, physical abuse, and sexual abuse dramatically increased during the ongoing pandemic than that seen in prior years.8 Therefore, increased sexual violence means the increase of all other forms of violent behaviours as well. However, in the same period, dowry-related violence and sexual harassment reduced over the decades in Bangladesh.5
3 | REASONS FOR SVAW IN BANGLADESH

The victimized women generally tend to avoid legal proceedings due to social stigma and fear of filing complaints. Also, the victims might face negligence and humiliation at society, police stations, and court. Therefore, most rape survivors do not take legal action despite the frequent media reports of rape in Bangladesh. According to a report, only 3% of rape victims seek legal support in Bangladesh. Among them, 2% seek help through local leaders, and 1% from formal legal authorities. Another survey among the perpetrator (rape case) reported that 95% of urban respondents and 88% of rural respondents did not face any legal consequences for raping. Moreover, the help-seeking rate of victims might significantly reduce during this COVID-19 pandemic. Therefore, the low rate of help-seeking behaviour is considered as a contributing factor for further incidences. Also, the patriarchal social structure, forced marriage, early marriage, marital rape, sexual abuse, sexual violence in households, and barriers to legal support are contributing factors for sexual violence in Bangladesh.

4 | COVID-19 AND ITS IMPACT ON SVAW

Lockdowns and quarantine are effective strategies to control infectious diseases. After the declaration of COVID-19 as a global pandemic, many government authorities have been facing mounting pressure to implement lockdown and quarantine to reduce the social transmission of coronavirus. The frequent lockdown, movement restriction, and quarantine have led to a radical change in day-to-day lifestyle due to the adequate vaccine supply and treatment options. These responses to reduce coronavirus spread have created many negative impacts on human life, for example, the risk of unemployment, financial instability, and mental health issues. Also, these measures have allowed more freedom for abusers. Lockdowns have squeezed economic opportunity in India that results in sexual and domestic violence against women. The financial distress during the COVID-19 pandemic reportedly puts women at a risk of facing violent behaviour. During the ongoing pandemic, people are spending more time at home, coping with additional stress, and the reduced income of families increases the risk of gender-based violence. The pandemic has increased the vulnerability and risk factors of SVAW. Asia, North and Latin America, and Europe reported a significant increase in the number of women calling to helplines for support against violent behaviour by intimate partners or non-partners during the ongoing pandemic. The pandemic and health safety measures affect the accessibility of victims. Also, low awareness about available services, technology, and movement restrictions limits the victim’s accessibility to services. Also, the pandemic crisis increases mental health problems, domestic violence, and suicides in Bangladesh.

5 | WHAT ACTIONS HAS BANGLADESH ALREADY TAKEN AGAINST SVAW

It is possible to reduce SVAW by promoting gender equity through plans and policies, empowering women, implementing laws, consolidating relations, strengthening the economic power at the community and household level, creating safer environments, beliefs, social norms, etc. In Bangladesh, according to Section 376 of the Penal Code 1860, the perpetrator can get imprisonment for up to 10 years or life imprisonment for the punishment of rape. Recently, rape against women and girls has become a national problem in Bangladesh. Considering the situation, the Bangladesh government has approved a revision in the law that would allow the death penalty to the perpetrator for raping women or children. According to this revision, "lifetime rigorous imprisonment" described in Section 9(1) of the Act was changed by "death or lifetime rigorous punishment." Therefore, rape is now a more punishable offence where the perpetrator might get life imprisonment or the death penalty. Bangladesh has a national emergency helpline (999) and a helpline for violent behaviour against children, girls, and women (109). And both the helplines are available 24/7 to support the victims. Despite having laws and helplines to prevent sexual
violence, the prevalence of rape incidence is following the opposite direction. The country is far away from desired outputs of these initiatives.\textsuperscript{20}

\textbf{6 \  RECOMMENDED INITIATIVES TO PREVENT SVAW}

The authority should implement proper investigation and punishment measures as per the laws to prevent this incremental tendency of SVAW. The present constitution for the protection of the rights of women is adequate.\textsuperscript{20} However, law enforcement agencies need to show integrity, loyalty, and dedication while dealing with rape or any sexual violence issues without indecision or partiality. However, the increased penalty for rape is insufficient to improve the situation at the societal level. Therefore, the government must take initiatives against sexual violence. To promote empowering women and gender equality in Bangladesh, the combined efforts of the government and non-government organizations can be fruitful. The non-government organizations (NGOs) can play their roles by offering awareness and training programs, solutions of problems by mutual understanding, assistance to file cases, legal aid services, safe places for victims, etc., to support the government authorities in facing sexual assault. NGOs can act as catalysts by encouraging the various concerned government departments to involve in different programs to promote gender equality and women's rights. This effort will be more effective if the NGOs can work together because individual NGOs have disparate constituencies. Every people need to raise their voices against sexual violence to prevent it from society. Community-based awareness programs might develop awareness among women of their legal and social rights to empower and secure themselves. The authorities can engage male partners in those response programs against sexual violence for better results. Also, faith-based organizations have a strong influence over the general population in Bangladesh. Therefore, they should be involved in community-based awareness programs. We recommend introducing a dedicated national helpline for sexual violence for free and anonymous access by the victims to report such complaints. The authorities should stop the practices of early arranged marriages and provide mental health support for victimized women. Also, they should provide preventive, diagnostic, and treatment facilities for sexually transmitted diseases, including HIV or AIDS to the victims. The country can effectively reduce the incidences and support the victims of sexual violence by changing the system and culture.

Also, the authority should take some additional measures to tackle the increased prevalence of SVAW during the COVID-19 pandemic. They can include essential prevention strategies for sexual violence with the preparedness and response plans for the COVID-19 pandemic.\textsuperscript{21} The government authority should allocate adequate resources for victimized women for easy access to healthcare and legal support in the context of restricted movement during the ongoing pandemic. In this time, they should emphasize the use of telemedicine, digital health, or helpline numbers to improve their access to legal support and healthcare services. The authorities can also think about alternative shelters for identified vulnerable women. The government authority should ensure that lockdown measures will not affect the sexually victimized women for getting legal support during the COVID-19 pandemic. From the community perspective, we should help to safeguard the human rights of women. We also promote their physical and mental health and well-being.

\textbf{7 \  CONCLUSION}

The specific groups of the population are more vulnerable to gender-based violence worldwide, and this ongoing pandemic has impacted their miseries. Therefore, the government, non-government, and other organizations should work together to prevent SVAW and promote gender equality and women's rights. The authorities should pay special attention to address this issue during the ongoing health emergencies. We recommend the future survey to know the actual gravity and impact of the COVID-19 pandemic on violence against women in Bangladesh.
KEYWORDS
COVID-19 pandemic, global public health, sexual violence, women’s health

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CONFLICT OF INTEREST
The author(s) don’t have any conflict of interest to declare.

ETHICS STATEMENT
Not applicable for this study.

AUTHOR CONTRIBUTIONS
Md. Rabiul Islam conceived the study, wrote the initial draft, edited and revised the manuscript. Md. Jamal Hossain provided data, wrote the initial draft of the manuscript. Both the authors reviewed and approved the final submission.

DATA AVAILABILITY STATEMENT
Data sharing is not applicable to this article as no new data were created or analyzed in this study.

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