After the declaration of COVID-19 as a global pandemic by the World Health Organisation (WHO), Governments of countries across Sub-Saharan Africa began and have continued, to implement directives to different extents; from total lockdowns, curfews and some form of restricted movement in some countries; to reluctance to implement and adopt an immunity strategy in others like Tanzania and Burundi.

Law enforcement authorities across the region resorted to punishment with impunity and with extreme force for citizens who flouted these directives. These measures often proceeded unchecked for human rights sensitivities and very few corrective actions were taken to return to caution.

In most of these countries however, the common denominator was the governments being faced with a trade-off between ensuring economic wellbeing and containment of COVID-19.

There was, and there is still, risk of encroaching on human rights in the governments’ attempts to respond to the virus, including the right to privacy in disseminating statistical epidemiological data, and the right to association in managing social isolation. In some contexts, the religious right wing even resorted to scapegoating the LBQ (Lesbian, bisexual and queer), transgender women, Intersex and Gender Non-Conforming persons as the cause for the pandemic, adding to their further stigmatisation.

**Effects on girls, young women and gender non-conforming youth**

COVID-19 has generated complex challenges and risks, and while the virus does not discriminate, it is very clear that it hits girls, young women,
transgender women, intersex and gender non-conforming youth disproportionately hard due to the fact that they are already marginalised and living on the frontline of multiple forms of oppression. It has exacerbated the existing vulnerabilities of these communities, driving them further into poverty and marginalisation.

Mandatory quarantines and stay-at-home advisories have led to unexpected consequences, including physical, sexual, reproductive, emotional and economic violence against young women and girls. This has led to a substantial surge in mental health issues for young women and girls.

Sex worker communities rely on intimacy for their economic sustenance and, under the prevailing circumstances, it is important to acknowledge the various ways in which the restrictions have had an impact on their livelihoods. Sex workers who have resorted to practice sex work at their residential places have increased their vulnerability to violence through exposure to neighbours, friends, and family members who have since realised their income generating activities.

The healthcare systems in the sub-Saharan African region have been strained by the pandemic. With limited public health access, or lack thereof, our communities have had to rely on the set up of alternative community-led healthcare facilities. There could have been an opportunity to leverage on the already pre-existing healthcare systems to drive health services to the communities, but these have either not been recognised or they have not been considered in the national pandemic response, hence effectively leaving out lesbian, queer and transgender women, female sex workers, intersex, and gender non-conforming persons from the pandemic health response.

In terms of organising for young women and girls, the pandemic has hugely affected physical, emotional and digital working environments. The COVID-19 public health crisis affected a lot of teams’ wellbeing.
and working modalities, planning processes and execution of activities and services, shifts in regulatory processes nationally, as well as disruption to internal and external communication and ongoing activist work.

These disruptive and unprecedented events have threatened to harm organisations, especially the nascent ones and those that have long standing investments in their constituencies and partnerships, hence the dire need to strengthen their response and recovery post COVID-19. This has also presented an opportunity to learn from structural challenges that affect young women and girls’ organising capability so they can withstand the effects of the crisis and derive specific capacity, strengthening plans with nascent organisations to mitigate the effects of the pandemic on their institutions and work.

**What next?**

While the partnership of social justice funders under the Global Resilience Fund and other like-minded funds and philanthropies, have made a deliberate and dedicated move to support these communities through their vulnerabilities, there is still an evident gap in funding to fully sustain the programmes that have been supported through the pandemic so that the gains are not lost.

Moreover, some mainstream funds are still closed to our communities, while others apply vast restrictions and ring-fences to the use of their resources which has inhibited access and flexibility by and for young women and girls. Thus there is the ongoing need to advocate for more flexible funds.

**Grant-making in practice, the participatory process and learnings**

To quote the powerful and timeless words of Arundhati Roy; ‘There is no such thing as the voiceless but rather the deliberately silenced and the preferably unheard.’

Participatory grant-making which only recently became popular, allows young women, girls and gender non-conforming persons to make relevant life-saving decisions about realities and problems that only they themselves would be equipped to make because they live the very struggles and contexts they seek to change.

The Global Resilience Fund grant-making process did more than bring young women, girls and gender non-conforming persons into the decision-making spaces. It allowed
us to exist in those spaces as our full selves, and to frame the language and set-up of those spaces to appreciate the linguistic and contextual diversity of global feminist activists and movements.

For me, this made it a powerful process because it did not just change how those spaces are constituted as a ‘tick the box’ thing, but it reframed those spaces for us, and we in tandem, determined how decisions about our own communities are made. This shifted the nexus of power in funding to where it should have been in the first place, with the communities that have a vested interest in the change, and who have the most recent barometer reading of how their terrains are shifting. This, in turn, has enabled us to make the most relevant decisions and to create the most durable change in the midst of a pandemic.

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