



INTRODUCTION

With the arrival of the first cases of COVID-19 in Malawi, the Malawi Government has introduced a raft of measures designed to curb the spread and 'flatten the curve'. These measures include: social distancing, travel restrictions, closure of markets, and bans on public gatherings, among many others. Whilst these measures may assist in controlling the health crisis, but – as in other countries – they will further exacerbate the prevailing economic crisis and misery for the poor, with massive job losses and rising food insecurity. Women horticulture farmers are among the hardest hit by the COVID-19 pandemic.

METHODOLOGY

This factsheet presents information gathered between April 16 and April 19 from 45 women farmers in Dowa, Kasungu and Ntchisi districts of Malawi; and 15 key informants (KIs), 6 based in the districts and 9 working at national level with women farmers. These included government officials and representatives of Trade Unions, civil society organisations, and buyers/vendors.

The assessment utilized a mixed methodological approach, combining both quantitative and qualitative techniques, as well as direct observation. Primary data were collected using in-depth one on one interviews and focus group discussions (FGDs). For the FGDs, special care was taken to practice the 'minimum one meter apart' social distancing recommendation and in addition, the team and informants all wore protective face masks. Key informant interviews (KIIs) were conducted in person, for the district based officers and via telephone for all the other stakeholders.

SUMMARY OF KEY IMPACTS

Food security: The food security of women horticulture farmers and their households is threatened, both in the immediate and long term, by combined factors of, reduced access to food due to closures of markets and borders; reduced yields this season; and insufficient resources (money and inputs) to prepare for and produce a good harvest in the coming season.

Income: 87% of women horticulture farmers consider income from the sale of farm produce as their primary income. Covid-19 has and will, for the unforeseeable future, have a negative impact on their income, reducing it by at least 25%. The factors contributing to this significant loss of income include, reduced demand for seasonal work; limited opportunities for piece work; lack of markets to sell produce; a drop in the price of produce at 'farm gate'; movement restrictions which result in less volumes of produce moved; and an increase in unpaid care work.

Health and Safety: The health and safety of women horticulture farmers in Malawi is threatened by a nexus of already existent factors which have been further amplified by the COVID-19 pandemic. These include, a fragile healthcare system; an unreliable commodities supply chain; lack of access to and stigma associated with SRHR services; a sharp increase in the incidence of gender based violence (GBV) including intimate partner violence (IPV); and lack of access to adequate water; sanitation and hygiene (WASH).



RAPID ASSESSMENT ON THE IMPACT OF COVID19 ON WOMEN HORTICULTURE FARMERS IN MALAWI

RECOMMENDATIONS

- 01** Drive transformative change for equality by addressing the paid and unpaid care economy through bringing to the fore issues of unpaid care work;
- 02** Ensure women's equal representation in all COVID-19 response planning and decision-making from community to national policy levels and target women and girls in all efforts to address the socio-economic impact of COVID-19;
- 03** Further strengthen GBV response mechanisms and referral pathways through enhancing multi-stakeholder coordination for provision of more holistic services;
- 04** Improve access to WASH services through ensuring reliable and increased supply of clean water.
- 05** Government should promote income generation and food security through implementing robust social protection programmes such as cash transfers and provision of relief aid to vulnerable households identified through effective vulnerability assessments;
- 06** Increasing access to health services, in particular SRHR services, through introducing mobile health centers and/or SRHR facilities to complement traditional health centers and provide access to 'in demand' services;
- 07** Open up alternative markets for local produce, leveraging on technology, and develop new models for produce supply and distribution; and
- 08** Scale up the effectiveness of the national COVID-19 response through strengthening the knowledge and skills of women for effective Corona Virus prevention and control.