



MEASURING THE SHADOW PANDEMIC:

**VIOLENCE AGAINST
WOMEN DURING
COVID-19**

COUNTRY REPORT: KENYA

EXECUTIVE SUMMARY

The COVID-19 pandemic has had strong impacts on women's day-to-day lives in Kenya. Women reported feeling less safe, experiencing more frequent incidents of abuse and harassment, and being subjected to more dangerous situations over the past year. Congruently, the downstream impacts of COVID-19 vary, in type and severity, based on pre-existing factors, including socioeconomic status and vulnerability to other stressors. This research delved into the relationships between measures of violence against women (VAW) and the

demographic, behavioural and socioeconomic factors related to them.

This study found that COVID-19 has eroded women's feelings of safety in Kenya, whether it was inside or outside of their households, with significant negative impacts on their mental and emotional well-being. Among the drivers of these feelings, external stressors such as food insecurity and family relations stood out as having a significant impact not only on experiences of safety (or violence) but also on women's well-being overall.

1. INTRODUCTION

Prior to the COVID-19 pandemic, Kenya's Demographic Health Survey found that 41% of women aged 15–49 have experienced physical violence and/or sexual violence from an intimate partner at least once in their lifetime,¹ which outpaces the global estimated average of 27%.²

Since the pandemic began, rapid assessments conducted by UN Women using administrative data from police, VAW hotlines and other service-providers suggested an increase in reported cases of violence against women and girls. Measures implemented to limit the spread of the pandemic, such as lockdowns and curfews, have had an impact on VAW risk factors, especially for women and girls who faced multiple forms of discrimination.

Within this context, UN Women commissioned Ipsos to conduct a rapid gender assessment survey on the impact of COVID-19 on women's

well-being and safety in 13 countries across regions. In adapting the surveying methodology to be feasible in the COVID-19 context, proxy measures on experiences of VAW were used to collect data on sensitive topics to reduce the risk to the respondents, and thus may not be directly comparable to other studies conducted before the pandemic.

Having reliable data that was collected in line with methodological, safety and ethical standards, without putting women at greater distress and risk of violence, was critical to informing where policies and programmes can respond to the UN's system-wide efforts to scale up actions to address VAW in the context of COVID-19.

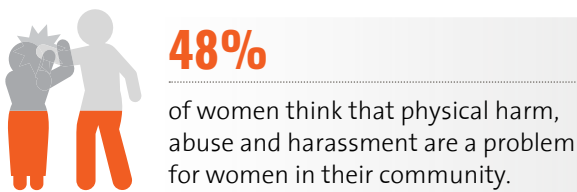
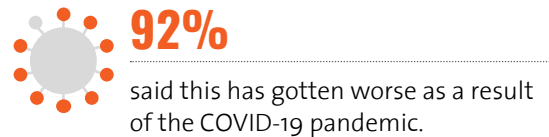
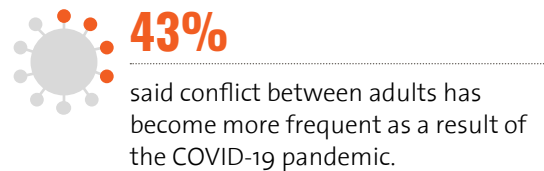
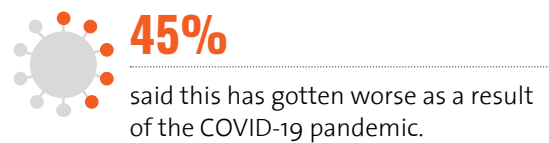
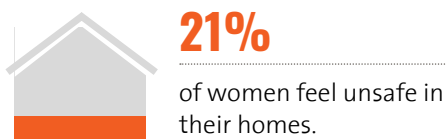
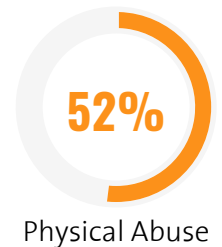
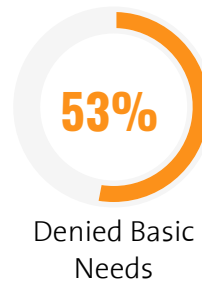
This report details the findings from the survey in Kenya in May 2021. The survey was conducted with women aged 18 and older who had access to a mobile phone – a population is estimated to be roughly 86% of this specific population group in Kenya.³

¹ Kenya National Bureau of Statistics (KNBS). 2014. Kenya Demographic and Health Survey 2014. p. 308.

² World Health Organization (WHO). N.D. [Global Database on Violence Against Women](#).

³ GSM Association. 2020. [The Mobile Gender Gap Report 2020](#).

KEY FINDINGS



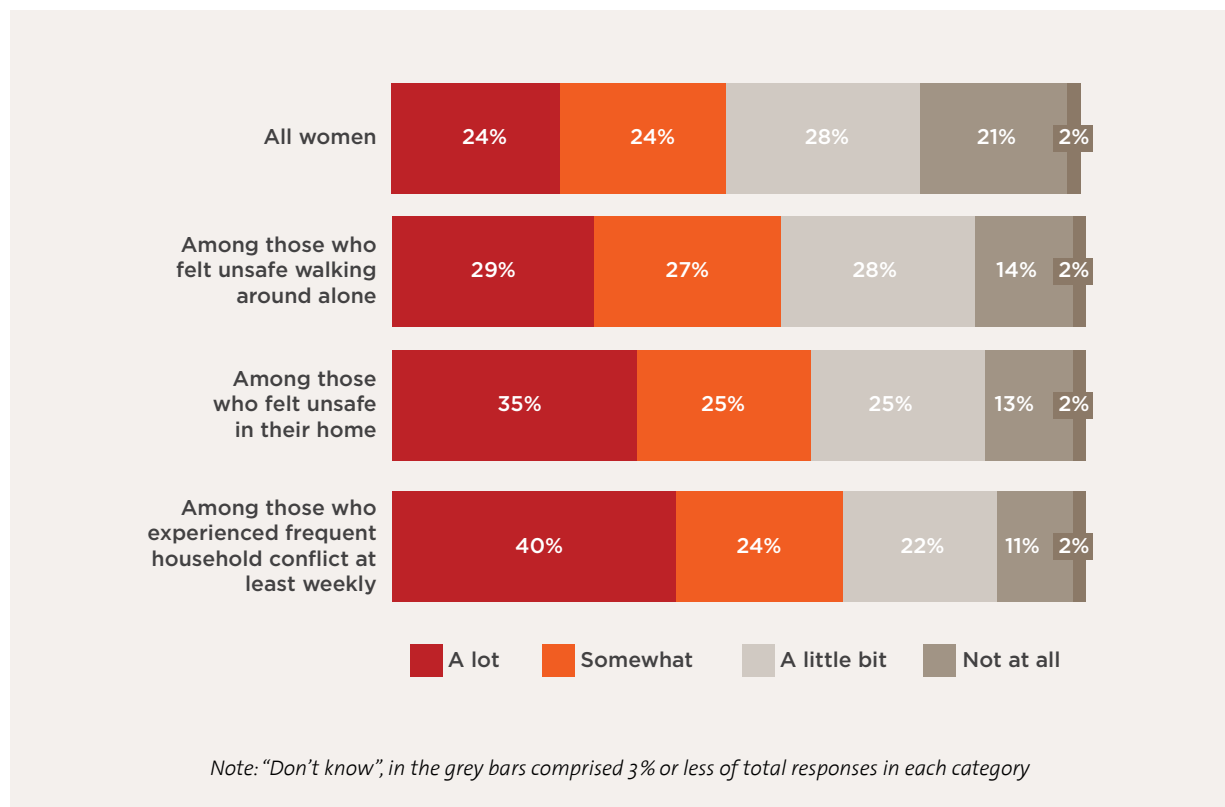
2. PERCEPTIONS OF VIOLENCE AGAINST WOMEN

2.1. Perceptions of violence against women in the community

When asked about physical harm, abuse and harassment in their community, almost half (48%) of women said they believe it is a problem and an additional 28% said it is “a little bit” of a problem.

Physical harm, abuse and harassment in the community were more likely to be perceived as a problem by women who: earn an income, are heads of their household, experience food insecurity, had a decrease in income since the start of the pandemic, and those who experience frequent conflict or felt unsafe in their homes.

FIGURE 1
Extent to which physical harm, abuse, or harassment is a problem in the community



Additionally, about half of women (48%) said physical harm, abuse and harassment has increased in their community since the start of the COVID-19 pandemic. This may be an

outgrowth from stress related to economic or gender norms, as it was less reported by full-time caregivers and those that are likely food secure.

2.2. Proxy measures of violence against women in the community

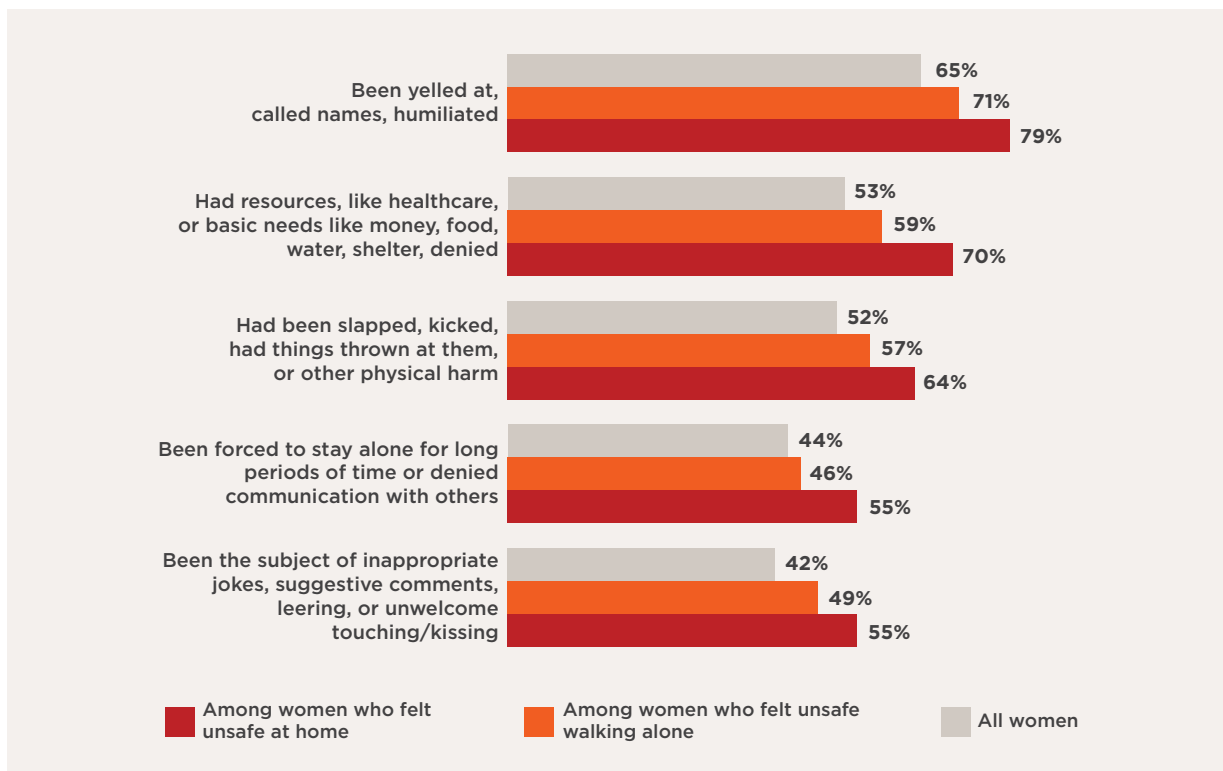
When considering ways to measure violence against women at the community level, it is important to keep in mind the context of this study. Due to the remote nature of this survey, indirect questions were asked as proxy indicators of VAW, meaning it was not possible to distinguish respondent experiences from those of other women in their community or to know whether this violence occurred within or outside of the respondents' household. While data from this study should not be interpreted as prevalence data, it nevertheless provides critical information on the impact

of COVID-19 on women's perception of safety and well-being.

The majority of women (80%) know a woman who has experienced a form of VAW (such as physical harm, denial of basic needs, sexual harassment, restrictions or verbal abuse), or have experienced this themselves, since the start of the pandemic. Women who said they have felt unsafe in their home were more likely to report this.

Experiences and/or knowledge of physical abuse were higher among women who said they feel unsafe, whether it was at home or in public, as well as women who were separated/divorced or in jointly headed households.

FIGURE 2
Percentage of women who reported experiencing or knowing someone who has experienced different types of violence, by their experience of safety



Women who said they or someone they know have experienced a form of VAW were nearly four times more likely to be food insecure (78–80%) compared to women that did not

(61–67%), indicating that structural and economic factors could be a significant driver of violence against women.

3. SAFETY IN THE PUBLIC SPHERE

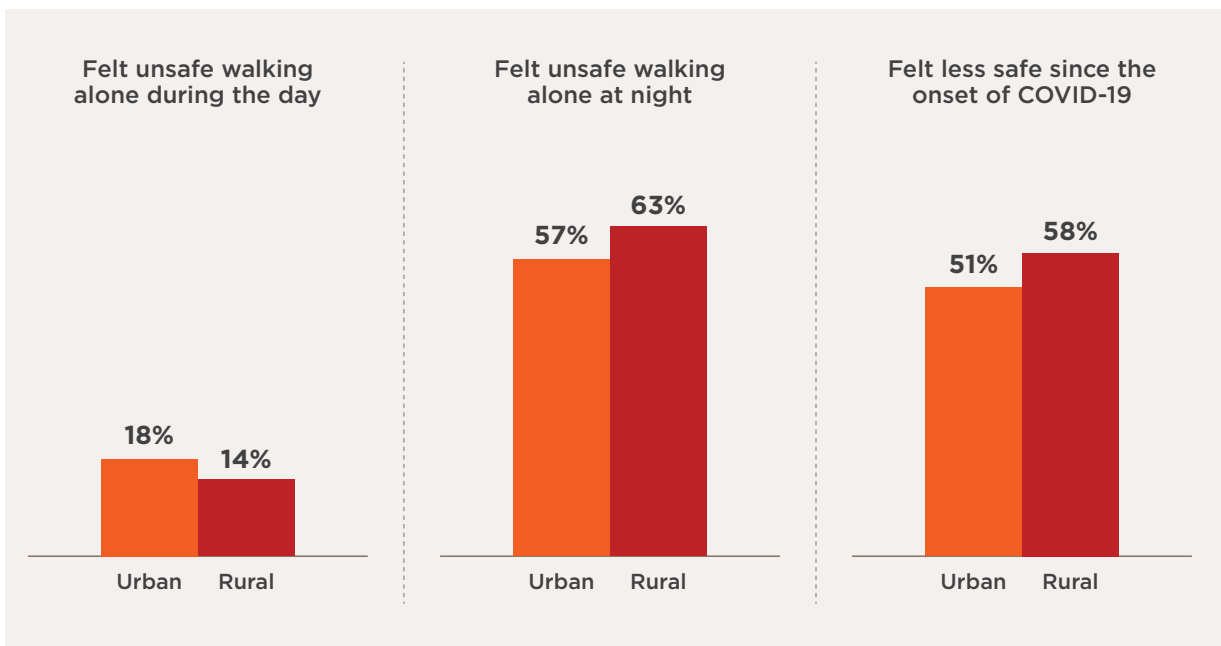
3.1. Personal safety in the public sphere

When out in their communities, the majority of women said they feel safe walking around the areas where they live during the day (84%), but this drops to just 36% when asked the same question about walking alone at night, and over half (55%) said they feel less safe while out at night since the start of COVID-19.

Women aged 60 or older were more likely to feel safe in public than younger women, whether it was during the day or at night.

Experiences of safety also differed across urban and rural areas, with women living in urban areas slightly more likely to say they felt unsafe during the day, and those in rural areas more likely to feel unsafe at night as well as feeling less safe since the onset of the COVID-19 pandemic.

FIGURE 3
Perceptions of safety while out in public, by location



There was also a direct correlation between women who thought harm, abuse or harassment is a problem in their community and

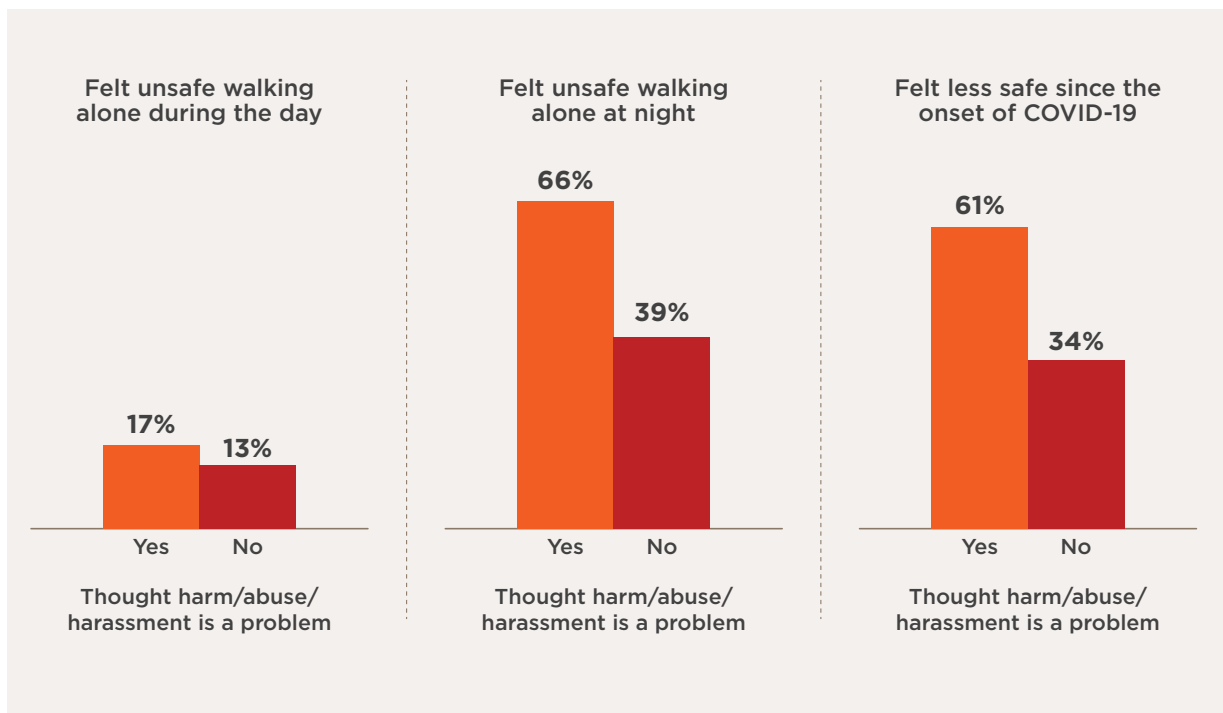
those who reported that their feelings of safety have decreased since the onset of COVID-19.

3.2. Women's perceived safety in the public sphere

There is a clear trend that women's perception of their own personal safety has gotten significantly worse since the onset of COVID-19. But beyond personal experiences, general feelings

of safety within the larger community have also deteriorated. Over half (56%) of women said they think it is common for women to experience harassment and safety issues in public at night, which is consistent with 60% of women who said they feel unsafe at night.

FIGURE 4
Percentage of women who felt unsafe, by their perceptions of safety in their communities



This was particularly the case among women who reported generating an income for their household, perhaps related to the fact that they are more likely to move through public spaces.

The majority of women (80%) expected that women experiencing harassment or abuse in the public sphere would seek help, and more than half (58%) said that they expected women would go to the police.

Although it is clear that women have an increased sense of anxiety and fear outside of the household, this had not stopped most of them from engaging in public. The majority of women (83%) said that they leave their house at least once a week and still see their friends and social groups with either the usual or reduced frequency despite constraints related to the COVID-19 pandemic and shifting feelings of safety.

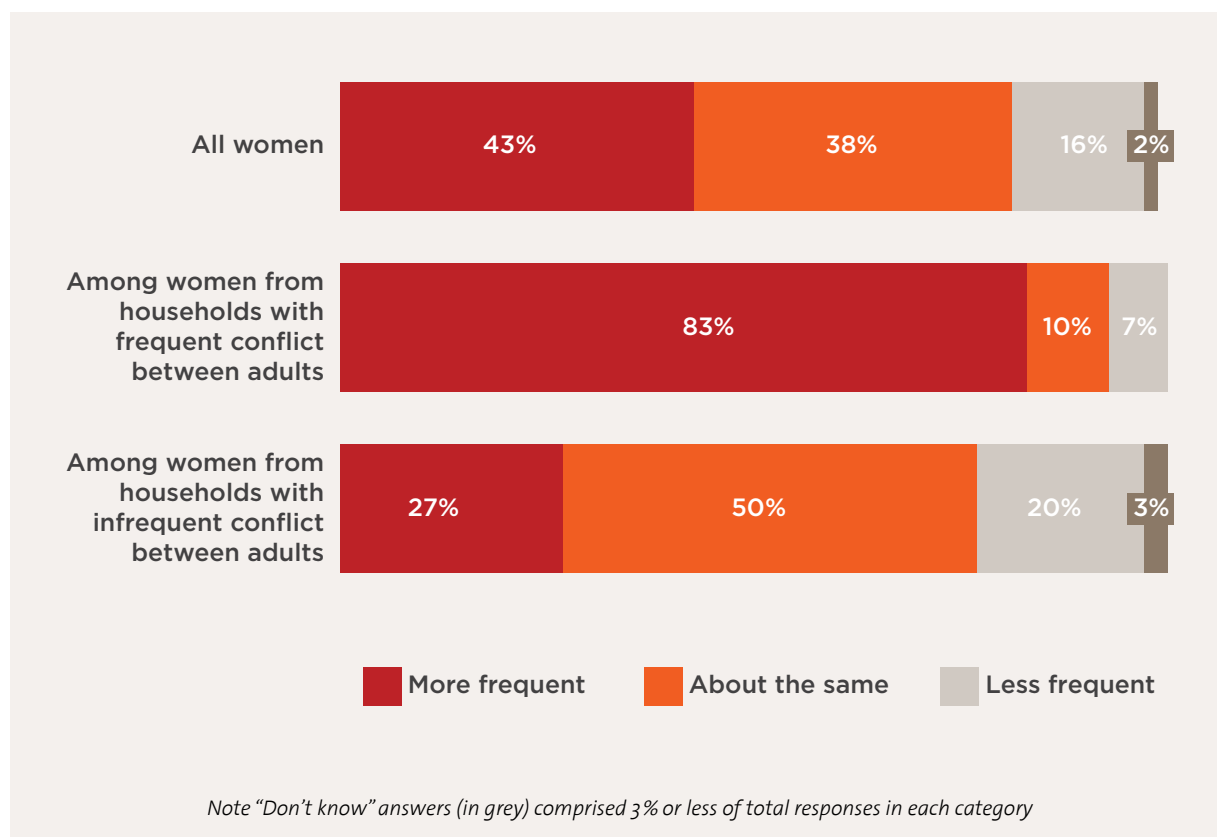
4. SAFETY INSIDE THE HOME

4.1. Personal safety inside the home

When it comes to safety within the household, 21% of women said that there has been conflict between adults in their household at least weekly over the past six months and nearly half (43%) said that conflict has become more

frequent since the onset of COVID-19. Those who experienced conflict more often were more than three times more likely to say that the frequency has increased as a result of the pandemic, suggesting that existing household tensions have been exacerbated.

FIGURE 5
Changes in household conflict as a result of COVID-19

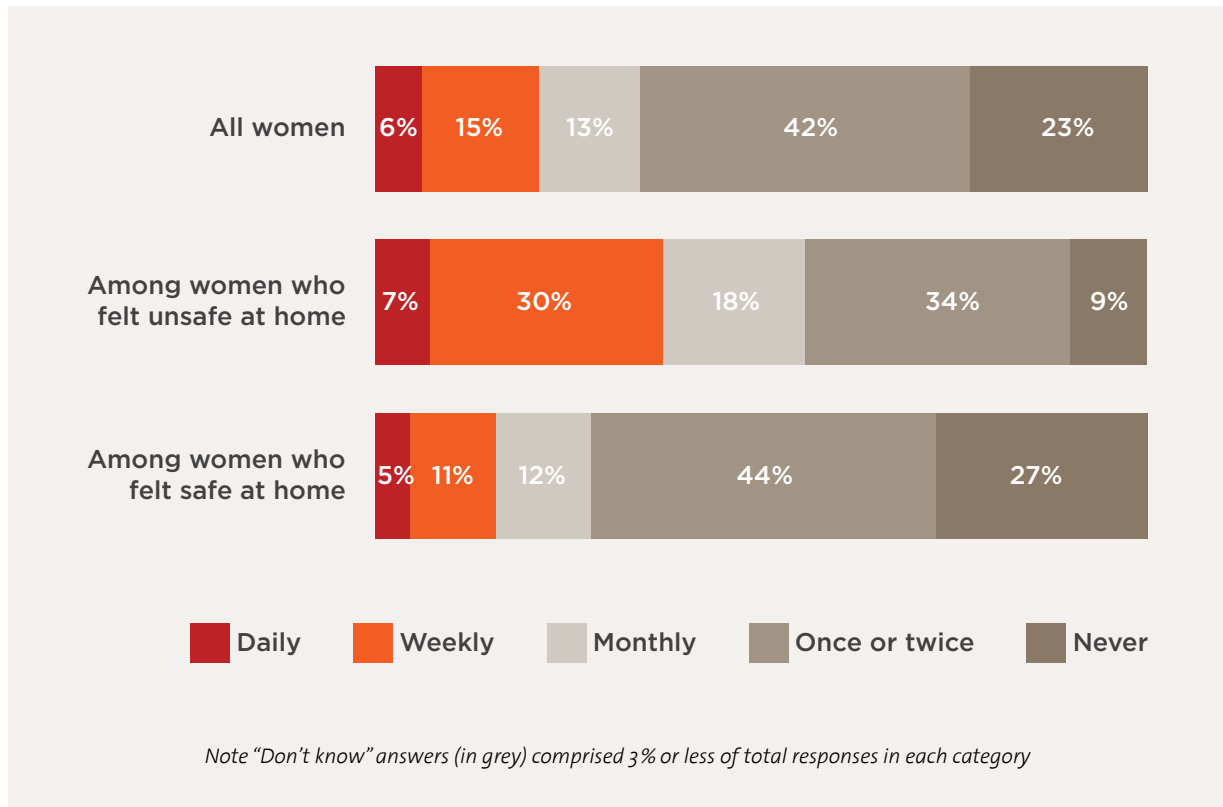


One woman out of five (21%) said they have felt unsafe in their household in the last six months, and 45% of these women said that the COVID-19 pandemic has made things worse.

Additionally, those who experienced frequent conflict (at least weekly) between adults in the household were more than twice as likely to have felt unsafe in their homes.

FIGURE 6

Perceptions of women's safety in the household by frequency of household conflict



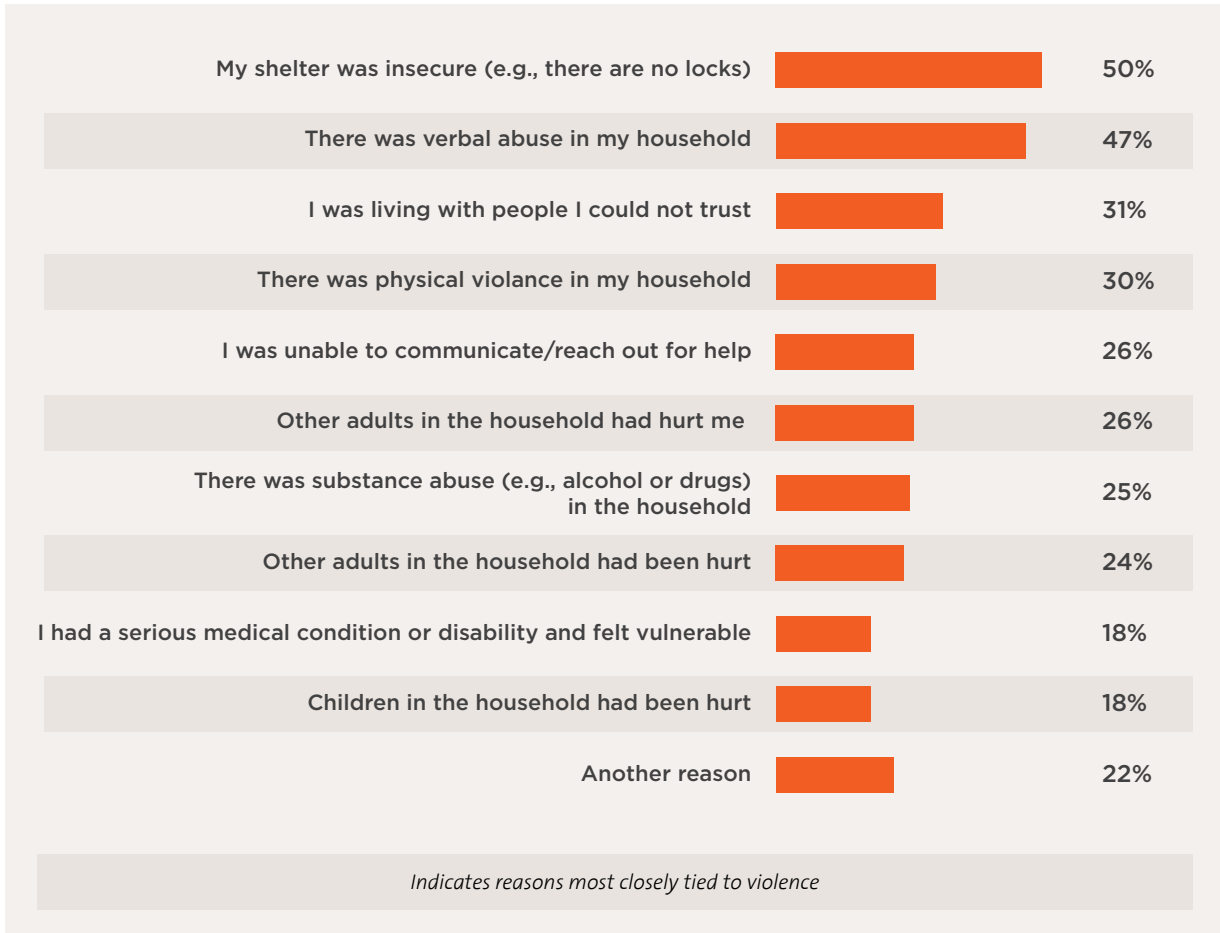
Women who felt unsafe in their homes were more likely than others to be moderately or severely food insecure, to have children, to generate an income, or to jointly head their household – again indicating that external stressors and relational statuses alike can significantly impact household dynamics.

When asked why they have felt unsafe in their homes, women cited verbal (47%) and

physical abuse (30%) as well as issues around trust as the main drivers. Women who said they are full-time caregivers were much more likely than the average to cite verbal abuse as a reason they felt unsafe (75%), while women aged 60 or over were more likely than average to cite physical abuse as a reason they felt unsafe (59%).

FIGURE 7

Reasons for women feeling unsafe in their homes, among the 21% who reported feeling unsafe



Additionally, half of women who felt unsafe at home said their shelter was insecure, indicating a crossover between VAW in public

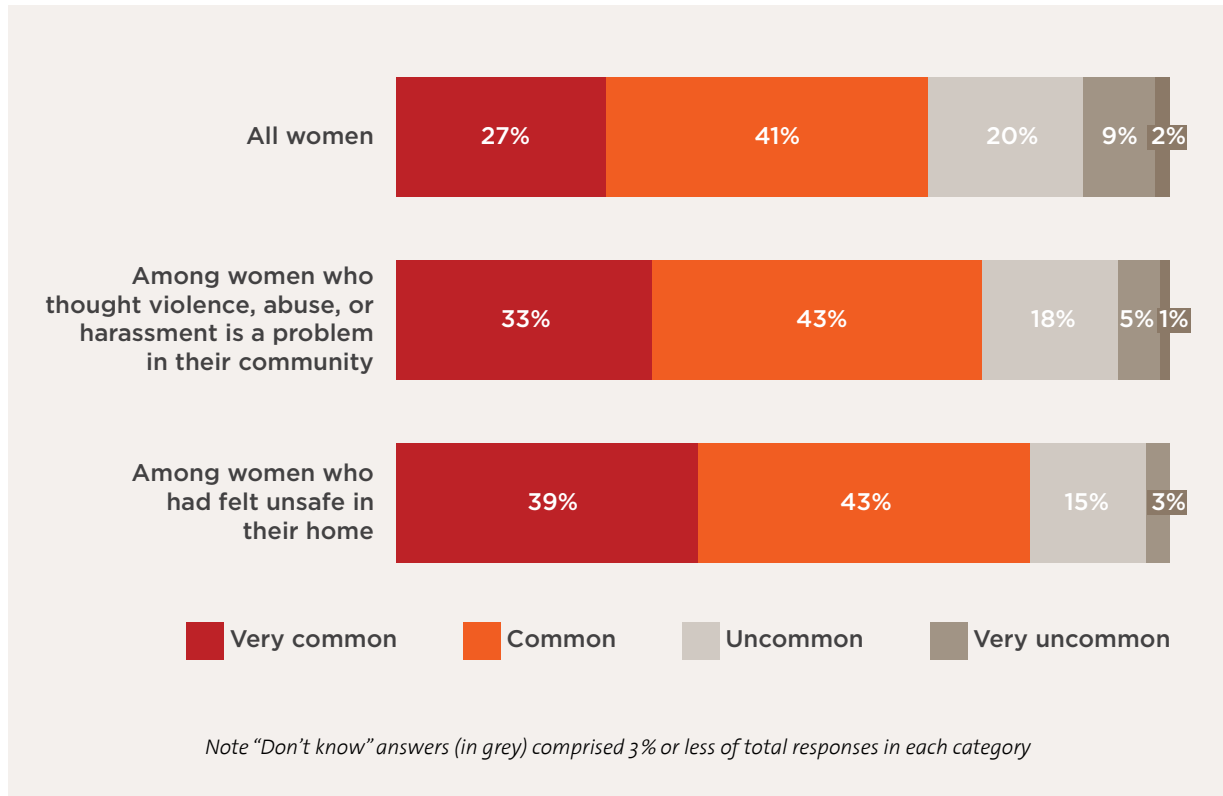
spaces and in the household. This reason was most often given by women that are separated or divorced (71%).

4.2. Women’s perceived safety inside the home

When considering the broader community, 68% of women said they think that the experience of verbal or physical abuse at the hands of a partner is common for women. Among

women who perceived violence, abuse, or a harassment to be a problem in their community, this number increased to 75%. The overwhelming majority of all women (92%) thought things have gotten worse since the start of the pandemic.

FIGURE 8
Perception of partner abuse

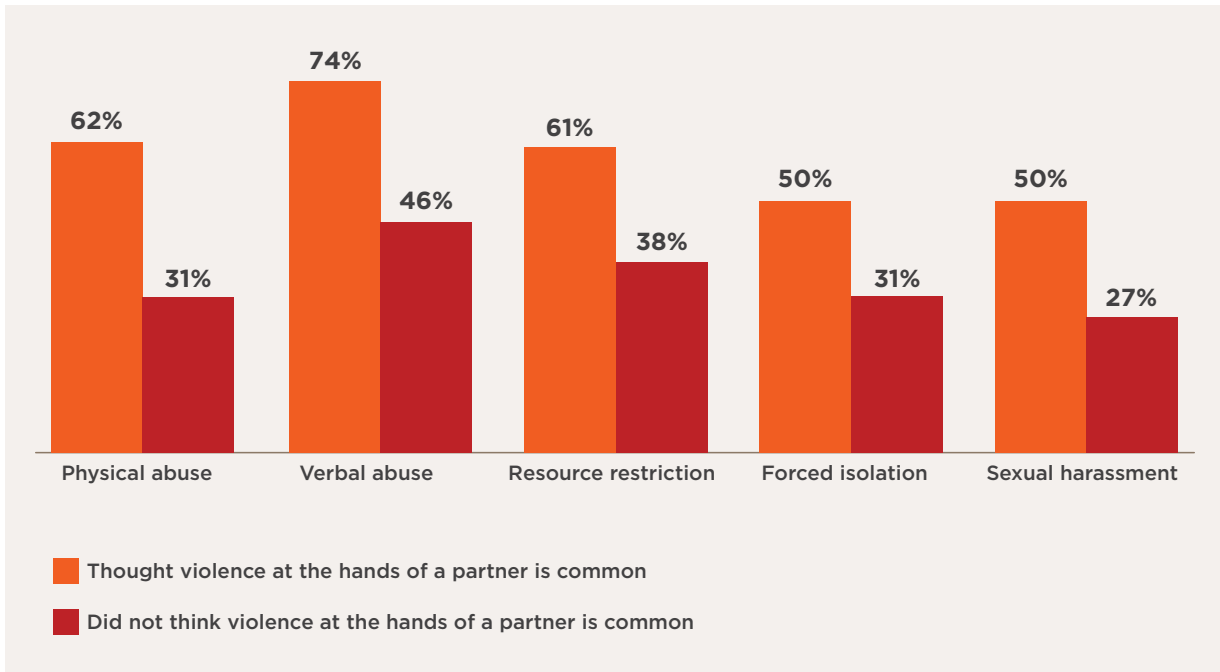


Women respondents that said it is very common for women to experience violence at the hands of a partner were more likely to be food insecure (82% were moderately or severely food insecure; 30% being severely) compared to women who said it is uncommon (66% and 25%, respectively). Additionally, women who

reported feeling unsafe in their own home were much more likely to think that abuse at the hands of a partner is common (82%), as were women who said they or a women they know has experienced any type of violence, although this is particularly pronounced for physical abuse and sexual harassment.

FIGURE 9

Percentage of respondents who reported knowing of or experiencing different types of violence, by whether they thought violence at the hands of a partner is common



These data points suggest that women may be including their own experiences when reporting on the experiences of women in their community, as well as bolstering the evidence-based theory that women who report safety incidents happening within the homes are more likely to think that abuse is common in the community overall.

Similar to experiences of violence outside the home, the majority of women (82%) said they

believe that women would seek out help if they experienced verbal or physical abuse at the hands of a partner. However, the sources of support differed, with only 20% of respondents expecting women to go to the police, and an equal number saying women would seek support from family or women's centres. This indicates that domestic violence may be underreported to authorities in comparison to other forms of VAW.

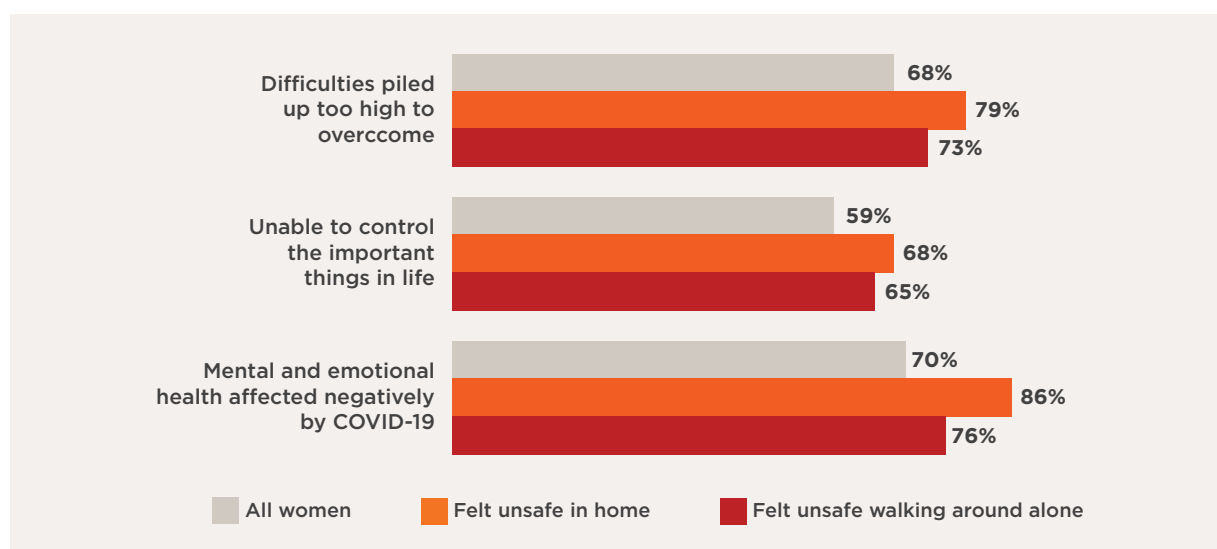
5. IMPACTS OF VIOLENCE AGAINST WOMEN

This study indicates strong relationships between measures of VAW and changes in women's behaviour and feelings of mental and emotional well-being.

Impressions and experience of safety (or lack thereof) may be a major driver of women's perception of problems in their life and their

ability to handle them, as well as an indication of their mental and emotional well-being. Women that said they had felt unsafe, whether it was in their home or in the public sphere, were more likely to report issues with mental health and to say that the COVID-19 pandemic has impacted them negatively.

FIGURE 10
Measures of mental health by feelings of safety in the home and the public sphere



Women who reported experiencing safety issues also said that the COVID-19 pandemic had an exclusively negative impact on their lives at significantly higher rates than women who had not experienced safety issues, whether it was inside or outside the household. Additionally, the majority of women who said that COVID-19 has negative impacts on their mental health were likely to be severely food insecure (31%) compared to those who said COVID-19 has not impacted their mental health (14%). This suggests, as previous reports have found, that the negative impacts of

COVID-19 are felt the strongest by those already experiencing hardship.

The impacts of violence against women in public and private spheres was also observed when analysing women's socialization and movement patterns. Women who reported feeling unsafe in their own home were more likely to have said they see their friends rarely. However, the same patterns were not reflected in questions about movement – women that feel unsafe at home were just as likely as those who do not to leave the house at regular intervals.

6. RECOMMENDATIONS

The impacts of COVID-19 on VAW in Kenya are significant and cannot be ignored. Women in Kenya encounter violence in public and in private spheres, at the hands of strangers and of those closest to them. With around three-quarters of women likely experiencing food insecurity at the time of the study and one in eight respondents saying they had lost income, mostly due to the COVID-19 pandemic, external stressors that can increase the risk of VAW are on the rise.

As a result of the intersectionality of VAW, policy and programmatic interventions required tailoring to the factors driving different experiences of violence. Not only does the type of response that is best suited to address VAW vary based on the specific experiences of women, but the resources they seek out vary as well. This work stresses the importance of partnering with the existing infrastructure that supports women in vulnerable situations to empower communities with the full suite of resources they may need to support women. Considering this, the research supports three recommendations:

1. Interventions that are meant to address VAW should consider how policy interventions in other areas may alleviate some of the root causes of VAW, which are disproportionately felt by women.

The intersection and continuum of VAW calls for a comprehensive policy framework on VAW, which mainstreams the issue and its impact across all policy areas. Some of the associated root causes, as reflected in the survey, are socioeconomic status that leads to vulnerability. More specifically, the results of this survey call to further link economic programmes to initiatives on ending VAW, as

they highlight the reciprocal causal effects of both women's rights' infringements and vulnerability factors. As with any programme implementation, however, it is critical to acknowledge the impacts of changing power dynamics within the household on relational stress between family members, as well as the downstream effects that may result.

2. Trust in existing institutions and community-level infrastructure in Kenya should be capitalized on to bolster women's confidence and feelings of safety while moving around public spaces.

These types of initiatives could help improve feelings of safety for women that are often out in their communities for work or because they are socializing with others. Similarly, improving resources available at local police stations, including providing training or capacity-building, may encourage women to report violence, abuse or harassment that happens in their communities. Police departments may be able to serve their communities more effectively by providing dedicated staff who are familiar with VAW to respond to complaints of this nature.

3. The challenges associated with intra-household conflict will require programmatic interventions that are sensitive to traditional gender roles and as well as the limits of trust in institutions.

Centralized resources may not be accessible for all women experiencing violence from a partner or other household member, not only because domestic violence is often considered a private matter but also because of a lack of accessibility and fear of repercussions. Such cases require careful placement of resources

in more informal channels where women feel comfortable reporting – for instance, through women’s centres and community leaders who are trained on how to handle VAW reporting. As with programmatic gender mainstreaming, it is important to consider the impacts

that interventions may have on particular external stressors, such intentional or accidental shifting of gender roles and norms that could easily do more harm than good if not carefully accounted for.

7. METHODOLOGY

The survey was fielded via Computer-Assisted Telephone Interviewing using random-digit dialing to mobile numbers between 30 April–21 May, 2021. The total number of completed interviews was 1224. During the survey period, Kenya’s COVID-19 caseload was falling out of a third wave (where case counts ranged from roughly 500 to 1,000 per day). However, areas around Nairobi were put into lockdown and experienced nightly curfews during the uptick of the third wave in March–April. Curfews were scheduled to continue until the end of May 2021.

The sample was drawn via random-digit dialing among the population with mobile phone numbers, so the sample population is limited to women aged 18 or over with mobile phone access. Women over the age of 60 were also specifically targeted with an existing database to ensure adequate coverage of this age group. The percentages for each age group in this survey sample match the percentages for each age group from Kenya’s Census data.⁴

Age group	Percentage of adult women based on Census data	Percentage of adult women from sample data
18–29	40.3	40.3
30–39	24.1	24.1
40–49	15.0	15.0
50–59	9.3	9.3
60+	11.4	11.4

4 KNBS. 2019. Kenya Population and Housing Census. Vol. 3. <https://www.knbs.or.ke/?wpdmpro=2019-kenya-population-and-housing-census-volume-iii-distribution-of-population-by-age-sex-and-administrative-units>

DEFINITIONS

Community: A term that is referencing the geographic area in which the respondent lives.

Food insecurity: This study used the World Food Programme/Food and Agriculture Organization formulation to measure food insecurity with an eight-statement battery of questions. These data can be used to establish estimates of the proportion of the sample who were moderately or severely food insecure, which can also be disaggregated by other variables of interest through the use of the FAO Food Insecurity Experience Scale (FIES)⁵ module. Any references in the report to prevalence of moderate or severe food insecurity represent estimates of the prevalence and should be interpreted as such.

Partnered: A term referring to women who were married or living/cohabiting with a partner.

Violence against women: Any act of gender-based violence that results in, or was likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

5 The FIES software developed by FAO can be found online at <https://fies.shinyapps.io/ExtendedApp/>

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Produced by the Women Count programme
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