Country Update

Azerbaijan
(February 13, 2021)

Context and government response:
As of February 13, 2021, Azerbaijan has registered 231,840 confirmed COVID-19 cases, including 3,173 deaths. In response, the government has announced a special quarantine regime, which included social distancing, the prohibition of all meetings of more than 10 people, restriction on travel within the country, and closure of borders. All major meetings and events have been cancelled and schools and universities have been closed across the country. Many government agencies have moved their work online, and the non-essential businesses, such as cafes and restaurants, have closed. The measures were partially lifted in April 2020, but then reinstated in June 2020, with Azerbaijanis “only allowed to leave their homes once a day for a maximum of two hours after receiving permission via text message” from the authorities. As of February 1, 2021, the lockdown regime is expected to remain in effect until April 1, 2021. However, restaurants, cafes, and schools have opened.

Azerbaijan kicked off a mass COVID-19 vaccination campaign on January 18, 2021, using the Chinese vaccine, being the first country in the Caucasus and Central Asia to do so.

Impact on women and on peace and security:
The data of the UNFPA suggest that women in Azerbaijan were disproportionately affected by the pandemic. Women constitute 66% of frontline healthcare workers in Azerbaijan. Young women are also the majority of employees of grocery stores and other “essential businesses” that have remained open throughout the pandemic, which increases their exposure.
Temporary and migrant workers, the majority of whom are women, were disproportionately affected by businesses closures, which led to job cuts. This increases the likelihood that women will take on high-risk work for their economic survival.

The burden of unpaid care work on women has also increased during the lockdown, mostly due to increased demands of childcare and homeschooling. As one woman interviewed by GNWP partners put it: “I am exhausted, I have a feeling that this will never end. I am tense and nervous all the time, and this is where the exhaustion comes from.” Another interviewee, who works as a teacher noted that fathers rarely support their kids with online/homeschooling: “It is only mothers who try and work hard. They are not familiar with technologies and don’t have computers, but they still try to do something [to help their kids]. Now all the fathers are at home, but all these tasks fall upon the mothers’ shoulders.”

The government has introduced economic packages to support the most vulnerable individuals and families. Women constituted 45% of the beneficiaries of the State assistance during COVID-19. A National Action Plan to increase women’s employment has also been developed by the government to address some of the economic challenges faced by women, in particular the issue of unpaid care work, and underemployment among women. The Plan sets out to create 90,000 additional jobs by the end of the year. However, civil society has criticized the government for failing to implement a substantive program to assist the victims of domestic violence and downplaying the actual scope of the issue.

Civil society has also expressed concerns that the financial burden that the COVID-19 crisis is placing on the government will lead to the delay in the adoption of the NAP on UNSCR 1325 and the fulfilment of the government’s obligations under the WPS agenda. GNWP’s partners confirmed that a lack of access to healthcare, unemployment, and domestic violence have been even more substantial among internally displaced women. Official statistics are not available at this moment.

**Response by women peacebuilders:**
GNWP’s partners have reported that local NGOs played a vital role in providing assistance to women affected by domestic violence, as the government’s efforts are predominantly
concentrated on the direct health consequences of the pandemic. One of the highlighted initiatives was the distribution of communications materials for pregnant women and health workers in partnership with UNFPA.