Open Call for Submissions

**Purpose**: To spotlight the gendered impact of COVID-19 on health

**Estimated Timeline**
1 December 2021 - ≤ 500-word abstracts
- Please consider submitting abstracts to sarah.ssali@mak.ac.ug
- 1 January 2022 - notification of invitation to submit full papers
- 1 March 2022 - submission of full papers
- 1 June 2022 - review process complete
- Publication of articles as the review process ends

**Gender, Health, and COVID19.**
COVID-19 occasioned several disruptions. In this collection of articles, *Advances in Global Health* plans to highlight gendered issues in the context of the COVID-19 pandemic. Some examples include the effect of the pandemic on sexual and domestic violence, mental health, stress, reproductive health services, and the indirect social and economic impacts, e.g. caring for children at home out of school. In addition, we are interested in submissions that discuss the impacts of the epidemic on the ailing health care systems, with potential implications for routine and reproductive health services. The lockdowns that characterised the first wave were associated with reduced access to health care, particularly reproductive and chronic health care services, in addition to destroying incomes needed for paying for care, and other essentials such as food and housing. We also know that crises such as COVID-19 can worsen existing gender inequalities in access to health care, which is likely to be compounded when intersected
with other axes of marginalisation such as poverty, producing different gendered experiences between females and males.

This special collection of papers will transcend the usual reduction of gender and health issues to reproductive health care services to explore the different ways the COVID-19 crisis has impacted gender and health. This entails looking at gender issues in health across the entire spectrum, from the household to the facility, from a multidisciplinary perspective. Critical questions of concern include:

1. What gender and health issues were observed with the COVID-19 crisis? This could relate to access to care, transport challenges, chronic illnesses and limited access to supportive care, water and sanitation, domestic violence, and more.

2. How did these concerns play out for different classes of males and females? For example, did poorer women suffer more than their wealthier counterparts? How about more impoverished men who failed to provide for lack of income?

3. How did COVID-19 affect reproductive health? For example, did maternal mortality increase or reduce, and did contraceptive use change with a commensurate rise in unplanned pregnancies in different populations?

4. How did COVID-19 affect gendered access to health care services? For example, did the lockdowns introduce longer distances and transport challenges? Did the need for transport permits cause more people to suffer in their homes?

5. How were these concerns experienced by different classes of men and women from different parts of the world? For example, did poorer males and females suffer more limited access to care because of reduced income?

6. Are there any observed opportunities for gendered dimensions of health brought about by the COVID-19 crisis? For example, has the race to increase health care services improved health access for the most vulnerable men and women?

7. Gender issues in access to chronic health care. Supportive health care clinics play a significant role in encouraging people with chronic health conditions to adhere to treatment. However, COVID-19 is reported to have disrupted their functioning. How gendered was this disruption, and with what implications?
8. Gender, Disability, and COVID-19: How were the lockdowns experiences by the less able-bodied persons? How did they access care in the context of lockdown?

9. Gender, Youthfulness, and COVID-19: The COVID-19 restrictions limited schooling for many children in the world. Many reports indicate that many young girls became pregnant and will never return to school. What research exists? How were young girls' reproductive health safeguarded?

10. Refugee health in the context of crisis: The COVID-19 global disruptions affected aid flows to refugee settings. How did this affect access to health care for the refugees? How gendered was this care?

**Practicalities**

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The special introductory section on **Gender, Health, and COVID19** will be published in the **SDG 5 (Gender Equality) Section of the Advances in Global Health** journal. The special issue will publish full paper submissions. Publication guidelines can be found at https://online.ucpress.edu/agh/pages/submissions

**About the journal**

"Advances in Global Health Journal," a peer-reviewed, open-access, online-only journal, seeks to take a new approach to publishing research in the field of global health by aligning the journal with several of the United Nations Sustainable Development Goals. The journal is a platform to promote scientific discovery, debate, and discourse that eventually leads to improved health worldwide. The journal's editor-in-chief is Dr. Craig Cohen of the University of California, San Francisco. The journal is led by five senior section editors focusing on key UN SDGs. You can read more about the journal at https://online.ucpress.edu/agh. The journal welcomes submissions of several different article types, including traditional research articles, letters & short reports, opinion & perspective pieces, and reviews and syntheses.
About the SDG 5 (Gender Equality) Section of the *Advances in Global Health Journal*

**Section Editor:** Assoc. Professor Sarah N. Ssali, Makerere University

With regard to SDG 5, the journal is interested in the interface between gender equality and global health and how it is shaped by context. This series is anchored in SDG5, bringing a gender lens to global health concerns. Specifically, it is interested in how gender relations affect health and what can be done to achieve gender equality as spelled out in SDG5. It welcomes articles either from or about gender and health from different parts of the world. Articles detailing experiences of the gender health interface from LMICs and context-specific interventions to achieving gender equality regarding health are highly encouraged.