

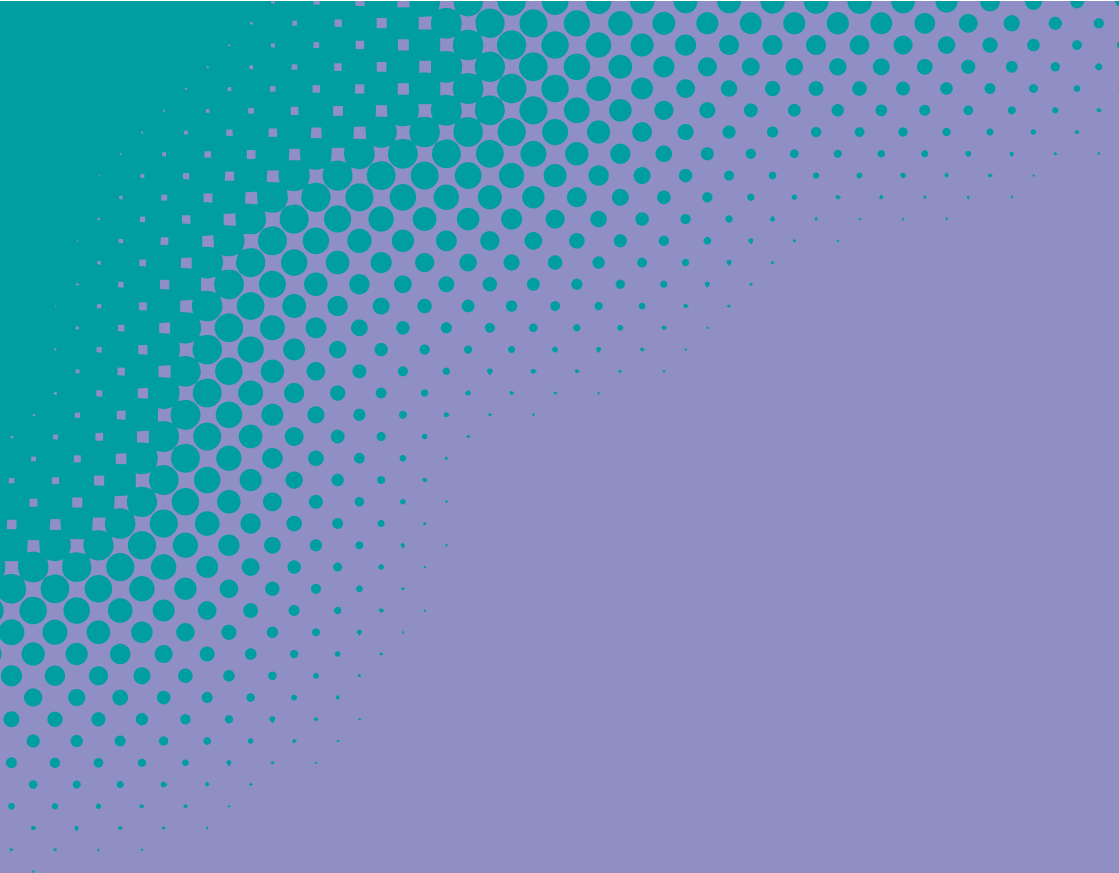
THE GLOBAL
INSTITUTE
FOR WOMEN'S
LEADERSHIP

KING'S
College
LONDON

Essays *on* Equality

*Covid-19 edition: Global &
intersectional perspectives*

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Foreword



Julia Gillard
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Minister of Australia
and Chair of the
Global Institute
for Women's
Leadership

Gender equality is both an urgent economic goal and a timeless moral imperative, yet the pandemic has placed hard-fought gains for women's empowerment under threat. Almost two years into the crisis, Covid continues to expose deep-rooted inequalities in our social, political, and economic systems, while simultaneously underlining society's reliance on women, both on the frontline and at home.

This is a critical moment in which to learn best practice from each other in order to build fairer and more inclusive societies in the wake of the crisis. To this end, the Global Institute for Women's Leadership at King's College London recently conducted research exploring gender pay gap reporting in six countries, taking an in-depth look at what works and what doesn't and offering actionable recommendations to provide a clear blueprint for decision-makers. Similarly, this volume of *Essays on Equality* takes a diverse and global perspective, exploring how different countries have responded to the pandemic, what we can learn from their policy approaches and how women around the world have been affected.

Building on the previous edition, which explored how we can achieve a feminist recovery from the pandemic, this issue delves deeper into the impacts of Covid on specific groups of women – including single parents, key workers, and women in non-standard employment – and offers solutions on how to support them. After all, the response to the pandemic is a chance to rectify long-standing inequalities and build a more resilient world that works for everyone.

Julia Gillard

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Introduction



Rose Cook
Senior Research
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The Covid-19 pandemic, policy responses, and resultant economic crisis are having disproportionate impacts on women, threatening to reverse decades of progress on gender equality. Going forward, public policy has the power to either make these impacts worse or mitigate them by developing gender-sensitive solutions.

In 2020, the Global Institute for Women's Leadership launched a research project, *Gendering the UK's social policy response to the Covid-19 crisis*, funded by the Economic and Social Research Council,¹ to explore the extent to which the policy response to Covid addressed its many gendered impacts and inform the development of feminist social policy approaches in the Covid-19 era. This special edition of Essays on Equality was borne out of this research and focuses on global and intersectional responses to the pandemic.

The gendered impacts of the pandemic have been felt around the globe, but the specific contours of these impacts vary substantially across countries and there has been a similarly diverse international policy response. Through our research, we brought together a global network of researchers, activists and policymakers, who were dedicated to documenting these impacts and scrutinising their countries' Covid policy responses. The essays in this collection draw on this detailed country expertise to offer invaluable insight into how women in different societies were affected. The essays take an intersectional approach, broadening an often simplistic focus on women as a homogenous group by examining the pandemic experiences of specific groups of women – including single mothers, pregnant women, migrant women, and indigenous women – and the adequacy (or inadequacy) of policy responses in addressing these.

Our own research uncovered serious gendered consequences and flaws in the UK policy response to the pandemic. For instance, studying gender differences in experiences of the UK furlough scheme – a job protection scheme – in the

early months of the pandemic, we found that men returned to their previous working hours at a higher rate than women, who were more likely to still be out of the workplace months after accessing government support. Furloughed women also had lower perceived job security and financial security than their male counterparts.² We also studied the design of job protection schemes across Europe and found that the majority of schemes imposed various gendered barriers to access and adequate support, having seemingly been designed with a standard (male) worker in mind.

While our research focused primarily on employment, as the essays in this collection make clear, Covid's gendered impacts and policy responses are diverse and wide-ranging, going far beyond anything we could possibly document in a single research project. Our hope is that this special edition of Essays on Equality is a way to go beyond our own findings and make clear the multiple, as yet under-explored gendered challenges associated with the pandemic.

The experts featured in this collection put forward many specific policy proposals – such as tackling the discrimination faced by single mothers, helping employers protect pregnant women, and providing legal protections for migrant domestic workers – but also propose a more profound change in how we structure the institutions of society to foreground care and redistribute power and voice. But, as the essays highlight, there are many questions still to be answered. Chief among these is how to enact genuine and meaningful change rather than the common practice of paying lip service to gender inequality without sufficient commitment or investment.

I hope you find these essays enlightening and informative. If you'd like to pick up any of the themes here, or have any other thoughts, please do get in touch with the GIWL team at giwl@kcl.ac.uk.

Support, but for whom? The hidden gendered barriers to Covid job protection schemes



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and Employment
Research Centre

Since the Covid-19 crisis began, many countries across the globe have implemented some version of a job protection scheme alongside social distancing and business closures.¹ These schemes, wherein the state supports a proportion of the worker's salary while they are unable to work, are intended to help workers retain jobs. An estimated 50 million workers in Europe were participating in job protection schemes in April 2020.² It is now well known that the impact of the Covid-19 pandemic has been highly gendered across the globe due to its effects on the customer-facing industries in which many women work, often in low-paid and non-standard jobs, and due to the additional burden of unpaid care work caused by school and childcare closures. So, did job protection schemes acknowledge and respond to these gendered realities?

Low pay

Women are over-represented among the lowest-paid workers in the labour market, and many low-paid workers were placed on job protection schemes due to impacts on their industries. As job protection schemes usually don't pay the worker's full salary, people on low pay were particularly vulnerable to economic insecurity while on a scheme.

The most equitable approach to supporting low-paid workers is means testing, whereby those on the lowest incomes receive a higher proportion of their income than those on higher salaries. However, only a few countries – Austria, France, and Norway – did this. While a few guaranteed the minimum wage, most countries' job protection schemes had no provisions for low-paid workers.

Previous research has shown that regulations around minimum pay standards are important for equality and stop abuses by employers.³ There is already evidence from the UK that low-paid workers were more likely to receive the lowest possible wage replacement rate while on the furlough



scheme,⁴ and that women were more worried about finances while on furlough.⁵

Non-standard employment

Job protection schemes in many countries were extended to accommodate the increasing number of workers in non-standard employment, including temporary and agency workers, and part-time workers, even when such workers were usually not entitled to employment and social protection. This was an unprecedented, positive step in terms of the inclusivity and gender-sensitivity of these schemes.

However, notable in Austria and Germany was the exclusion of marginal employment, or “mini-jobs”. Mini-jobs are typically low-wage jobs in the service industry with poor compliance with labour regulations. They are also a major category of employment for women, especially working mothers. Their exclusion from Covid-19 job protection is therefore likely to exacerbate gender inequalities. Some countries, such as Croatia and Hungary, also made schemes

unavailable to workers in part-time employment, a move that affects women more than men. These exclusions reflect a focus on the preservation of male jobs and the idea that women's participation in the labour force is optional.

Finally, not usually explicitly mentioned, but highly relevant from a gender point of view, is the coverage of informal work, most notably domestic workers. Domestic workers working in private households, many of whom may have lost work during the crisis, are almost exclusively women and are almost exclusively barred from accessing job protection support.

Female-dominated sectors

The economic impact of the Covid-19 crisis has been highly sectoral in nature – industries involving face-to-face customer contact, social activities, and travel have lost out the most.⁶ For example, in the UK, the accommodation and food sectors had the highest number of jobs at risk.⁷

So, do job protection schemes consider this gendered, sectoral impact? Mostly, they don't – schemes apply the



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 "The majority of schemes contained gendered barriers to access and sufficient support and were seemingly designed with a standard (male) worker in mind"

same support across workers in different industries. Additional support for workers in particular industries has, in some cases, been negotiated through collective bargaining. In Germany, for workers in the hotel and restaurant sectors, the job protection salary replacement was raised to 90 per cent of the net monthly wage.

Unpaid care work

Faced with school and childcare closures, abundant evidence now shows that women have taken on the majority of additional unpaid labour during lockdowns,⁸ which can lead to women disengaging from the labour force.⁹

In this context, during the strictest lockdowns there was clearly a need for gender-sensitive policy design within job protection schemes targeted at supporting women's, and especially mothers', continued employment. This hinges on the approach to working hours taken by the scheme, as well as whether childcare responsibilities are considered a valid reason to be unable to work.

In some countries, such as Hungary, a certain number of working hours needed to be maintained for pay to be subsidised. This inflexible approach would have been difficult to manage alongside full-time care responsibilities. In France, however, having full-time care responsibilities was considered a valid reason to access a job protection scheme full-time. This approach is probably the most gender-sensitive,¹⁰ since the worker accessing the scheme for childcare purposes will receive support on the same terms as a worker who has accessed the scheme for employer-determined reasons.

Overall, although there were some promising approaches to job protection support, the majority of schemes contained gendered barriers to access and sufficient support and were seemingly designed with a standard (male) worker in mind. This is likely due to women being under-represented in decision-making processes, gendered assumptions about

women's participation in paid and unpaid care work, and the limited use of gender-sensitive policymaking infrastructure, such as gender-disaggregated data.

Future data and analysis will reveal any long-term impacts of these exclusions on women's employment. The TUC has proposed a continued, improved job protection scheme in the UK to be used at times of economic disruption, and in future schemes like this more attention should be paid to their role in mitigating gender-specific impacts of economic downturns and disease outbreaks.¹¹ Such an approach should be informed by equality impact assessments of such measures,¹² which take into account gendered segregation in the labour force, and should include provisions such as specific job protection for those with full-time care responsibilities, providing means-tested support for low-paid workers, and making support available to workers on a wide range of non-standard contracts. Such measures will ensure that women are properly supported by job protection schemes in the future and prevent inequitable exclusions.

A shadow pandemic: addressing the crisis of gender-based violence in Brazil



Paula Tavares
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Group

As the world was hit with Covid-19, a “shadow” pandemic emerged, threatening the lives of millions of women and girls. While countries went into lockdown and stay-at-home orders were put in place, warnings of increased violence against women began echoing around the world. The collateral damage of measures adopted to curb the health crisis became clear almost immediately – and it was very much gendered. Many women’s homes, far from providing shelter, simply exposed them to a whole new set of risks.

Even before Covid, gender-based violence was a widespread problem. Estimates suggest that one in three women globally – nearly 736 million – experience physical or sexual violence in their lifetimes, mostly by an intimate partner.¹ Despite the existence of one of the most progressive domestic violence laws in the world, Brazil has the fifth-highest rate of femicide in the world – and the pandemic has intensified this issue in an unprecedented way.

.....

"Increased economic and emotional stress, social isolation, and mandatory confinement with potential abusers... created the perfect storm for escalating abuse within four walls"

.....

Health and economic crises tend to increase the risks of violence against women, particularly in countries where this is already an issue and where there are high levels of gender inequality, such as Brazil. Data from the last 18 months has confirmed such lessons. Increased economic and emotional stress, social isolation, and mandatory confinement with potential abusers and with children at home created the perfect storm for escalating abuse within four walls. At the same time,

women were left with limited access to critical health, security, and justice sector services, resulting in serious threats to lives. The result has been tragic.

In Brazil, like the rest of the world, spikes in calls for help quickly made headlines. In the early months of the crisis, government authorities and women’s organisations in

.....
22%
spike in femicides
.....
One woman was killed
Every 6.5
hours
due to gender-based
violence
.....
2/3
of the women killed
were of Afro-descent

Canada, France, Germany, Spain, the United Kingdom and the United States, among others, indicated increased reports of domestic violence and heightened demand for emergency shelter, while helplines in Singapore and Cyprus registered an increase in calls by more than 30 per cent.²

In Brazil, data from the first two months of confinement measures pointed to a 22 per cent spike in femicides and a 27 per cent increase in calls to the national violence against women helpline. At the same time, in-person reporting of cases at police stations and requests for emergency protection orders declined by around 25 per cent, reflecting the limited access and mobility constraints experienced by those under threat.³ As the months went by, despite the relaxing of stay-at-home orders and the adoption of policies to enhance support for survivors, rates of violence remained high. Throughout 2020, 1,350 cases of femicide were recorded in Brazil – meaning one woman was killed every six and a half hours as a result of gender-based violence.⁴

The impacts of Covid-19 were disproportionately felt by more disadvantaged groups

A closer look from an intersectional viewpoint shows an



even starker image among more vulnerable groups, with youth and Afro-descendent women further bearing the brunt of the violence. Over one-third of femicides in Brazil in 2020 were among women aged 18 to 29, while nearly two-thirds of women murdered were of Afro-descent. The numbers reflect larger and pre-existing socioeconomic inequalities, which often result in disadvantaged groups being disproportionately impacted. Indeed, despite emergency measures, the largest economic shocks of the pandemic have been felt among the already economically vulnerable population and especially by women and girls, who are generally earning less, saving less, and holding insecure jobs or living close to poverty.⁵

Importantly, while initial spikes in domestic violence were associated with stay-at-home measures, restrictions on mobility and access to services, in the later stages of the pandemic, it was job losses and constrained finances that contributed to increased abuse within the home and declines in reporting.⁶

As we continue to experience the impacts of Covid and the uncertainty of when the pandemic will end, addressing and mitigating its gendered consequences is critical to ensure women are not left behind.

Addressing gender-based violence requires targeted laws, policies and interventions

Strong legislation is a key first step to addressing the issue. Brazil's Maria da Penha Law, adopted in 2006, is considered one of the three most advanced domestic violence laws in the world. It covers all forms of violence and some of the measures it implements include mandating the adoption of policies to prevent violence and protect and support survivors, establishing specialised agencies and protection orders, and promoting educational programmes with a gender lens. However, as violence rates in Brazil before and during Covid continue to show, more needs to be done.

As we learned from monitoring policies adopted by different countries, including those in Brazil,⁷ targeted policies and interventions for short-term relief should

involve strengthening response and support systems, including helplines, psychosocial support and alternative accommodation for women; ensuring minimum budgeting, and human and financial resources to maintain essential services for violence survivors; and expanding awareness and access to information.

In addition, technology-based solutions have proven critical during Covid-19. In particular, innovative adaptations were quickly implemented throughout Brazil to enable access to protection orders, the court system, psychological support and legal aid through digital platforms that will remain in place.

"The global cost of violence against women has previously been estimated at roughly \$1.5 trillion"

At the same time, medium- to long-term approaches to addressing gender-based violence need to focus on prevention, protection and ensuring more effective redress. It is also imperative that they tackle systemic economic and social inequalities; ensure access to education, social protection support, and decent work; and change discriminatory gender norms.

The global cost of violence against women has previously been estimated at roughly \$1.5 trillion.⁸ But this was prior to the Covid crisis, and is now surely likely to grow. If unaddressed, the shadow pandemic of gender-based violence will not only cost lives, it will also compound the economic impact of the pandemic. If countries have any hope of "building back better," it is imperative that women play an active role – and that clear and measurable steps are taken to address gender-based violence.

Fixing a broken model: how can the EU address the stark gender inequalities laid bare by Covid?



Esther Lynch
Deputy General
Secretary,
European
Trade Union
Confederation

Across Europe, women have suffered disproportionately during the pandemic due to longstanding failures to tackle gender discrimination and create a fairer social and economic model. The paradigm guiding our economies for the past four decades has led to a crisis of insecurity, hitting women hardest and threatening to reimpose the gender stereotypes of the 1950s.

Hard-won gains of recent decades are under threat, due in part to a creeping backlash against women's rights which was already under way in some countries.

If anyone believed that gender equality was close to being achieved, the pandemic has laid bare the realities. Systemic inequalities that are built into numerous aspects of women's lives – from pay, employment and work-life balance, to safety at work and in the home – have been reinforced.

"If anyone believed that gender equality was close to being achieved, the pandemic has laid bare the realities"

Grossly undervalued

Covid-19 has demonstrated how vital the jobs predominantly done by women are for society and the economy. Yet their work remains grossly undervalued.

Women make up 76 per cent of the 49 million care workers in the European Union (EU).¹ This is an underestimation as it does not take into account domestic helpers, often migrant women and women of colour, who tend to be irregularly employed with low wages (82 per cent of this group are among the 20 per cent lowest paid), poor working conditions, and who are particularly exposed to violence and harassment.

.....
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.....

Carers fill some of the most undervalued, underpaid, and precarious jobs in the EU. More than half the personal carers in health services are among the 30 per cent lowest-paid workers. Healthcare workers have faced long working hours, leading to problems reconciling work and family life and generating more stress, anxiety, and depression.

This is the product of inadequate funding for public services – including health and social care – with women forced into part-time or insecure jobs as the only way to combine work with care for their families.

In addition to carers, the pandemic has affected women across a wide range of sectors. Eurofound research shows that low-paid women workers, specifically women working in person-to-person service sectors, have been worst hit by employment losses.²

The double shift

Over the last year, in working families with children under 12, women in Europe have spent on average 62 hours a week on childcare and 23 hours on housework, compared with 36 and 15 hours respectively for men. Eurofound reported that women (29 per cent) were almost twice as likely as men (16 per cent) to say they found it hard to concentrate on their jobs because of care duties.³

There is a direct link between the unequal division of unpaid care in households and gender inequalities in the labour market. Dealing with the bulk of unpaid care work, including its mental burden, hinders women's access to, and ability to remain in, work. In most countries where unpaid care is shared more equally between women and men, women have higher employment rates and gender pay gaps are lower.

In the wake of hybrid post-Covid workplaces, there might just be an additional gender segregation around the corner, with women opting for telework to cope with care

responsibilities and men being more present in workplaces and office spaces, planning their next career step. There is a real risk that women might miss out twice: being traditionally sidelined from work-related social events and activities, and now less likely to even be physically present at the workplace.

A "shadow pandemic"

Another alarming consequence of the pandemic has been an increase in violence against women, girls, trans and non-binary people. About 50 women die as a result of domestic violence every week in the EU, and this has increased during lockdowns. Employers, legislators and law-enforcement bodies across Europe must urgently step up their efforts to prevent violence and harassment at work, as they are not doing enough. In a survey of European women trade union leaders, 84 per cent of respondents said that employers had not updated their policies to combat online harassment associated with telework.⁴ 83 per cent believed their country's laws to tackle violence and harassment at work, including online abuses, were not being adequately enforced.

What can the European Union do?

The EU must take urgent steps to stop the erosion of women's rights, prevent a return to the broken model of the past and ensure that post-pandemic Europe learns the lessons of earlier mistakes.

In terms of responding to increased rates of gender-based violence, some countries claim to have put in place additional measures, but others have used the cover of Covid-19 to launch attacks on women's rights. The European Trade Union Confederation is calling⁵ on all Member States to urgently ratify the International Labour Organisation's Convention 190 on violence and harassment.^{6,7} Every additional day that EU institutions spend clarifying procedural questions on the ratification of the convention means yet more women are left exposed to violent partners in their home office and/or to managers that abuse online tools to facilitate harassment, including of a sexual nature.

76%

of the 49 million care workers in the EU are women

Women are
2x more likely
to be distracted at work
due to care duties than
men

50

women die from
domestic violence per
week in the EU

The upcoming legislative initiative to prevent and combat gender-based violence, as announced by the European Commission, can make a difference, but only if there is a

"The EU must take urgent steps to stop the erosion of women's rights, prevent a return to the broken model of the past and ensure that post-pandemic Europe learns the lessons of earlier mistakes"

strong focus on the world of work and adequate scope for trade unions' actions are included, since there is a clear workplace dimension to domestic violence targeting women and girls.

In terms of tackling the undervaluation of women's paid and unpaid work, which has been exacerbated during the pandemic, as a baseline, more support for trade unions is needed.⁸ When women join their trade union they can bargain for increased pay, more security, training, health and

safety, a say over working hours, fairer promotions, more paid leave and a decent pension.

Women workers must enjoy the pay, conditions, and status they deserve. Covid-19 cannot be allowed to leave a legacy of less equal pay, particularly as most essential and frontline workers are women. It cannot be acceptable to refer to

.....
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these workers as “low-skilled”: the vital role they have played during the pandemic, for businesses, society and the economy, calls for a systematic re-evaluation of their pay, so that their true contribution is fully taken into account and their skills recognised.

Member States need to step up their efforts to make high-quality, accessible and affordable childcare available for all children and parents. This includes improved pay and conditions for workers in childcare.

If properly amended, the European Commission’s proposal for a directive on equal pay for equal work of equal value will be a much-needed game-changer for female workers, allowing for a rethinking of female-dominated jobs, in addition to properly enforced rules on pay transparency.⁹ It is only through empowering trade unions and supporting collective bargaining that equal pay will become a reality: eradicating the gender pay gap cannot be placed on the shoulders of individual women workers.

There must be EU-wide rules on teleworking that offer workers a choice, and guarantee equal treatment as well as reimbursement for additional costs, health and safety insurance, support, and a genuine right to disconnect. Telework cannot be seen by governments as a solution to the care crisis.

The EU’s Directive on Work-life Balance must be fully implemented across Europe – with the involvement of trade unions – including good quality childcare available to all parents and paid time-off for family care.¹⁰ It must be seen as a baseline for improving women workers’ rights, particularly

in terms of paid leave and rights to request flexible working arrangements.

Past, present, and future challenges call for an activist feminism that exposes abuses and works for robust solutions – a feminism global in its scale, ambition, and universal in its solidarity, dedicated to confronting some of the most pervasive structures of oppression.

Terrified, vulnerable, and forgotten: pregnant workers in the pandemic



Ros Bragg
Director of
Maternity Action

Working for Maternity Action, a UK charity advising on maternity rights, the impact of the pandemic on pregnant workers was immediately apparent. Our legal team reported call after call from distressed women terrified about unsafe working conditions and deeply worried about their financial situation. While the UK government made several interventions to assist workers affected by the pandemic, pregnant women were poorly served. Many of these problems are documented in our report *Insecure Labour*.¹

"Our legal team reported call after call from distressed women terrified about unsafe working conditions and deeply worried about their financial situation"

Pregnant women are at high risk of serious or fatal illness if they contract Covid, with minority ethnic women at greatest risk.² Coronavirus in pregnancy also increases the risk of pre-term birth. Despite this, the protections for pregnant workers in the UK have been weak, leaving many exposed to unsafe working conditions and others forced to cobble together various forms of leave, often with considerable loss of income.

Early in the pandemic, the British Prime Minister announced that pregnant women were especially vulnerable to Covid and should self-isolate. Public health regulations published at this time formally classed pregnant women as a "vulnerable group", however this declaration was not supported by guidance for employers on how to treat the women affected. As a result, employers were left to determine their own response. Many pregnant women were sent home on unpaid leave or sick pay in breach of health and safety law. Others commenced maternity leave early, truncating time at home with their new baby. Yet others were expected to continue working in public-facing roles with no additional protections and were left to choose between these unsafe working conditions or resigning.

This resulted in thousands of women suffering a sudden and unexpected drop in their earnings, with those in casual or zero hours contracts particularly affected. In addition, many found that their earnings were so low during the crucial eight-week period used to calculate their entitlement to statutory maternity pay that they no longer qualified for these benefits or would receive much-reduced entitlements.

Despite vigorous lobbying by Maternity Action and backing from the House of Commons Petitions Committee,³ the government refused the minor changes to regulations that would have protected statutory maternity pay entitlements. Instead, they recommended these women pursue a legal claim against their employer, which few were able to do.

"Despite vigorous lobbying... the government refused the minor changes to regulations that would have protected statutory maternity pay entitlements"

While health professional groups provided guidance for pregnant women on clinical issues, guidance for employers on managing pregnant women was sadly lacking. The government was asked to address this in multiple parliamentary questions, however, it was not until December 2020, nine months after declaring pregnant women as a vulnerable group, that this guidance was released.⁴

Two job support programmes were established by the UK government to provide income for those in work who had been affected by the pandemic: the Coronavirus Job Retention Scheme (CJRS) for employees and the Self-Employed Income Support Scheme (SEISS) for self-employed people. Neither scheme mentioned pregnant women in their guidance. It was only after persistent lobbying by Maternity Action and others that the CJRS extended the programme to women returning from maternity leave and calculated payments on regular income rather than maternity pay.

The lack of reference to pregnant women in the CJRS guidance was understood by many employers as a deliberate exclusion. As the CJRS was at the discretion of the employer, many women missed out on this critically important income stream. The SEISS calculated payments based on three years' income, without adjustment for time off for a new baby. Self-employed mothers who taken the equivalent of maternity leave received 33 per cent less in support as a result.

.....
75%

of women experience
maternity discrimination
at work
.....

The CJRS and SEISS were new schemes, created at speed to address the complex and changing circumstances of the pandemic, so the guidance was updated as needed in this period. At some points, the guidance was updated weekly, taking on board the varying requirements of different industries, types of employers and forms of employment. It is notable that in these repeated revisions to the guidance, the changes needed to support pregnant women were addressed only in part.

Half of women

experienced health
and safety issues
returning to work after
pregnancy
.....

1/9

women were unfairly
dismissed, made
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leave their jobs

The difficulties experienced by pregnant women in the pandemic build on an already challenging workplace environment. Research undertaken by the Equality and Human Rights Commission in 2016 found high rates of pregnancy and maternity discrimination at work, with three-quarters of women experiencing some form of discrimination or negative treatment during pregnancy, maternity leave or shortly after return to work.⁵ Roughly half of all women experienced some problem with health and safety, and four per cent left their jobs due to unsafe working conditions. One in every nine women was unfairly dismissed, unfairly made redundant or forced to leave their job.

In the context of high levels of maternity discrimination, women are rightly fearful that claiming their rights will put their jobs at risk. While unfair dismissal and selection for redundancy are unlawful, these are time-consuming and expensive to challenge in the employment tribunal and outcomes are uncertain. Legislation to strengthen redundancy protections for pregnant women and new



mothers was promised in 2017 but is not yet in place, despite calls by parliamentarians and others for swift action.

Women in insecure contracts face an additional degree of difficulty. Short term and zero-hours contracts, casual and short-term contracts, agency and bank arrangements all leave women with significantly weaker maternity rights than regular employees. As many are at the mercy of their managers for allocation of shifts and renewal of contracts, they are in a much weaker negotiating position than regular employees. The UK Trades Union Congress estimates that one in nine people in the workforce were on insecure contracts when the pandemic began, and these figures are growing.⁶

.....
 "Failure to act will continue to expose pregnant women to significantly higher risk of serious illness and to leaving this group of women in a very vulnerable position in an uncertain job market"

The impact of the pandemic on pregnant workers has been well-documented in a series of Parliamentary Select Committee reports⁷ and correspondence,⁸ ensuring that the evidence base has been presented to

ministers alongside recommendations for change. It is clear that the specific needs of pregnant women and new mothers at work are a low priority for policymakers. Charities and unions have outlined a set of asks to address these problems.⁹ Failure to act will continue to expose pregnant women to significantly higher risk of serious illness and to leaving this group of women in a very vulnerable position in an uncertain job market.

Has India's Covid policy response actually helped women, or is it all just smoke and mirrors?



Jashodhara Dasgupta
Co-Convenor of
the Feminist Policy
Collective

In India, the brunt of the pandemic and related lockdowns was borne by the most underprivileged: the poor, those lower in caste hierarchies, minorities, migrants, and internally displaced communities. The unforgettable images of millions of men, women and children trudging hundreds of kilometres across the country to get back to their villages reflects their desperation following loss of income, food, and shelter during the cruelly enforced national lockdown, announced with four hours' notice but without any support arrangements in place.

Gender runs as an intersectional disadvantage among almost all economically deprived groups, with catastrophic consequences during the pandemic. Only around five per cent of the 150 million women in paid work in India are in formal jobs with contracts or social protection; the rest are predominantly in the informal sector as farmers, vendors and petty retailers, micro-entrepreneurs, domestic workers, construction workers, and those in the gig economy – sectors with poorly regulated wages and job insecurity. The lockdown and social distancing measures were devastating for women and sex/gender-diverse persons in sex work, begging/blessing and other traditional hijra livelihoods. The heavy load of unpaid domestic care work undertaken by women and girls was further exacerbated by school and daycare closures, the collapse of routine health services, and mandatory quarantine.

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"Only around five per cent of the 150 million women in paid work in India are in formal jobs with contracts or social protection"
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Despite inadequate resources, India does have robust social welfare architecture in place. Soon after the first lockdown in March 2020, the first set of mitigation policies was announced: the Prime Minister's Welfare Scheme for the Poor and the Prime Minister's Food Welfare Scheme for the Poor being the flagship policies. The Feminist Policy Collective, a platform of feminist economists and gender

activists in India, interrogated these policies,¹ hoping there could be an opportunity to promote a gender-responsive approach.

It was encouraging to see that, on the surface, several of the measures included in the Welfare Scheme for the Poor targeted women: they recognised women's struggles to manage household food insecurity and loss of income. Vulnerable women, such as single women, widows and the elderly were also addressed. A closer look, however, revealed a different picture. For instance, women enrolled in Jan Dhan Yojana – a financial inclusion programme – were promised cash transfers of ₹500 Indian rupees (INR) per month from April to June 2020, but this meagre payment barely exceeds the minimum wages for just one day's unskilled labour² and women were encouraged to become more entrepreneurial and take up loans through micro-credit groups to make up the difference, which could potentially nudge them towards indebtedness.

Before the pandemic, social welfare pensions were already being provided to 30 million registered women, transgender



and gender-diverse people. These were already barely adequate, and payments were ramped up in only a minor way via a one-time payment of ₹1,000 (INR) – just \$13.40 (US) – to cover April to June 2020. Clearly, this is insufficient and cash transfers and pensions need to be increased to realistic levels given the widespread economic insecurity.

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"Food scarcity is likely to affect women and girls the most, since around 45 per cent of women in India are underweight and over half have remained anemic over 10 years"
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There were also gendered weaknesses in the provision of food aid throughout the pandemic. Household food scarcity during lockdown was especially hard on women and girls, who traditionally eat last and least in the family. The closure of the Integrated Child Development Services scheme – which provides day-care facilities with meals for three-to-six-year-olds – was compounded by the absence of school meals for children, which meant further strain on household food resources. India has a longstanding public distribution system to provide food to the poorest two-thirds of the population. In response to the pandemic, the government upped the amount of food provided via the scheme between April and November 2020, reaching an impressive 800 million people. However, the flaw in this system is that only registered households are supported, meaning that the 90-100 million people without ration cards were not provided for. This food scarcity is likely to affect women and girls the most, since around 45 per cent of women in India are underweight and over half have remained anemic over 10 years.⁴

Another group neglected in the pandemic response was pregnant and breastfeeding women. Existing benefits for this group provided just ₹5000 (INR) – \$67 (US) – over several instalments, and are only available for the birth of the first child, not for any subsequent children. The scheme has been severely under-resourced and has likely reached barely a fourth of target beneficiaries.⁵ This proportion shrank even further during 2020, when the pandemic meant that funds failed to reach most districts. In addition, women informal workers were also neglected.



The PM-KISAN, a cash transfer scheme which promised small and marginal farmers a payment of ₹2000 (INR) – \$ 27 (US) – was announced with fanfare as pandemic relief, however this initiative had already been announced and planned over a year before the pandemic began. More importantly, this benefit almost entirely overlooks women agricultural workers or women working as unpaid helpers on family farms without land title documentation, even though an estimated 97 million women work in agriculture. Likewise, women informal workers, who make up almost half of the building and construction workers in India, for example, are mostly unregistered and have hardly ever benefited from any social protection.

"Despite claiming to target and support vulnerable groups, the package of pandemic social policy measures announced in India ignores crucial issues faced by women, girls, transgender and gender-diverse people"

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Overall, despite claiming to target and support vulnerable groups, the package of pandemic social policy measures announced in India ignores crucial issues faced by women, girls, transgender and gender-diverse people, especially given the unpaid work undertaken in households, maternity, food scarcity and challenges with undocumented workers in the informal sector. Moreover, the overall investment was too meagre at 1.7 per cent of GDP given the context of inexorable price rises of all essential items, sky-rocketing fuel prices, and indirect taxation, along with tax concessions to the richest in the country.

The pandemic is amplifying existing gender inequalities and the intersecting forms of gender disadvantage faced by those negotiating myriad aspects of the current crisis. The airbrushed schemes announced were an exercise in smoke and mirrors and appeared to be largely gender-blind in their design and impacts, as they ignored the economic realities and gendered struggles of the pandemic. Instead, there needs to be a dynamic gender-responsive and data-driven response to the crisis that would empower women to take control over their circumstances, and be flexible enough adapt to the emerging and fast-changing requirements of the post-Covid world.

Overlooked and underserved: why have UK policymakers ignored single parent families?



Ruth Talbot
Founder of the
Single Parent Rights
Campaign

"During the pandemic, single parent earnings fell by more than double that of households with two parents"

The statistics surrounding the reality of life as a single parent during Covid show just how badly things can go wrong when policymakers ignore the needs of specific groups. Given that between 80 and 90 per cent of this group are female, this is very much a gendered issue.

During the pandemic, single parent earnings fell by more than double that of households with two parents in the UK,¹ with 58 per cent of single parents reliant on Universal Credit – a payment for people over 18 but under State Pension age who are on a low income or out of work – compared with 10 per cent of coupled families in August 2020.² Single parents were disproportionately furloughed and more likely to lose their jobs through the pandemic³ and single parents – unsurprisingly – struggled more than others with personal finances.^{4,5}

Having set up the Single Parent Rights campaign during the early stages of the pandemic, I led a piece of research into single parent discrimination, both in lockdown and more broadly. Our research found that 51 per cent of single parents who experienced discrimination had experienced it within Covid lockdown rules, including being denied entry to supermarkets, refused flexible working hours, and denied furlough – a Covid support scheme where employers could put their staff on temporary leave and the government would pay 80% of their wages – or forced onto it when colleagues in the same role were not. Furthermore, the "plus one" rule excluded some single parents.⁶

The plus one rule – introduced four weeks into lockdown – allowed one individual to meet with one other person outside. However, because children counted in this, those single parents with young children who couldn't be left at home were excluded from this potential lifeline.⁷ It took a further seven weeks, and a lot of campaigning from many

groups and individuals, for support bubbles to be introduced so single parents could have contact with other adults.⁸

"The research identified a triple whammy of prejudice, bias and lack of legal protection which created an environment where single parents were distrusted, unseen and treated as second class citizens"

This discrimination towards single parents pre-dated Covid. Our research found up to 80 per cent of single parents had faced discrimination in areas such as housing, employment, and fees and charges. The research identified a triple whammy of prejudice, bias and lack of legal protection which created an environment where single parents were distrusted, unseen and treated as second class citizens. Despite the clear evidence of discrimination and unequal treatment, single parents are not afforded any special protection in the Equality Act in the UK.⁹



Renting privately as a single parent, whether in receipt of housing benefit or not, is almost universally challenging and many single parents remain in unsuitable housing due to being excluded from alternatives. Child benefit calculations mean two-parent families can earn up to £100,000, twice that of single parents before losing this financial benefit.

Meanwhile, single parent registered carers are excluded from 30 hours of funded childcare for three- to four year-olds because entitlement is based on having a partner in work. The same goes for being eligible to reclaim up to 85 per cent of childcare costs for single parent registered carers in receipt of Universal Credit. This means, if you are caring for a minimum of 35 hours a week for a child or relative living with a disability, there is less support available to you than a parent in the same position but with a partner in work. Let that sink in for a while.

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58%
 of single parent families
 relied on Universal
 Credit during the
 pandemic

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80%
 of single parents
 experienced
 discrimination

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44%
 of children in single
 parent homes live in
 poverty

The impact of this discrimination across all areas of life is shocking. Over 99 per cent of single parents who reported discrimination in our research suffered a negative impact personally and 73 per cent reported a negative impact on their child(ren)'s life. 96 per cent reported that their mental health had suffered as a result, a finding that helps shed light on why single mothers face almost double the rates of mental health challenges as mothers in couples.¹⁰

Understanding intersectionality is key to ensuring equality for all groups, yet single parenthood is rarely considered a key characteristic within this. While our research found that single parents of diverse backgrounds all faced discrimination, the level of discrimination and extent of the negative impact varied depending on the single parents' other characteristics. For example, single parents living with a disability were more likely to experience discrimination, as were Black single parents and single parents of colour more broadly. This was also true for those single parents on lower income levels.

Despite the clear evidence that single parents face high rates of poverty, there has been little done to address the root causes of this. While the dismantling of the welfare state in

the UK over the past 10 years has played a role, and many of the widely proposed policy changes would have a positive impact on the lives of many single parent families – such as removing the benefit cap and the two-child limit – these policies don't address the systemic discrimination and exclusion of single parent families within society.

Pre-Covid statistics show that employment alone hasn't been the answer to the challenges faced by single parents. 44 per cent of children in single parent homes lived in poverty¹¹ despite almost 70 percent of single parents being in paid employment.¹² In homes with full-time working single parents, poverty has risen from 13 per cent in 1996/97 to 22 per cent in 2018/19. Our research highlighted that even when single parents are employed, they face discrimination, in terms of being denied flexible working patterns, being excluded from development opportunities and promotions, and being let go for spurious reasons. This research is backed up by the work of Gingerbread, which found that 22 per cent of single parents starting work were back on job seekers allowance within a year.¹³

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"As a nation we must ensure that Covid is a turning point in the unequal treatment that single parents have faced for generations"
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Without addressing the triple whammy of prejudice, bias and lack of legal protections, single parents will remain perpetually at risk of the next disaster. As a nation we must ensure that Covid is a turning point in the unequal treatment that single parents have faced for generations. We need to move beyond a place where single parents and poverty are seen as synonymous and ensure the rights of single parents are protected.

At the Single Parent Rights campaign, we are pushing for a reality where employers, businesses, landlords and government actively consider single parents when researching, designing, and implementing policy change. A wholesale government review into the inequalities faced by single parents is essential to ensure that the core issues are addressed, not just the symptoms, and – ultimately – we want to see single parents' rights enshrined in law alongside the other protected characteristics of the Equality Act.

Recovery is not enough – society needs a post-Covid transformation



Julie Battilana

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It is by now considered a truism that Covid-19 revealed and reinforced profound inequalities in our societies, including gender-based ones. Pandemic layoffs hit women harder than men. In fact, women in the US, especially racialised women, had to drop out of the labour force so much during the pandemic that it put women's labour force participation back to what it was 30 years ago.¹



Kara Sheppard-Jones

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In the services, hospitality, and leisure sectors in North America – those hardest hit by the pandemic – women are over-represented, which led to higher levels of employment losses among women than men.² Concretely, what these statistics mean is that women suffered greater wage losses and precarity over the course of the pandemic, even though women, especially racialised and Indigenous women, were already poorer than men before the pandemic.³ Simultaneously, they shouldered a larger amount of care work both at home and in the workplace, as the need for care skyrocketed when schools and childcare centres closed and the virus infiltrated nursing homes. Covid-19 became a great revealer of these inequalities, while deepening their impacts.

"Returning to our pre-pandemic ways will not solve the inequalities that have deepened because of the pandemic"

The term “recovery”, so often used to point to policy changes meant to address these inequalities after the pandemic,⁴ implies a return to a prior state that was assumed to be healthy. It therefore misses a crucial point: returning to our pre-pandemic ways will not solve the inequalities that have deepened because of the pandemic. Recovery may move the distribution of power back to its levels prior to the crisis, but it will not address the root of these inequalities. To

do so, what we need is not a recovery, it is a transformation that will ensure a fairer distribution of power in society.

To achieve this kind of transformation, we must understand what power is and what it takes to redistribute it. Power is the ability to influence others' behaviour. But to understand how to create transformative interventions requires going one step further to understand where power comes from. As Battilana and Casciaro write in their book, *Power, For All*, power derives from controlling access to resources others value.⁵ This simple but vital insight – that power flows to those who control resources we all decide are valuable – is critical for understanding how to change the distribution of power and address intersectional inequalities in the wake of Covid-19.

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"What we need is not a recovery, it is a transformation that will ensure a fairer distribution of power in society"

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For those in organisations, government, or other institutions striving to create a post-Covid world that is more equitable, including for women and LGBTQ+ people who face intersectional discrimination, we offer a tool to map power dynamics and, thus, identify levers for transformation. It comes down to systematically asking and answering the two following questions: What do people value? Who controls access to these valued resources?

Transformation requires understanding these two questions, then devising interventions that shift the answers. It requires changing what we value to better recognise everyone's contribution to our society – instigating nothing short of a cultural change. It also requires shifting control over these valued resources.

To illustrate how these questions can serve to facilitate transformative interventions, consider a salient example from the Covid-19 pandemic. The crisis has prompted a shift in the words used to describe certain work. The most evident example is the well-deserved term "essential worker" to underscore the contributions, and public value, ascribed to those whose frontline contributions allowed everybody else to work from home and out of harm's way. The pandemic



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"The pandemic has... revealed our dependence on care work to function as a society. Yet, there is a disconnect between the words used to value these workers as essential and how we compensate care workers"
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has especially revealed our dependence on care work to function as a society. Yet, there is a disconnect between the words used to value these workers as essential and how we compensate care workers such as nursing home aides, cleaning staff, and childcare workers, for example.

In other words, we can say we value care workers as essential, but to change the distribution of power durably requires more than words. We must redistribute resources in accordance with these values. This is where the second question – who controls access to the resources that are valued? – comes into play.

Transformation requires a change in the levels of control essential workers have over valued resources, such as wages, flexibility, and safety.

Consider the example of Sandra, a worker-owner at Up & Go, a cooperative cleaning service based in New York. Sandra and her fellow domestic worker-owners vote on

what services to offer and prices to charge, how to respond to Covid-19, and how to use the cooperative's profits.⁶ The worker-cooperative model, which puts control over valuable resources in the hands of workers, stands as an example of a transformative intervention. There are others, though.

The German codetermination model, which has spread to countries across Europe, including Austria, Denmark, Norway, and Sweden, grants workers formal representation on the board of directors of their organisation.⁷ Adopting such co-determination policies, while ensuring the representation of all employees, including women and members of racialised groups, would help redistribute power by giving workers a vote and voice in important organisational decisions. More generally, contrary to one-off diversity trainings or symbolic promotions, initiatives in organisations that track and rewire how opportunities and resources are distributed at every level – from the frontline to the board room – are critical to redistribute power more fairly.⁸

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"To build more resilient, just, healthy, and fair societies, we need transformative approaches that address the root of inequality by redistributing power"
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Creating and implementing such transformative interventions, be they in organisations or policymaking, is not only necessary to address the root causes of inequality – research has found that this redistribution of power ends up benefitting everyone.⁹ Indeed, extreme levels of inequality are detrimental even to people at the top, as they result in less productive, less healthy, and less safe communities and societies.¹⁰

In the wake of the pandemic, we must aim for more than recovery. To build more resilient, just, healthy, and fair societies, we need transformative approaches that address the root of inequality by redistributing power.

Digital labour platforms herald a new era for working women, but deep-rooted inequalities persist



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Digital labour platforms offer huge potential to expand women's access to the labour market by offering flexible work opportunities, but they also run the risk of exacerbating existing inequalities – particularly for women and other workers vulnerable to discrimination. Digital labour platforms (DLPs) have been on the rise since the 2000s and offer work through web and app-based platforms, where the work is often service-based, such as driving, running errands or cleaning. In a fast-changing world of work, accelerated by technological progress, DLPs have been rapidly gaining momentum. This trend has increased exponentially since the start of the pandemic, with DLPs offering a flexible, alternative source of work at a time when redundancies were on the rise and employment was increasingly uncertain for many.



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Labour Organisation

Although they have provided much needed employment opportunities through the Covid crisis, digital labour platforms fail to deliver essential social protections for workers. Even prior to the pandemic, lack of clarity over work contracts and a sluggish approach to regulation left DLP workers unprotected and excluded from labour laws.¹ For these platforms to deliver on their potential to create decent work, this needs to be urgently remedied. Additionally, Covid response plans have often overlooked DLP work, leaving it out of emergency fiscal packages and other conventional social protection frameworks and so leaving many workers with no support in many national jurisdictions.²

Before Covid, women made up just one in three “crowdworkers” on digital platforms. This gender divide was particularly skewed in developing economies³ and appears to have widened even further during the pandemic, with women working on DLPs at much lower rates than men.⁴ School closures and the unequal distribution of

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"Similar to the offline labour market, the online labour market has in-built gender biases that pose challenges for women in accessing work"
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domestic and childcare responsibilities between women and men were very likely contributing factors to this disparity.⁵ This underscores how, similar to the offline labour market, the online labour market has in-built gender biases that pose challenges for women in accessing work. The lack of social protection, child and long-term care services, and care leave policies on digital labour platforms all limit women's capacity to work in these digital spaces.

In the online labour sector, services can be broadly divided into those delivered purely online – eg software development – and those requiring a physical presence on location – eg cleaning or personal transport. A European Union survey indicates that men dominate in software development and transport services, whereas women work more frequently in certain on-site roles, such as personal or household services, thus reproducing the common gender segregation patterns found in traditional labour markets.⁶ Women are also more likely than men to perform clerical and



data entry tasks, and writing and translation work.⁷ As women are disproportionately burdened with unpaid care responsibilities, they are often compelled to choose tasks that are less complex and demanding in terms of continued concentration, and thus are less likely to be well paid.⁸

According to an International Labour Organisation (ILO) survey, discrimination on web-based platforms on the basis of nationality and gender is prevalent and contributes to

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 "The sense of impunity and anonymity given to clients of on-demand platforms has been seen as a factor exacerbating the risk of sexism, discrimination, violence, and harassment"

exclusion from work opportunities, low pay, and poor pay differentials. This discrimination was highlighted particularly by women respondents and workers living in developing economies.⁹ A gender pay gap has also been identified among Uber drivers¹⁰ and other online platforms offering services.¹¹ Similarly, an Australian survey found that the gender pay gap and the concentration of women in lower-paid digital occupations persisted on digital platforms.¹²

Despite the lack of data, research has also highlighted that women engaged in the platform economy are particularly exposed to the risk of violence and harassment from users. This is the case in roles where platform workers interact with clients in spaces with no third party present, such as ride-hailing, home-sharing or personal and household services.¹³ Moreover, the sense of impunity and anonymity given to clients of on-demand platforms has been seen as a factor exacerbating the risk of sexism, discrimination, violence, and harassment.¹⁴

To help counter the risks of further inequalities and exclusion on digital labour platforms, an increasing number of initiatives based on social dialogue and collective bargaining are emerging. For instance, in Canada, the workers' organisation Justice for Foodora Couriers – created by a group of Foodora delivery riders to improve their fellow food riders' working conditions – has launched a campaign for fair compensation for dangerous work, paid sick leave, and a respectful workplace free from harassment and intimidation. Moreover, in 2018, the Charter of

Fundamental Rights of Digital Labour in the Urban Context was signed in Bologna, following negotiations between the unions and digital labour platforms. Among other provisions, the charter covers includes the right to a fair wage, health and safety, and protection of personal data. The charter is not binding but those who sign it – on a voluntary basis – must observe it.¹⁵

"The digital labour economy is not automatically going to be more gender-responsive and inclusive than the offline economy. Achieving this requires a conscious effort"

As DLPs are likely to continue to grow in size and prevalence, it is important to leverage this opportunity to advance decent work, rights for all, and sustainable work practices. This can be achieved through social dialogue, including collective bargaining and tripartite cooperation.¹⁴ However, the digital labour economy is not automatically going to be more gender-responsive and inclusive than the offline economy. Achieving this requires a conscious effort to overcome gender biases and address gender inequality.

Creating online and offline worlds of work where women benefit and contribute on an equal basis to men requires reshaping the structure of work, society, and the economy with a gender-transformative approach. To achieve this ambition requires national policies that respect international labour laws, ensure adequate access to social protection, bargaining power and representation, and develop an ecosystem of care policies and services to relieve women's unpaid care burden and engage more men in sharing care responsibilities. These principles must, therefore, be at the core of any intervention in order to retain jobs, expand decent work opportunities for all, and build a more equitable Covid-19 recovery.

A springboard for change? Opportunities for a sustainable and inclusive care system post-Covid



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Please note the views presented in this essay are those of the author and do not necessarily reflect the views of the United Nations system.

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"Only 12.3 per cent of over 3,000 social protection and labour market measures in 221 countries directly supported unpaid care work"
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The Covid-19 pandemic has acted as a multiplier of pre-existing inequalities, exposing intrinsic power imbalances and an unequal distribution of resources and opportunities that are rooted in patriarchy and gender-based discrimination. But at the same time, the crisis has brought to light in an unprecedented way the critical role of care, providing an opportunity to build the world back better by putting care – and social reproduction in a broader sense¹ – at the heart of the development agenda.

Gender gaps in unpaid care work persist across different races and ethnicities. New studies that integrate an intersectional perspective show that unpaid care and domestic work demands during the Covid-19 pandemic increased more sharply for Black or African American, Hispanic or Latinx, and Asian respondents than for White respondents.² Such race-based unpaid care gaps can be explained by the fact that racial and ethnic minorities are more likely to live in poverty, in larger families with multiple generations, and with less access to childcare and health services, all of which results from entrenched multi-faceted socioeconomic inequalities linked to systemic racism.³

Despite the widely referenced disproportionate impacts of the pandemic, the global policy response has largely been blind to gender equality. As shown by the UNDP-UN Women Covid-19 Global Gender Response Tracker, only 12.3 per cent of over 3,000 social protection and labour market measures in 221 countries directly supported unpaid care work.⁴ This can be partly attributed to the underrepresentation of women in political decision-making. Evidence shows that women's political participation is integral to shaping gender-responsive policymaking.⁵ Yet, while women have been on the frontlines of the Covid-19 battleground – as care providers,

health workers, entrepreneurs, and educators – they have been relegated to the backseat of pandemic decision-making. Notably, the tracker reveals that, globally, women account for only 24 per cent of members of 226 national Covid-19 taskforces.

"While women have been on the frontlines of the Covid-19 battleground... they have been relegated to the backseat of pandemic decision-making"

Nonetheless, there are some promising practices that can be leveraged, both in the ongoing pandemic response and as we look towards recovery from the Covid-19 crisis. To support working parents' care responsibilities during school and childcare facilities closure, countries across regions have provided new or extended existing paid parental leave schemes. For example, in Austria, employees with care responsibilities could take up to three weeks of care leave with full wage replacement, with a third of the salary reimbursed to the employer by the government. In the Caribbean Island, Nevis, all public servants with children in preschool or day-care could take paid leave so that they could stay at home with children for the initial period of six weeks.

Despite the widespread facility closures, in several countries care institutions remained open to provide care support for children of essential service workers. Many countries also provided income support to parents during the Covid-19 crisis, including through the monetary compensation for the loss of jobs or reduction of working hours, family benefits and child allowances. Germany, Portugal, and Slovenia set up wage subsidies for carers to cover the salary of parents or those looking after sick family members during the pandemic. Finland, as part of its national social insurance, offered a sickness allowance to providers of children placed under quarantine, which gave full compensation for the loss of income incurred during a period of absence from work. In Argentina, women who received a universal maternity



benefit, and beneficiaries of the Universal Child Allowance, received additional cash payments. Bosnia and Herzegovina, Mongolia, and Spain allowed parents to reduce work hours for Covid-19-related family care.

The gendered impacts of the pandemic point to the pressing need for a global policy action that prioritises unpaid

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care work. While the Covid-19 pandemic is reversing many of the gains on gender equality, it can serve as a springboard to create a more egalitarian and resilient system. Care needs to be considered a universal right and must be put at the heart of global and national agendas. At the national level, this entails creating comprehensive care systems that enhance support to working parents with childcare responsibilities by expanding access to paid family leave and paid sick leave, improve gender-responsive services through the universal provision of quality care services, and

prioritise investments in social and physical infrastructure to meet the different care needs of the population.

At the same time, care policy arrangements need to be complemented with labour market policies that support the re-integration of workers into the labour force, including through re-training programmes and skills development that will prepare them for the new demands of the post-Covid labour market, improve flexible work arrangements for workers with care responsibilities, and legislate to protect the rights of all workers in both formal and informal sectors. In addition to care and labour market policies, a supportive macroeconomic environment is also important, with adequate fiscal and monetary policies that shape budgets and make resources available to build more gender-responsive, resilient and egalitarian societies.

In line with these recommendations, we must push for systemic change involving fundamental shifts in power, institutions, and norms.⁵ Such an approach is not only a development imperative but also a precondition for sustainable and inclusive future a development imperative but also a precondition for sustainable and inclusive future.

Essential but disposable: the gendered impact of Covid on migrant domestic workers



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During the pandemic, the bulk of public attention and policy intervention has focused on domestic efforts to address Covid and ensure access to vaccination.¹ But restrictions on human mobility during the crisis have also had a direct impact on the vast flows of migration that the global economy is built on.² International migrant workers have long been “essential but disposable” – and throughout this time they’ve been among the most forgotten groups, despite being among the most severely affected.



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Migrant domestic workers (MDWs) are particularly vulnerable to lockdowns and curfews, border closures, and travel bans. Across the world, domestic work is more likely than other industries to be made up of a high share of women and migrants. Close to 95 per cent of all domestic workers globally are women and one in five are migrants, with that share rising far higher in many individual countries.^{3,4}

The impact of the pandemic on migrant domestic workers

Throughout Covid, migrants have been caught between different degrees of lockdown in home and host countries.⁵ Many migrants were summarily abandoned and confined to overcrowded detention centres, or left in a legal limbo as host countries were unable or unwilling to fly them home or take them back. It has been reported that 22,900 people were repatriated from the UAE by late April 2020, many without receiving wages for work already performed.

"Many migrants were summarily abandoned and confined to overcrowded detention centres, or left in a legal limbo"

In our research, MDWs shared that neighbourhoods densely populated by migrants were disproportionately deprived of services and faced more severe lockdowns. Once confined

to these neighbourhoods, migrant communities had more limited access to food, healthcare and other services than non-migrant neighbourhoods. This was particularly true in Jordan, Lebanon, Kuwait and in parts of Spain and Italy.

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"International migrant workers have long been "essential but disposable" – and throughout this time they've been among the most forgotten groups, despite being among the most severely affected"
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Globally, many MDWs travel on sponsored visas linked to specific employers in host countries. These sponsorship visas mandate an exclusive relationship where the migrant either lives with the employer or works exclusively for them. Ostensibly, this link provides security for both the worker and employer. However, it also limits worker freedoms if the terms and conditions of employment are not favourable to the worker. During the pandemic, this link has caused a particular vulnerability. With a visa linked to one employer, migrants are in legal limbo – largely unprotected by emergency pandemic response measures, unable to look for new work, unable to qualify for protections like unemployment insurance, and unable to leave the country due to travel restrictions.

This reality underscores the intimate connection between labour and migration policies. Where countries did not extend visas and work permits to migrants, social distancing measures left many MDWs without jobs and without legal status in their host countries. Some were expelled from their employers' houses, and some have even been detained in government facilities. Among live-in workers, where employment loss due to Covid restrictions did not lead to loss of shelter, MDWs reported a higher risk of being trapped in abusive employment relationships without wages or sufficient compensation. We found evidence of this in reports from Kuwait, Jordan, Lebanon, Hong Kong, and Italy.

A few host countries provided amnesty to undocumented migrant workers (Kuwait) or regularised their status (Italy) as public health safety measures. Others automatically extended visas to those who had a tourist or work visa (Costa Rica) or allowed workers to apply for extensions



without having to return home (the US). In some cases, these provisions came about after a home country negotiated with a host country on behalf of migrants, such as in Bangladesh. In most cases, however, migrant domestic workers were left to fend for themselves in increasingly hostile environments to foreigners, such as in the US, where deportations dramatically increased in March 2020, or in Costa Rica, Hong Kong, Kuwait, and Jordan, where all non-native migrants were told that if they returned home, they would not be allowed back into the country.

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"Migrant domestic
workers were
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themselves in
increasingly hostile
environments"
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The pandemic also brought to the fore the difficulties in enforcing workplace regulation for private households. Workers who are able to apply to get the benefits they are eligible for are the minority that have internet access, awareness, and access to the necessary documentation. Even where there are some protections, as in Costa Rica, employers may force workers to renounce their claims to additional benefits in exchange for corroborating unemployment. Workers are largely at the whim of their employers, who may continue to pay them while they shelter-in-place or may not. Medical costs are often the responsibility of the employer, but the sponsorship system means workers are at the mercy of employers. In the US, domestic workers are more likely than other workers to have been born outside of the US and they typically lack social protection, vacation, and healthcare benefits.⁶

The pandemic did see an expansion of social protection globally. While few of the measures were targeted at migrant workers and migrant domestic workers in particular, several countries with more developed social protection systems provided additional support to households regardless of residency status, as well as financial transfers for caring for children and the elderly.⁷ Germany, Spain and Costa Rica provided childcare subsidies in recognition of the need to care for children. South Africa, Namibia and Cape Verde extended their social protection systems to include migrants and migrant domestic workers. Other countries expanded

child-related financial transfers, such as the US and Germany. These measures may have enabled host countries to ensure that MDWs retain their jobs and helped women stay in employment, thus reducing their retreat from the labour force.

In the face of inadequate social protection systems, and Covid-19 responses that don't take migrants and undocumented workers into account, many migrant rights organisations are beginning to make claims on home and host country governments. The Alliance Against Violence and Harassment in Jordan, a partner with the Solidarity Centre, is demanding that the government grant migrant workers legal residency during Covid-19, as many visas and work permits will expire during lockdown. The Alliance is calling for the government to grant financial assistance to migrant workers, who have little or no pay but cannot return to their country of origin.

"Covid-19 has brought to the fore the critical role of care work undertaken by migrant domestic workers, who are at the same time both essential and excluded"

The International Domestic Workers Federation (IDWF), a global federation of domestic worker unions, has begun to send money to affiliates in different countries and has redefined some of their work as humanitarian in response to desperate calls for support.⁸ The IDWF now has a solidarity fund to provide support to migrant domestic workers.⁹

Migrant organising also became virtual in the lockdowns. The Domestic Workers Solidarity Network in Jordan shared information about Covid and its impact on workers in multiple languages on its Facebook page. Venezuelan immigrants in Costa Rica organised virtual migration and asylum workshops with immigration lawyers, NGOs and United Nations organisations. There are SMS campaigns in Qatar to ensure that MDWs and their employers have access to information about rights and protections.

Covid-19 has brought to the fore the critical role of care work undertaken by migrant domestic workers, who are at the same time both essential and excluded – essential to society yet excluded from many of the rights and protections afforded native workers. This crisis has thrown this exclusion and discrimination into sharp relief.

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Stringent Covid policies implemented without sufficient social protections left many migrants, and particularly MDWs, without employment and livelihoods. Few home countries attempted to bring MDWs home, and where they did, MDWs were left to pay for transportation. Yet claims-making occurred, even under these conditions.

Our own research concluded that countries with more robust social protection systems and more inclusive migration regimes, such as Canada, Costa Rica, and Germany, responded better and more efficiently to the needs of MDWs. It is essential that we learn from the experiences of these countries, as understanding what is happening to migrant care workers can help us rebuild stronger, in a way that leaves no one behind.

Gender equality is central to Norway's national brand – but it is missing from its labour market policies



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The Nordic welfare state is renowned for its strong focus on gender equality. It has long had policies in place to address men and women's different experiences of educational attainment, employment, career development and work-life balance.¹ Gender equality is also central to how the Nordic countries "brand" themselves internationally.² Despite this, gender-based disparities have proven persistent, and this has been brought into sharp relief by the Covid-19 pandemic, which has shone a spotlight on the inbuilt gender inequality of the Norwegian labour market.

The gender-segregated labour market

The Norwegian labour market is highly gender-segregated. Certainly, the level of gender division has declined in recent years,³ but nonetheless, there is a clear gender split across certain occupations, industries, and sectors. Women dominate in healthcare, retail, and education, while men are concentrated in construction, industry, and transport. Only 15 per cent of Norwegian men and women work in a gender-balanced occupation – defined as having more than 40 per cent of men and women in the workforce.⁴ The Norwegian labour market also has a higher proportion of men in top management positions in most sectors, with business and the military serving as extreme examples.⁵

In the context of Covid-19, the impacts of this segregation were two-fold. First, there was relatively little gender difference in rates of redundancies. Women more often lost jobs within the sales and retail sectors, and men more often in tourism, transportation and construction, but overall gender differences were small.⁶ This is because the occupations that were hardest hit by lockdown measures were also the occupations that are most gender-balanced: service, tourism and culture.⁷ Due to Norway's relatively favourable economic situation – which allowed for the introduction of measures to protect employers and

employees – the outlook for the labour market is good and unemployment low, although the repercussions will still be significant.

Second, the healthcare sector was hit hard by increasing work pressure and a greater contagion risk. Women are severely overrepresented in this sector, making up about 80 per cent of employees. Public sector healthcare is the largest employer of women in the Norwegian labour market, employing as many as a third of all female workers. As a result of their vital role in the fight against the pandemic, healthcare workers have been subject to extensive overtime, including breaches of the Work Environment Act.⁸

The gender pay gap

In Norway, women's average hourly wages are only 89 per cent of men's.⁹ The gender-segregated labour market explains about 40 per cent of this gender pay gap. What's more, the gap is actually bigger among those with higher levels of education than among the population as a whole, as women with a three-year bachelor's degree make 83 per cent of what men with the same qualifications earn.¹⁰

"Applauding health workers from balconies is a nice gesture, but most of them would probably prefer a pay rise"

Moreover, the pandemic has stalled the wage development of frontline occupations. Norway has a centralised wage bargaining system and its healthcare system received poorer pay in 2020 compared to previous years, although there were some improvements from 2020 to 2021.¹¹ Applauding health workers from balconies is a nice gesture, but most of them would probably prefer a pay rise that brought their wages in line with male-dominated occupations with similar skill and education requirements. Indeed, this disparity is about more than just gender equality and has significant consequences for the healthcare sector, as the relatively low salaries and high proportion of part-time positions in

15%
of Norwegians work
in a gender-balanced
profession

80%
of healthcare workers
are women

On average, women's
wages are
89%
of men's



the sector result in recruitment challenges and issues with retention, leading to higher staff turnover.

The gendering of working hours

Although the difference in men and women's employment rates has almost disappeared over recent decades, working time arrangements are still clearly gendered. On average, one in three women in Norway work part-time, compared with just one in ten men and 60 per cent of women working in healthcare work part-time. Part-time work is often just

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"In healthcare, many employees have been forced to take on several part-time positions in order to create something vaguely resembling a full-time job"
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viewed as a childcare solution for families with young children, however women with young children are actually among those most typically working full-time, and part-time work is far more about employer preferences than workers' care arrangements. In healthcare, many employees have been forced to take on several part-time positions in order to create something vaguely resembling a full-time job. This system posed significant challenges to the healthcare sector's capacity during the pandemic, putting extra strain on workers in an already demanding situation and increasing the risk of Covid transmission due to people working across several locations.¹³

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The structuring of work-time arrangements with extensive use of part-time positions may appear beneficial for employers in the short-term, as it offers greater flexibility than traditional full-time positions, but this approach is not sustainable for the workers or for society in the long run. The pandemic shone a spotlight on this problem and significant effort is needed to identify ways to reduce part-time working and establish a full-time standard in the healthcare sector.

Has the issue of gender equality finally reached breaking point?

An estimate from the Ministry of Finance strongly emphasises the need for more healthcare workers to cover the future demands of an ageing population – it says that a third of the entire workforce may be required to work in healthcare over the coming decades. In other words, the

female-dominated healthcare sector needs to attract both women and men in the years to come.

The gender-segregated labour market and how it contributes to unequal pay and unsustainable work practices for women is a key part of the problem, but it also provides direction for possible solutions. Improving salaries and offering full-time positions are key.

"Norway prides itself nationally and internationally on achievements related to gender equality. But when it actually comes down to it, this is often sacrificed in favour of other considerations"

Gender has not been centrally addressed in the Norwegian authorities' Covid-19 response, nor has it been a notable feature in the report assessing the country's handling of the pandemic.¹⁵ Thus it remains to be seen if gender equality will be considered in the ongoing evaluation of the government's Covid recovery plan, an exercise that is supposed to ensure preparedness for the best possible handling of future crises.

Norway prides itself nationally and internationally on achievements related to gender equality. But when it actually comes down to it, this is often sacrificed in favour of other considerations. Let's hope one of the few positives to come out of the Covid crisis is a renewed focus on equality between women and men. We need a new platform for change.

The pandemic pushed Ireland's care sector to breaking point – now activists are demanding action



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There is a care crisis across Europe, including in Ireland, with profound consequences for the quality, accessibility and affordability of care, and for the pay and working conditions of the predominantly female – and often migrant – staff.¹ In Ireland, care is primarily delivered in the private market, with 75 per cent of childcare and 85 per cent of eldercare being delivered by private providers, due in part to government initiatives that incentivise private providers and promote an economic model based on high fees and low wages. This approach has negative consequences for care recipients,² women's participation in the labour force,³ and low-paid care workers.

Ireland has fairly light-touch employment regulations and one of the highest rates of low pay in the OECD, with one in five workers being classed as “low-paid”.⁴ This is felt particularly sharply in the care sector, where 61 per cent of workers earn less than the living wage.⁵ Moreover, care work is notoriously precarious, leaving care workers, particularly women – who make up 98 per cent of the workforce – as well as migrants and young people living in a state of “flex-insecurity” without the cushion of a strong welfare state.⁶ This is particularly galling given that care work lacks clear pay scales and ascendable career structures, but still demands high-level qualifications.

"There is a care crisis across Europe... with profound consequences for the quality, accessibility and affordability of care, and on the pay and working conditions for the predominantly female – and often migrant – staff"

There has been much gendered activism and advocacy from women and those working in the care sector to address

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98%

of Irish care workers
are women

1/5

of workers in Ireland
are low-paid

61%

of care workers earn
less than the living wage

these issues, particularly in the light of the pandemic. Market and state failures to deliver care mean that it is left to communities and families to meet gaps in provision, and it is women who are disproportionately burdened with this additional labour.⁷ Covid Women's Voices, a group comprising a diverse range of healthcare workers, teachers, academics, lawyers and others, highlighted how this was dramatically intensified due to lengthy creche and school closures during pandemic lockdowns.⁸

Moreover, since the creation of the 1937 Irish Constitution, women have campaigned to rid it of clause 41.2, which ascribes women the special role of providing "care in the home". In response to this sexist clause, feminists have advocated for state investment in childcare to address care inequalities. These efforts have redoubled since the start of the pandemic, which has shone a spotlight on, and exacerbated, the deeply gendered unequal divisions of care, with activists campaigning for childcare to be defined as an essential public service and underlining the value of largely female "frontline workers".



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These issues also came to the fore in the recent Citizens' Assembly on gender equality. Citizens' Assemblies are a powerful tool to shape policy and involve a group of people being brought together to discuss an issue and reach a conclusion about what they think should happen. The people who take part are chosen to reflect the wider population in terms of demographics and attitudes and are not required to have any prior expertise in the issue being explored. Ireland has utilised Citizens' Assemblies to great effect to tackle a number of important and sometimes controversial challenges facing Irish society, including equal marriage and abortion.

The Citizens Assembly on gender equality, comprised of 99 randomly selected citizens and an independent chair – Dr Catherine Day, the former General Secretary of the European Commission – and they deliberated between January 2020 and April 2021. This timing afforded a unique opportunity to reflect on the negative impact of the pandemic on care and gender inequality. Recommendations included: the state to support care within the home and wider community; 1 per cent of GNP to be invested in childcare; and for higher taxes to make a reality of these recommendations.⁹

In her assessment of European responses to the pandemic, Ursula Barry argues that EU recovery plans require a new EU care strategy and social investment in care that are aligned to a green transformation and digital transition.¹⁰ Feminist recovery plans¹¹ like those produced by Hawaii's State Commission on the Status of Women and the National Women's Council of Ireland also argue for a "build back better" approach¹² founded on a valuation of care.¹³

We find hope in these proposals, and in other feminist¹⁴ and trade union¹⁵ demands for a state-funded universal childcare service. We also welcome some progress in this

area, including a 2021 statutory Joint Labour Committee to examine pay in the early education sector.¹⁶

So, was Ireland's Budget 2022 on October 12 2021 the turning point and generational shift the government claimed it to be for the care economy?¹⁷ Certainly, a social investment approach is evident in the Budget, with €716m invested in the early childcare and education sectors. This, while welcome, is far from feminists demands for a universal state-funded childcare infrastructure.¹⁸ Ireland's government remains reluctant to commit to a fully universal state childcare system, believing that the path dependency of a commodified private sector means only a hybrid system is feasible or plausible. As for affordability¹⁹ and accessibility, price freezing does little to alleviate pressure on families when Ireland's childcare fees are among the highest in the OECD.²⁰

"The importance of the care economy in Ireland was laid bare during the pandemic... [yet] we see no evidence of transformative investment towards a universal public childcare model"

The importance of the care economy in Ireland was laid bare during the pandemic, providing a valuable opportunity to address its longstanding issues. However, despite this, we see no evidence of transformative investment towards a universal public childcare model. Similarly, initial feminist assessments of the recovery plans across the EU indicate that they name-check gender²¹ but fail to resource or prioritise care. Yet advocates and activists continue to argue for a care-led recovery²² grounded in a feminist ethics of care²³ that can deliver a sustainable and gender-equal future.

We await Ireland's forthcoming constitutional amendment on care and gender equality and hope this will intensify pressure to de-commodify the care economy in Ireland.

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The pandemic pushed Ireland's care sector to breaking point, now activists are demanding action – Mary Murphy & Pauline Cullen

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