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The COVID-19 pandemic has increased the care burden of women and families

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ABSTRACT
While women were already doing most of the world’s unpaid care work prior to the onset of the COVID-19 pandemic, emerging research suggests that the crisis and its subsequent shutdown response have resulted in a dramatic increase in this burden. It is likely that the negative impacts for women and families will last for years without proactive interventions. What we commonly refer to as “the economy” would not function without the (often unrecognized) foundation of work provided by the “care economy”: the reproduction of everyday life through cooking, raising children, and so forth. The paid economy has slowed not only because people are physically not allowed into workplaces, but also because many families currently need to raise and educate their children without institutional support, which is reducing remunerated working hours and increasing stress. It has long been recognized that gross domestic product ignores the care economy and heterodox economists have promoted alternative economic systems that could value care work and facilitate a fairer sharing of domestic labor while promoting environmental and economic sustainability. This policy brief builds on recent work on the care economy to explore implications of the COVID-19 pandemic and opportunities for addressing the burden of unpaid care work.

The care economy: the invisible and unpaid work of women

The work each of us does to maintain everyday life for ourselves and our family depends on our economic and social status and personal family situation, but might include raising children, cooking, cleaning, fetching water and firewood, caring for elderly relatives, shopping, household management, as well as mental tasks such as planning schedules and performing emotional labor such as tending family relationships. Of course, not all of this work is done by females, but globally women and girls are responsible for 75% of unpaid care and domestic work in homes and communities every day (Moreira da Silva 2019). The International Labour Organisation (ILO) calculates that on average women around the world perform 4 hours and 25 minutes of unpaid care work every day compared with 1 hour and 23 minutes for men (Pozzan and Cattaneo 2020).

This unpaid care work is variously called the care economy, the core economy, and the reproductive economy. Informally, it is sometimes referred to as the hypocrisy economy, when people talk about empowering women because they now also work outside the home in the paid economy, in addition to taking care of their children and home, without any systemic attempt to encourage or enable men to take more responsibility. This is what sociologist Arlie Hochschild famously referred to as “the second shift” based on her studies of heterosexual couples in the 1970s and 1980s (Hochschild and Machung 1989).

More recently, feminist economists have drawn attention to the “third shift” which refers to the undervalued and unpaid emotional labor that is mostly taken care of by women. Sociologist Heejung Chung (2020) describes the situation as “ensuring the emotional wellbeing of not only…children but also parents and other family members. In other words, they are in charge of the mental load of worrying about the family.” Despite claims that women can “have it all” (Slaughter 2015), this aspiration is a myth for many women. Unpaid care responsibilities have a negative and measurable impact on women’s participation in the paid economy. The ILO (Addati et al. 2018) estimates that 606 million women, or 41% of those currently inactive from the standpoint of formal employment, are outside the labor market because of their unpaid care responsibilities.
When promoting policies to facilitate the participation of women in the paid economy, flexible working is often promoted as a solution. However, studies in several countries show that more adaptable working arrangements further cement traditional gender roles. For example, while it enables mothers to combine paid work with additional hours of unpaid care work, flexible working allows fathers to work additional (often unpaid) hours in their jobs (Chung and Van der Lippe 2018).

**The care economy versus gross domestic product**

The way we currently measure our economies ignores the reproductive work of everyday life that benefits the whole society but is carried out for “free” by parents and other family members, usually women. However, this work is valued when the work is done by people outside the household and compensated. For example, when childcare is provided by paid workers, it then “counts” as part of the economy because it officially contributes to gross domestic product (GDP).

State provision of childcare has enabled more women to enter the paid workforce but has not generally resulted in redistribution of care tasks between men and women – although this differs between countries and families (Samman et al. 2016). It also replaces care within families with institutional care, which is quite often more stressful for children (Gerhardt 2010) and fails to value the work of parenting and the importance of attachment relationships with family members.

Many scholars and practitioners aligned with the “new economics” movement have argued for economic measures that value this core work that sustains all other work in society (e.g., Donath 2000; Dengler and Strunk 2018; Folbre 2001; Schor 2008). For example, Kate Raworth notes that although unpaid care work varies depending on development, social inequalities, conflict, and other factors, it is “unpaid, it is routinely undervalued and exploited, generating life-long inequalities in social standing, job opportunities, income, and power between men and women” (Raworth 2017).

**The pandemic response is gender-regressive**

In April, the United Nations (2020) released a report confirming that unpaid care work has increased, with children out of school, heightened care needs of older persons, and overwhelmed health services. But the pandemic and lockdown are not experienced equally: for some people, there are advantages to the ongoing COVID-19 pandemic. For example, the suicide rate in Japan was 20% lower in April 2020 than April 2019. This is thought to be due to people spending more time at home with their families, less commuting to work, and the delayed start to the school year – a time which is usually associated with increased stress for children in the country (Blair 2020). In the UK, a survey of parents found that 80% feel they have formed stronger bonds with their families as a result of the increased time together during the lockdown, despite the challenges of juggling working from home and homeschooling (Roshgadol 2020). Similar stories are reported from other countries including Turkey where parents report that the lockdown gives them an opportunity to improve their marriages and family life (Alhas 2020).

At the same time, families are under a whole new set of pressures, depending on circumstances. As feminist advocate and writer Chloe Cooney (2020) recently noted, the pandemic response is highlighting how problematic the existing system is for families: “It’s always been a farce to think about caretaking and family responsibilities as ‘personal life decisions’ that get handled outside of work hours. This current situation is almost prophetically designed to showcase the farce of our societal approach to separating work and family lives.”

The demands on working parents of our previous “normal” everyday life were already stressful, overwhelming, lonely, and nonsensical – and the burden on women tended to be worse. According to a large biological study of eleven key indicators of chronic stress levels in the UK, working mothers with two children were found under pre-pandemic conditions to be 40% more stressed than the average person (Chandola et al. 2019).

Recent research carried out in the United States shows that parents of children under 18 years of age are experiencing more stress due to the coronavirus outbreak and its response. Approximately 32% of fathers reported that their mental health was worse because of the contagion compared with 57% of mothers, suggesting that mothers may be bearing a disproportionately large part of the burden (Hamel and Salganicoff 2020).

In addition to the direct impacts of the pandemic, the response is also exacerbating inequalities. In particular, the closure of schools and nurseries has revealed the fragility of women’s participation in the paid economy. The writer Helen Lewis (2020) has noted that “school closures and household isolation are moving the work of caring for children from the paid economy – nurseries, schools, babysitters – to the unpaid one. The coronavirus smashes up the bargain that so many dual-earner couples have made in the developed world: *We can both*
work, because someone else is looking after our children. Instead, couples will have to decide which one of them takes the hit” (italics in original).

The United Nations (2020) confirms that as institutional and community childcare has not been accessible for many families during the lockdown, unpaid childcare provision has been falling more heavily on women, which has constrained their ability to work. This care work will be done more often by women than men, partly because of the persistence of traditional gender roles and partly because of the structure of women’s economic participation, which is more likely to be part-time, flexible, and less remunerative. In addition, recent data shows that adolescent girls are spending significantly more hours on chores compared to boys of the same age (UNICEF, Plan International, and UN Women 2020). Lewis (2020) goes on to further observe that “[w]ith the schools closed, many fathers will undoubtedly step up, but that won’t be universal... and single parents face even harder decisions: While schools are closed, how do they juggle earning and caring?”

Additional caring responsibilities reduce productivity which will mean women could be more likely to be furloughed or passed over for promotion – an impact that could negatively affect lifetime incomes including pensions. Sophie Walker, leader of the Women’s Equality Party in the UK has remarked, “This is an old pattern where women are expected to do the majority of care at home and then are at risk of being penalized for seeming less serious about the work and career. It is typical that policies are not designed with women in mind” (BBC 2020).

The gendered consequences of the pandemic intersect with other entrenched inequalities. For example, a recent survey in the United States reports that while more than a third of women have been laid off, furloughed, or received pay cuts due to the coronavirus outbreak, the situation for women of color tends to be even more challenging: black women are twice as likely as white men to report these financial issues, with 54% losing their job or income compared with 27% of white men (LeanIn 2020). Women are also less likely to have a financial safety net, due to greater job insecurity and lower average pay rates for women, and particularly women of color. Women are twice as likely as men to report being unable to afford necessities for more than a month if they lost their job, while black women are three times as likely as white men to report this financial insecurity (LeanIn 2020).

In previous epidemics, including SARS, swine flu, and bird flu, the negative impacts lasted for several years for women, even when men’s incomes returned to previous levels. For example, during these outbreaks parents were reluctant to take children for vaccinations – when the children later needed care during preventable diseases, their mothers had to take time off from work (Lewis 2020). Indeed, in the current crisis, reports from the United States show that parents are postponing children’s scheduled checkups and vaccinations to avoid COVID-19 which could result in increased childhood illness over the next few years, if these appointments are not rescheduled (Hoffman 2020). As a result of all of these factors, some women’s lifetime earnings will never recover unless there are proactive interventions to address gender aspects of the pandemic response.

**Take action now: a gender-equal future is everyone’s responsibility**

The need to value the care economy to tackle gender equality is acknowledged in the United Nations Sustainable Development Goal 5, Target 5.4: “recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies, and the promotion of shared responsibility within the household and the family as nationally appropriate.”

Target 5.4 was inspired by the “Triple R Framework,” which was developed to better value, include, and support the care economy. The Triple R Framework originally promoted policies to “recognise, reduce and redistribute” care work (Elson 2017) and was adopted by the United Nations Secretary-General’s High-Level Panel on Women’s Economic Empowerment, established in September 2015, as well as other women’s advocacy organizations. Recognition acknowledges that unpaid care work is often taken for granted and ignored both in households and in wider society. Recognition means taking unpaid care work into account in analysis and policy making, including recognition of social norms, gender stereotypes, and power relations and discourses (Samman et al. 2016). Reduction implies reducing the amount of care work through public investment in infrastructure, including transport, water, electricity, and cooking stoves in areas where the necessary services and equipment are lacking (Addati et al. 2018). Redistribution of care work implies sharing the work between households and society as well as between women and men. It includes challenging gender stereotypes and norms, provisioning of public childcare services for working parents, and tackling gender discrimination at work (Samman et al. 2016). Later, a fourth “R” – represent – was added to the framework, to promote the representation of carers in relevant policy making, and developing the
capacity of carers so that they can be directly included in decision making (Action Aid, Institute for Development Studies, and Oxfam 2015). The International Labour Organisation added the fifth “R” – reward – as part of their focus on decent work (Addati et al. 2018). Appropriate reward for care work is now acknowledged as essential to avoid the “care drain,” where women leave their families and possibly also migrate to provide low-paid care work to others, therefore moving their own unpaid care responsibilities onto other family members, such as grandparents or older children (Folbre 2006).

The five Rs can be promoted at all levels, from individual to institutional, and already numerous organizations are encouraging action to improve gender equality during the pandemic and beyond. For instance, a wide range of think tanks, researchers, and nongovernmental organizations (NGOs) are calling for bailout and stimulus packages that specifically include social protection measures that reflect an understanding of women’s special circumstances and recognition of the care economy. Specific proposals include paid leave for those unable to come to work because they are taking care of children or elders at home, but might well be targeted only at formal sector employees. In developing economies, the majority of female workers are in the informal sector, and so special efforts should be made to identify and compensate informal sector workers to ensure more equitable outcomes (Bhatia 2020).

Specific policies to support and protect unpaid carers during the COVID-19 pandemic focus on rewarding (paying) and redistributing care work (UN 2020; Alon et al. 2020):

- Government subsidies to replace pay for workers who are unable to work (or who work reduced hours) while caring for children while school and daycare is closed due to the pandemic.
- Removing the requirement (for carers) to actively seek work in order to be eligible for unemployment benefits.
- Extending unemployment benefits or other cash transfer schemes to those resigning from employment to provide child care or other unpaid care work due to the pandemic.
- Expanding access to paid family leave and paid sick leave.

UN Women (2020) has also facilitated a Women Leaders’ Virtual Roundtable on COVID-19 to promote representation of women and girls as central to pandemic response efforts.

Importantly, UN Women notes that while the majority of care work takes place in private homes, it is still a relevant issue for policy makers who should “support an equal sharing of the burden of care between women and men.” According to the organization’s executive director, Anita Bhatia (2020), there is great opportunity to “unstereotype” the gender roles that play out in households in many parts of the world. UN Women encourages governments, especially male leaders, to join the HeForShe campaign that calls on men and boys to ensure that they are doing their fair share at home.

The ILO goes further, arguing that redistribution of paid work between men and women in the home is not enough. The organization has recently argued that “[i]f we are to come out of this crisis with more equitable societies, women will need to be fully involved in the rethinking and redesigning of the world of work post-COVID-19” (Pozzan and Cattaneo 2020). Some hope for rebalancing traditional gender norms and practices comes from recent research on the impacts of the pandemic on gender equality. For instance, Alon et al. (2020) suggest that the lockdown will result in many fathers taking on some additional child care and home-schooling responsibilities. Changes in gender roles following World War II lead researchers to suggest that although this may not be a truly equitable division of unpaid labor, many fathers are likely to greatly expand their child-care hours, and accordingly increase their attachment to the children and gain practical experience caring for children for longer periods. This trend could help to push social norms toward more equality in raising children, domestic work, and gender norms more generally (Alon et al. 2020).

United Nations trade officials Isabelle Durant and Pamela Coke-Hamilton (2020) also call for COVID-19 response measures that include informal, part-time, and seasonal workers, most of whom are women. This phenomenon is especially relevant in female-dominated industries such as hospitality, food preparation, and tourism which are now temporarily closed in many places due to social distancing measures. They proceed to observe that “[t]he reallocation of public funds should avoid any possible increase in the burden of women as principal suppliers of unpaid work.”

Researchers are pushing for gender mainstreaming in the policy response to the COVID-19 pandemic. Epidemiologists and other infectious disease experts are confident that there will be future epidemics and it is essential that we give full consideration to the impacts of policies on children, families, and women. Lewis (2020) has further noted that “[f]or too long, politicians have assumed that child care and elderly care can be ‘soaked up’ by private citizens – mostly women – effectively
providing a huge subsidy to the paid economy. This pandemic should remind us of the true scale of that distortion” (Lewis 2020). Another group of researchers recently spoke out in a comment in The Lancet, calling on governments to avoid perpetuating gender and health inequalities through proper consideration of gender norms, roles, and relations. Like the ILO, they also call for incorporation of the voices of women to be better represented in responses and policies (Wenham, Smith, and Morgan 2020). It further merits recognizing that many men and boys are at home more during the COVID-19 pandemic and the circumstances provide an opportunity for parents to teach boys about essential care tasks, and for men to model equal participation in care work at home and in the wider family (Promundo 2020).

The ILO and the United Nations Children’s Fund (UNICEF) have jointly called on businesses to give more support to working families during the COVID-19 pandemic and associated response measures (ILO 2020). The preliminary guidance encourages organizations to provide greater social protection, particularly to individuals on low incomes, to minimize impacts on families. Suggested practices include flexible working arrangements, paid leave to care for family members, and access to quality, emergency childcare (ILO 2020).

Conclusion: What will the care economy look like in the post-COVID-19 economy?

Organizations focused on new economic systems have generated research and practical policy interventions to move society toward environmental stability, economic sustainability, and social equity – in terms of income and employment as well as unpaid care work and voluntary community work. For example, the London-based New Economics Foundation (NEF) published a widely disseminated report in 2010 entitled 21 Hours which observed that a thoughtful redistribution of paid work could facilitate lower unemployment, lower carbon emissions, improve well-being, reduce inequalities, and create more time to enjoy life (Coote, Franklin, and Simms 2010).

The authors argued for a much shorter “normal” working week that would make it possible for paid and unpaid work to be allocated more equally between women and men, for parents to spend more time with their children, and for people to participate in various voluntary activities. In addition, they wrote that “(b)usiness would benefit from more women entering the workforce; from men leading more rounded, balanced lives; and from reductions in work-place stress associated with juggling paid employment and home-based responsibilities.”

Various campaigns around the world for a four-day working week build on this research from a decade ago (UN 2020; Alon et al. 2020), which has been gaining support from some political parties and trade unions, particularly in the UK. NEF researcher Aidan Harper (2019) reminds us that working time should be a matter of public discussion, because it is not natural or inevitable, but a social construct we can collectively change. And indeed some countries have experimented successfully with alternative systems for valuing care work. For instance, in Japan, carers (including family members) can earn credits for caring for the elderly through the Fureai Kippu welfare system. They can save the credits for their own care as they age, transfer credits to family members, or exchange credits for services (Poo and Gupta 2018). This enables family and friends to provide care for the elderly in their own homes while receiving valuable compensation.

As research into the current impacts and longer-term consequences of the pandemic gather pace, an emphasis on heterogeneity of experience could be useful to support interventions toward greater equality. This policy brief has focused on how gender inequalities tend to be embedded during epidemics; many other factors could be incorporated into future research to enable a more nuanced understanding of age, life stage, disability and health status, household composition, marital relationships, ethnicity, and socio-economic status.

It is clear that in order to prevent further deepening of gender inequality, it is necessary and possible to take account of the additional unpaid care burden placed on women and families during the COVID-19 pandemic. Given that a large proportion of people have reservations about going back to their pre-pandemic “normal” life, and are interested in making changes in their own lives and in wider society (RSA 2020), this could be an opportunity for systemic changes that enable care work to be valued and accounted for in economic and social policies. But will we have the time and energy to push for these changes, now that we have added a “fourth shift” (homeschooling while working) to our burden of unpaid care work?

Notes
1. UN Women is a United Nations subsidiary organization known more formally as the United Nations Entity for Gender Equality and the Empowerment of Women (see https://www.unwomen.org/en).
3. See https://www.4dayweek.co.uk.
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