Feminization of poverty, unpaid care work and women’s empowerment

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It is evident that the pandemic impacts us all, but not in the same way. It is not only pushing more and more people into poverty, but also disproportionately affecting people who have been systematically discriminated against along gender, class, race, and sexual orientation.

Particularly worrisome is the situation of women and girls worldwide. The COVID-19 crisis brings together all the ingredients of a devastating cocktail that could widen gender inequalities and put the gains that women have painstakingly fought for over decades under threat.

Let us briefly overview why women have been disproportionately impacted:

1. Women are the majority of front-line responders. Globally, 88 per cent of personal care workers and 69 per cent of health professionals are female. Due to occupational segregation, women are overrepresented in the lowest levels of health-care response (e.g. nurses and social workers). For example, in Latin America, the income of women working in the health sector is 25 per cent lower than that of men in the same sector (ECLAC 2019). These women are among those with the longest working hours and at the highest risk of infection.

2. Confinement measures are also threatening the lives and security of women. Gender-based violence often increases during emergencies, whether these be natural disasters, economic crises, conflicts or disease outbreaks, and this pandemic is no exception (UNDP 2020). Stuck at home, women are forced to spend much more time with their aggressors, with scant possibility to ask for help, and without access to normal support services. The UK, for example, registered a doubling in the number of feminicides in the first three weeks of lockdown (Grierson 2020).

3. There is a real risk that the progress made in labour market inclusion of women will be reversed due to their concentration and overrepresentation in the most affected sectors, such as retail and tourism. The International Labour Organization (ILO) estimates that, globally, 58.6 per cent of employed women work in the services sector, compared to 45.4 per cent of employed men (ILO, 2020a).
4. Quarantine and public health measures are also having an adverse effect on informal work, where women are also overrepresented (ILO, 2020b), and (very?) small businesses, where women entrepreneurs are also proportionally more represented.

5. The working conditions of domestic workers, the majority of whom are women, have become even more precarious. Yet, with limited rights and hardly any job security, they face the risk of increased pressure from employers, which in turn leads to further deterioration of their working conditions. Moreover, if domestic workers perform their work because of social distancing measures or restrictions on movement, the lack of formal contracts often generates additional uncertainty. In many countries, they have been completely abandoned, both by their states and by their former employers. For example, in Mexico, since March 2020, there have been reports of massive layoffs of domestic workers without any compensation (Forbes 2020).

While these 5 areas are critical, one of the most striking situation beyond income and working conditions is that the pandemic has exposed the unjust social organization of care and how insufficient the modest progress achieved has been in recognizing, reducing and redistributing unpaid care and domestic work around the world.

Even before the pandemic, globally, women and girls carried out on average three times the amount of unpaid care and domestic work of men and boys. Women and girls living in poverty and those from marginalised groups were already spending 12.5 billion hours a day caring for others for free (Lawson et al. 2020).

This amount of time will skyrocket now with school closures, new health and hygiene requirements, such as handwashing and taking care of sick family members. Curfews and self-quarantine measures are likely to make these tasks even more challenging.

Children and adolescents confined at home require additional care 24/7. Due to structural discrimination and negative stereotypes, the burden of this additional work is falling mainly on women.

As hospitals and health centres are struggling to deal with infected patients, much of the health-care burden is being shifted to households. Non-COVID-19 related health services have been scaled down. This means that families often need to provide support to those who suffer from other illnesses, including chronic illnesses. Moreover, COVID-19 infected patients may be released early to make space for others, but still require care and assistance at home.

The unequal distribution of care has an enormous impact on the health and wellbeing of women. It also hinders their access to the labour market and the enjoyment of several human rights.

The pandemic is thus increasing poverty and extreme poverty among women and girls. Against this backdrop, women’s rights and economic empowerment must be placed at the center of the public agenda. States should rebuild economies that are not only more prosperous and resilient but also more equitable.
Opportunities

The pandemic is also opening up opportunities for progressive reforms that could ultimately reduce inequalities and the gender gap.

1. Increased coverage of social protection

Since March, several governments around the world have begun to announce social protection measures in reaction to the sharp drop in workers’ and households’ incomes. They have included cash transfers, transfers in kind (such as food, face masks and medication), the suspension or exemption of payments for the provision of basic services (such as water, electricity, natural gas, telephone, Internet, etc.), social protection measures for formal workers, and other direct benefits for people and families (such as tax relief and price controls, among others).

In Latin America, for example, according to ECLAC, cash and food transfers are reaching 90.5 million households, or about 58% of the region’s population.

While these are positive measures, given the longer-term impacts of COVID-19 on gendered and multi-dimensional poverty, social-protection responses that do not address the fundamental drivers of gender inequality, including unpaid care and responsibilities, will entrench already existing gender inequalities. Now there is a critical window of opportunity to develop more gender-effective social-protection measures to address future pandemics.

2. Gender equality in taxation policies

Policy choices to raise and redistribute income must have an explicit gender approach. For example:

1. Eliminate explicit and implicit tax-related gender biases that discourage women from entering and remaining into the labour market and reproduce traditional gender roles and stereotypes.
2. Avoid increasing indirect taxation. Value Added Taxes (VAT) carry a gender bias because women’s consumption patterns differ from those of men, as they purchase more goods and services with the aim of promoting health, education and nutrition. Thus, women bear a larger VAT burden.
3. Consider period poverty. Female sanitary product should be considered basic goods and they should have a reduced rate or be exempted from VAT.
4. Combat tax evasion and avoidance, which are major contributors to gender inequality. They limit the resources available to governments to increase equality.
5. Increase taxation of capital and wealth, as they play a crucial role in reducing inequality - through redistribution within the tax system - and in improving revenues to finance social protection and infrastructure.

3. Public is back!

One of the silver lining of this terrible pandemic is the support for public services it has generated.
These crises have recalled the vital importance of solidarity mechanisms and the critical role of public services to ensure the enjoyment of fundamental rights such as health and education.

The pandemic has made starkly clear that the formal economy cannot keep on depending on the invisible work of women and girls.

States have an opportunity now to invest in the care sector, including childcare support for working parents and care for the elderly.

Robustly funded public services are essential for eliminating the unequal division of unpaid care work between women and men, in addition to contributing positively to the quality of care provided.

There is no doubt that if states use the opportunity to invest in care services and to reorganize care responsibility so that it is shared by the state, the market and the families, we will emerge from this terrible pandemic with stronger and more gender-inclusive societies.