

## *The Virus Moved Female Faculty to the Brink. Will Universities Help?*

The pandemic is a new setback for women in academia who already faced obstacles on the path to advancing their research and careers.

By Jillian Kramer

Oct. 6, 2020

Whatever big plans Lisa Warner had for the year, the pandemic scrambled them. It forced online the biochemistry classes she taught as an assistant professor at Boise State University in Idaho, and it temporarily shut down her laboratory. Her 4-year-old son's day care closed, and Dr. Warner felt her productivity wane. She feared for her chances of receiving tenure, the long-term job security that most early-career academics ardently pursue, by the 2024 deadline in her contract.

Around the same time, Maria Fernanda Escallón, an assistant professor of anthropology at the University of Oregon and mother to a 3-year-old daughter, was working from a walk-in closet and occasionally a backyard shed to steal quiet moments away from the demands of caregiving. She was trying to write a book, one of many publications she feels she will need to secure tenure.

Late at night, she swapped horror stories of lost time and depleted research over email with other women faculty.

"I hope the administration realizes that anything they do now to alleviate this issue for caregivers will directly impact how the professoriate will look five to 10 years from now — how diverse it will be, and how many women will be in positions of power within academia," Dr. Escallón said.

The pandemic has laid bare gender inequities across the country, and women in academia have not been spared. The outbreak erupted during universities' spring terms, hastily forcing classes online and researchers out of their laboratories. Faculty with young or school-aged children — especially women — had to juggle teaching their students with overseeing their children's distance learning from home.

Many universities struggled to put meaningful policies in place to help faculty, especially caretakers and women. During the summer break ahead of this fall semester, administrators at some institutions, including the ones where Dr. Warner and Dr. Escallón teach, began to reassess and develop strategies that experts say are a palatable start to stymieing crises caused by Covid-19.

But the issues that women in academia are now facing are not new. Instead, they are more severe versions of longstanding gender gaps that already cause universities to hemorrhage female faculty, particularly women of color, and will require measures that go beyond institutional responses to the pandemic.



Maria Fernanda Escallón at the University of Oregon said the decisions that administrators make now will affect who works as a professor years into the future. Moriah Ratner for The New York Times

## Unequal Balancing Acts

Multiple studies have already shown that women have written significantly fewer papers than their male counterparts during the pandemic. Reports showed that at least one-third of working women in two-parent households exclusively provided child care after schools and day cares shuttered and babysitters quit or were let go because of Covid-19. Years of research have proven that female faculty struggle to balance work and family, often causing them to exit academia — or what experts refer to as “leaking from the academic pipeline.” Anecdotal reports and Twitter outcries highlighted female faculty suffering from reduced productivity, which could affect their ability to get tenure.

At the same time, the country was reckoning with its history of racial injustice, placing an added burden on women of color in academia. They were faced not only with the pandemic’s fallout — which has disproportionately affected and killed Black and Latino Americans — but also the “emotional, physical and social ramifications” of police violence and unrest, said Michelle Cardel, a nutrition scientist at the University of Florida who has studied how the pandemic affects early-career women scientists. She pointed out that faculty of color often provide support and mentorship in such circumstances.

Some women faced harsher student evaluations during the outbreaks, too. Research shows that gender bias is rampant in end-of-term evaluations, with women and people of color more likely than men to get comments related to “their appearance or the tone of their voice — things that are less closely related to the ability to successfully teach,” said Jenna Stearns, an economist at the University of California, Davis.

Women are more likely to provide child care and step into caretaking roles than men. Because of that, experts have warned that evaluations might be more critical of women during lockdown.

Faced with these situations, universities have had mixed records in their attempts to alleviate the burdens of faculty and caretakers. Joya Misra, a sociologist at the University of Massachusetts, Amherst, who studies gender-related faculty inequities, said that at some institutions, “there’s not a thoughtful recognition of what is actually happening” to female faculty and how the pandemic has made existing problems more severe.

This summer, for example, Florida State University alarmed and upset employees when it announced that they were not allowed to care for children while working remotely. (The university has since amended its stance.) At the University of Michigan, unionized graduate instructors went on strike when the administration would not agree to a list of demands that included flexible subsidies for parents. It later established a temporary expansion of an existing child care subsidy.

But other universities have moved to address the issues more directly, instituting policies meant to help faculty achieve tenure and prevent women and caretakers from suffering short-term academic losses.

Like many women, Dr. Warner wrestled with the decision of whether to apply for a tenure extension, worrying it might be held against her. Alex Hecht for The New York Times

## Ticking Clocks

Tenure — an indefinite appointment that comes with a raise — is usually achieved based on a combination of research, coursework and service, with the heaviest weight placed on research. As recently as spring 2019, women accounted for 40 percent of all tenured faculty in American universities; and women of color accounted for around 11 percent of all full-time faculty in degree-granting postsecondary institutions in the fall of 2018.

An interruption to research can hamper an early-career academic's ability to gain tenure. And the coronavirus crisis is causing such delays for many faculty.

Most universities provide gender-neutral tenure clock extensions, which prolong the time a professor has to apply for tenure by one year. Back at Boise State, Dr. Warner was contemplating seeking such an extension. But the application was arduous, and she was mired in an endless to-do list of child-care duties, online coursework and one-on-one time with students.

She also worried about the implications of asking for an extension: What if, she feared, her decision was later held against her — framed as a woman, a mother, who couldn't keep up? Some research bears out her concerns, showing those policies traditionally don't benefit men and women equally.

The university's interim provost, Tony Roark, heard rumblings that some faculty, like Dr. Warner, were hesitant to tap into the institution's extension policy for "fear of being perceived as unwilling to step up or incapable of adapting to the circumstances," he said. So, the university allowed faculty to opt in to a guaranteed extension, no questions asked.

Dr. Warner requested and received her one-year tenure extension in June. Twenty other faculty members, including eight women, have opted into the policy, too.

Boise State also allowed faculty to ask for their spring 2020 student evaluations to be expunged, as they might have been influenced by the pandemic's disruptions to classes.

And instructors at the university won't have to worry about subtle gender slights in future evaluations, such as comments about mothers bouncing crying babies during online classes. Dr. Roark said the university has completed a policy that was in the works pre-pandemic: Faculty can now request the removal of portions of student evaluations that evince such bias. At least three professors have taken advantage of the policy, he said.

At the University of Oregon, some new policies initially gave Dr. Escallón a sense of relief. The administration conducted a survey to better understand the toll of Covid-19 on caregivers and faculty of color, pushed most of its classes online and offered its own automatic optional tenure clock extension.

But as time went on, she worried the university's solutions didn't address additional problems she and other caregivers were experiencing.

Dr. Escallón co-wrote a letter to the university's administration in June, requesting additional action: repurposing funds to support caretakers; waiving all nonessential service, such as serving on committees and administrative duties; suspending standards for research productivity; and giving teaching relief to faculty with the heaviest caretaking loads.

So far, the university has taken some additional steps. It rolled out an Employee COVID-19 Relief Fund for all workers, funded by donations (which falls short of the letter's request for reallocating unused funds to caregivers). And in September, it introduced two online networks where employees in need of caregiving and support can connect with one another or find others providing babysitting, tutoring or elder care.

Dr. Escallón said she is encouraged that the administration has been responsive, but she also remains on the lookout for additional policies more targeted to ensure that women don't lag behind their male peers.

Dr. Escallón in her home office in Eugene, Ore. She swapped horror stories with other women at the university about lost time and depleted research while juggling caregiving at home. Moriah Ratner for The New York Times

## First Steps

At Boise State, Dr. Roark said administrators will be planning for two calendar years of "disruption and recalibrating expectations." They will also be fortifying existing policies and creating new ones to face up to the reality that women on the faculty need longer-term support.

"It's really just been brought into stark, stark relief during the pandemic," he said, "but those needs will remain, even when they are less intense."

When universities moved classes online, one of the reasons that women were hit hardest is that they have higher teaching loads and also take on more academic service roles than men.

Caitlyn Collins, a sociologist at Washington University in St. Louis, said teaching and service are often stereotyped within universities as more feminine than research.

"Caregiving and femininity are closely linked in U.S. society — seen as an inherent or natural feminine trait rather than a skill that is acquired," she said. "This means that women are more likely to be asked to do this work, and may be more likely to agree or volunteer to fill these roles."

Women are also more likely to mentor students, who "disproportionately come to women for advice," said Maike Philipsen, a sociologist at Virginia Commonwealth University whose research focuses on faculty work-life balance.

And during the strains of Covid-19 and lockdown, students are likely more stressed out than usual, something Dr. Warner said she observed as she “spent a lot of one-on-one time with students that I wouldn’t necessarily have spent with them in non-pandemic times.”

As universities struggle to retain students and push resources toward online teaching, experts say it’s important to change the benchmarks of success to move away from research and to recognize teaching and service work as more valuable criteria for tenure, promotion and salary increases.

“Not only is the pandemic not going anywhere, but work-life integration was the barrier for women’s success even before Covid-19,” Dr. Philipsen said. “And if there ever is an era of after Covid-19, work-life integration will continue to be a barrier to women’s success unless we begin transformative change.”

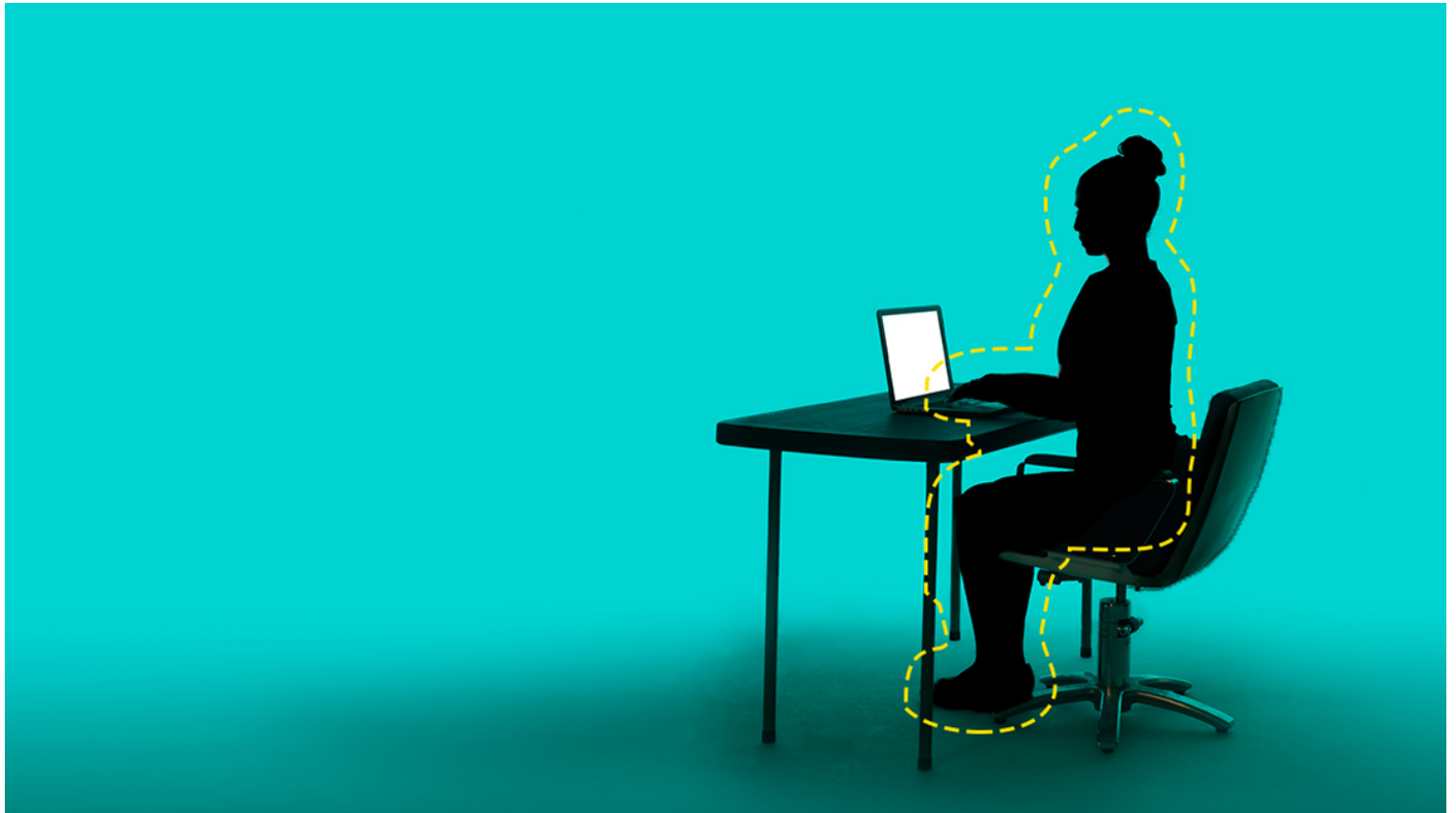
<https://hbr.org/2020/09/dont-let-the-pandemic-set-back-gender-equality>

GENDER

# Don't Let the Pandemic Set Back Gender Equality

by [Deepa Mahajan](#) , [Olivia White](#) , [Anu Madgavkar](#) and [Mekala Krishnan](#)

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Progress towards greater gender equality has been hesitant and halting over the past five years and the Covid-19 pandemic now risks sending it into reverse. Our analysis shows that women's jobs are 1.8 times more vulnerable to this crisis than men's jobs: Women make up 39% of global employment but account for 54% of overall job losses as of May 2020. At the same time, the burden of unpaid care, which has risen in the pandemic, falls disproportionately on women.

This backwards move is not just a blow to women and societal progress but also to the economy and business. If no action is taken to counter the regressive effects, we estimate that global GDP growth could be \$1 trillion lower in 2030 than it would be if women's unemployment simply tracked that of men in each sector. Conversely, taking action now to advance gender equality could add \$13 trillion to global GDP in 2030, compared with no action. A middle path — taking action only after the crisis has subsided — would boost the economy but reduce the potential opportunity by more than \$5 trillion.

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Beyond the economic impact, business leaders have a strong interest in furthering gender equality during this crisis. McKinsey research has found that gender diversity is a key to financial success: Companies in the top quartile for gender diversity on executive teams were 25% more likely to have above-

average profitability than companies in the fourth quartile. Moreover, companies

now pulling back on diversity and inclusion may be placing themselves at a disadvantage by limiting their access to talent, diverse skills, leadership styles, and perspectives.

Reversing the regressive trend will require, among things, investment in education, family planning, maternal mortality prevention, digital inclusion, and unpaid care work. We estimate that incremental public, private, or household annual spending on these five areas would need to rise 20 to 30% in 2025 above the “business as usual” levels, or a total of \$1.5 trillion to \$2.0 trillion. By comparison, the economic benefits of narrowing gender gaps are six to eight times higher than the social spending required, we estimate. As we discuss below, investment is just the start.

### **The Covid Setback Follows a Period of Scant Progress.**

Our estimates of the economics of gender parity date back to the McKinsey Global Institute’s (MGI’s) Power of Parity work in 2015, which analyzed 15 gender-equality indicators across four categories: equality in work, essential services and enablers of economic opportunity, legal protection and political voice, and physical security and autonomy. Using these indicators, MGI established a strong link between gender equality in society and gender equality in work — and has shown that the latter is not achievable without the former.

Despite growing awareness of and support for greater gender equality, tangible progress toward equality in work and society stagnated in the five years between 2014 and 2019. Some indicators did improve, such as maternal mortality, the share of women in professional and technical jobs, and political representation. Overall, however, gender equality in work continued to lag behind gender equality in



society. The level of female participation in the labor force has not budged — it sits at about two-thirds that of men — although there are regional and country variations.

Now, with Covid-19, women have borne the brunt of the economic impact. Women's employment is dropping faster than average, even accounting for the fact that women and men work in different sectors. The nature of work remains significantly gender specific, with women and men tending to cluster in different occupations. This shapes the gender implications of the pandemic: Our analysis shows that globally female jobs are 19% more at risk than male ones simply because women are disproportionately represented in sectors negatively affected by the Covid-19 crisis, such as accommodation and food service.

Yet the gendered nature of work across industries only explains one-fourth of the difference between job-loss rates for men and women. In the United States, for example, women made up 46% of workers before Covid-19. Factoring in industry-mix effects suggests that women would make up 43% of job losses. However, unemployment data indicate that women make up 54% of the overall job losses to date. In India, women made up 20% of the workforce before Covid-19, and their share of job losses resulting from the industry mix alone is estimated at 17% — they actually account for 23% of overall job losses.

What factors explain the other three-quarters? An important one is the burden of unpaid care, the demands of which have grown substantially during the pandemic. Women do an average of 75% of the world's total unpaid-care work, including child care, caring for the elderly, cooking, and cleaning. As Covid-19 has

disproportionately increased the time women spend on family responsibilities, women have dropped out of the workforce at a higher rate than explained by labor-market dynamics alone.

Another factor could be Covid-19's disproportionate impact on female entrepreneurship, including women-owned microenterprises in emerging economies, where such enterprises account for a high share of female labor-force participation. The crisis may have made some family resources scarce, including investment capital or digital devices that families must now share as children's schooling has gone online. Attitudes also shape how women experience the economic consequences of a crisis relative to men: Traditional mindsets may be reflected in current decisions, at the organizational level or even within the family, about who gets to keep their jobs. For example, according to the global World Values Survey, more than half the respondents in many countries in South Asia and MENA agreed that men have more right to a job than women when jobs are scarce. About one in six respondents in developed countries said the same.

### **Three Areas for Action**

The strong message emerging from our research is that policy makers and business leaders need to act fast to push for greater gender equality. Overarching areas for action include reducing the gender imbalance in child care responsibility, for example through better recognition of unpaid work and rebalancing between men and women; closing the gender gap in digital inclusion, which is especially important as remote work and online shopping have become more prominent during the pandemic; and tackling attitudinal biases, potentially through

campaigns and enlisting male champions to help drive home the idea that a larger number of women at work represents socially and economically beneficial progress.

We recommend CEOs start with these three actions:

### **1. Track the data.**

Business leaders will need transparency on gendered regressive impacts within their company. Are job losses or requests for leave higher among women? Have promotion rates of women slowed? With new hiring, is the pre-Covid gender balance level being maintained, or is there slippage? Such information for the company as a whole can be accompanied by more detailed data by department and tenure band.

### **2. Take action.**

Many companies have already put in place policies to enable flexible working, but as lockdowns extend in many parts of the world, they will need to more actively consider how to factor the pandemic's impact into performance reviews, prevent employee burnout, and ensure that traditional diversity practices, such as sponsorship programs or employee resource groups, are reinvented for a virtual world.

Companies that are rehiring need to ensure that hiring practices consider gender diversity. Those investing in reskilling need to ensure female workers are actively encouraged to participate in such programs. In this Covid-19 period, leading by

example can help, including encouraging employees to share the unpaid care burden openly and willingly, setting boundaries for those working remotely between office life and home life, and ensuring that your company shows care for the health and mental well-being of women employees.

### **3. Look for opportunities to increase gender equity throughout your corporate ecosystem.**

How can your products and services help counter regressive effects? Deliberately identifying such impacts and potential interventions can make a difference. For example, financial services firms can ensure their products reach women entrepreneurs, and technology firms can ensure their products are designed with diverse perspectives in mind. Companies can also take action to encourage gender diversity not just within their organizations but also more broadly across their supply chains and distribution channels.

The evidence from our research is clear: Greater gender equality is good for the economy and society as a whole. If we act now to remove barriers to greater female labor-force participation and a bigger role in society, we can reap the economic and social benefits. If we delay, the benefits will be more meager, while allowing the disappointing status quo to continue will result in a backwards slide. Parity is powerful. It needs to move forward.

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### **This article is about GENDER**

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# A feminist perspective on COVID-19 and the value of care work globally

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The shared response to the COVID-19 crisis demonstrates that the vast majority of society believes human wellbeing – not economic growth – should be at the centre of policy. COVID-19 exposes the foundational role of care work, both paid and unpaid, to functioning societies and economies. Focusing on ‘production’ instead of the sustainable reproduction of human life devalues care work and those who perform it. Women's physical and mental health, and the societies that rely on them, are at stake. When these policies are formulated, the field of feminist economics has valuable lessons for mitigating hardships as countries navigate the related economic fallout. A comprehensive response to the COVID-19 crisis must recognize this gendered work as an integral part of the economic system that promotes human wellbeing for all.

## KEYWORDS

care, COVID-19, health, social reproduction, work

## 1 | INTRODUCTION

Natural disasters and health crises have gendered dimensions, a point repeatedly demonstrated across disciplines and an important argument raised in this publication by Boncori (2020) in the case of the coronavirus pandemic and academic lives. Early evidence of a gender disparity in mortality in China indicates a disadvantage for men, who are more likely to have a laboratory-confirmed case, but the gender differential is reversed for other, less clear-cut dimensions of the disease (Chen et al., 2020; Guan et al., 2020). Of particular concern is the overrepresentation of women among low-wage workers on the frontline – including home health aides, nurses and nursing assistants – and at the other end of the supply chain – including those employed in the logistics and packing industry (Himmelstein & Venkataramani, 2019). Women also stand to face the starkest employment losses, as retail, food

service and hospitality are among the industries already hardest hit. In most developed countries, low-wage workers at risk of unemployment are disproportionately minority women, particularly women of colour (Averett, Argys, & Hoffman, 2018).

The gendered dimensions of this crisis also apply within the home, where the gendered division of work has been slow to change. Women still do more of the unpaid care work than men around the globe (International Labour Organization [ILO], 2018; Sayer, 2005). The COVID-19 outbreak has increased the need for home-based caring labour not only because of the closing of schools and childcare facilities, but also because more people are sick and need care.

Women's physical and mental health, and by extension, the societies that rely on women and the work they do, are at stake (Cohen & Venter, 2020; Geurts et al., 2005).

This crisis points a spotlight on the need for care, both medical care by paid healthcare personnel as well as care in the home. Yet care work is often undervalued and invisible (Himmelstein & Venkataramani, 2019; Sayer, 2005). The perceived low value of care work — paid and unpaid — and women's disproportionate responsibility in performing this work is an issue that has garnered long-term attention in the field of feminist economics, with valuable lessons for understanding how women are impacted by COVID-19 and mitigating hardships as countries navigate the related economic fallout (Power, 2004).

## 2 | SOCIAL REPRODUCTION AND CARE

Feminist research in economics has consistently highlighted the ways production depends on paid and unpaid work (Laslett & Brenner, 1989; Power, 2004; Vogel, 2013). *Social reproduction* includes the day-to-day work assigned largely to women — household labour, physical and emotional caregiving, and other work to meet human needs — required to 'maintain existing life and to reproduce the next generation' (Laslett & Brenner, 1989, p. 383). Without the day-to-day work of social reproduction, entire social systems would collapse.

The value of women's paid and unpaid labour is increasingly apparent with the spread of COVID-19: as schools close, the role of teachers — disproportionately women — and public education as a mechanism of support and caregiving for families is laid bare, as women working for pay scramble to arrange childcare. Across many countries, women — especially women of colour — are overrepresented among low-wage workers on the front line during the COVID-19 crisis. Many have no choice but to go to work even when they are at risk of contracting the virus or they are sick, and they cannot telecommute. Nurses — disproportionately women — and other first responders must continue to work for pay. Women in grocery stores, where task segregation often places them in face-to-face interactions with customers, are essential workers and are newly being recognized as such (Tolich & Briar, 1999).

Time-use surveys show that, as a group, women work longer than men in total, and they perform more unpaid work than men (ILO, 2018; Sayer, 2005). Since women bear responsibility for social reproduction, during crises they may face increased pressure to substitute unpaid work for lost income, for example, taking care of an ill relative at home rather than taking them to a clinic (ILO, 2018).

All over the world, women are also more likely to be single parents, meaning that women and their households are often more dependent on a single source of income *and* they provide financial support to more dependants on that income (Cohen, 2010). Intensified pressure is likely to impact women's mental and physical health (Cohen & Venter, 2020; Geurts et al., 2005).

## 3 | GENDER-AWARE POLICY RESPONSES

Gender-aware policies recognize women's work outside of paid employment. More broadly, policy responses from national to local levels should be developed with a feminist perspective that puts due emphasis on the value of care

and the power of interdependency, as the interchange of care and resources can sustain families and communities through difficult times (Banks, 2018; Power, 2004).

In wealthier countries, a key policy response is to expand paid sick leave and family leave benefits. In the United States, the second federal COVID-19 relief package passed on 18 March includes — for the first time — paid family and medical leave during this crisis to care for a sick or at-risk family member or oneself. This emergency paid leave policy applies to employees who need to care for children whose schools or day care facilities closed. This legislation helps to meet the needs of some workers who are balancing care responsibilities, but almost half of the US private sector workforce is not eligible. Other OECD (Organisation for Economic Co-operation and Development) countries are well ahead of the United States in terms of paid leave benefits. Further stimulus policy responses being implemented or considered across developed countries include expanded unemployment insurance, targeted cash transfers, universal basic income and support for small businesses.

In poorer countries, the impacts of COVID on caretakers will be dire. The 'social distancing' recommended in developed countries will be difficult to observe in overcrowded households and may be impossible for women to adopt. Information advising people how to care for ill household members and themselves must be made available, along with hand sanitizer in urban areas and tippy taps in rural areas. Assistance with obtaining food, medications and maintaining access to utilities is likely to be needed. Community health workers and friendship bench-type mental health support for care providers may be valuable interventions for helping people cope with psychological distress (Chibanda et al., 2016).

Efforts to mitigate intimate partner violence as tensions mount within households from the health crisis and associated economic insecurity should be prioritized. Domestic violence intensifies during disasters and crises (Gearhart et al., 2018). The COVID-19 crisis is longer term, more people are confined to their homes, there is an uncertain endpoint, many are struggling financially, and people are scared and grieving. It is difficult to overstate the scale of this problem for those who are subject to abuse of all kinds.

Moreover, the crisis cannot be used as an excuse to divert resources away from women's reproductive health care and maternal and child health. For example, under directives to free up hospital beds and medical supplies, legislators in several US states have classified abortions as elective and nonessential procedures that need to be postponed until the crisis is over. However, these restrictions do little if anything to divert necessary resources toward hospital care for coronavirus patients. Using COVID-19 as a rationale to limit women's access to reproductive healthcare services is a political manoeuvre that defies numerous studies in public health and social sciences showing the beneficial effects of investing in reproductive health. Such benefits, which include women's economic empowerment, expanded choice and a sense of greater control over their lives, are critical in times of crisis (Bärnighausen et al., 2019; Gamage, Joshi, & van der Rodgers, 2020).

## 4 | CONCLUSION

COVID-19 is not only a major economic and health shock, it may also be a major shock to social norms around the gendered distribution of work at home. Like natural disasters, a public health crisis alters daily living in such a way that may re-entrench gender norms, but also offers the opportunity to disrupt them. More parents are staying home due to workplace closures, with many employees in white-collar jobs telecommuting if that is feasible. The home, usually a black box in neoclassical economics, has suddenly become a sphere of close scrutiny in academic and media discourse around caring labour and its power relations. In two-parent households, the allocation of work within the home depends not only on gendered social norms but also bargaining power and the opportunity cost of time allocated to domestic work. These issues have garnered attention during the COVID-19 crisis as families have been confined to their homes while attempting to work and care for children at the same time.

An urgent question is whether the abrupt order for many employees to telecommute is changing the gender distribution of caring labour within the home and causing conflict in negotiating boundaries between work and family.



We expect that telecommuting in the context of COVID-19 places disproportionate burdens on women. This question fits into the broader goal of seeking to understand how the nature of work — both paid and unpaid — is changing during the enormous social and economic upheaval caused by the COVID-19 pandemic. The institutionalization of telecommuting may bring wider acceptance and adoption of other workplace policies such as job sharing and flex-time that place value on labour within the home.

COVID-19 exposes how the usual functioning of the labour market combines with gender roles to require more work from women than from men. Although many of the challenges for women are not unique to this time, COVID-19 has exacerbated their impacts, and making this an important moment to advocate for policies that support their wellbeing, and that of the society their work sustains.

Economic policy should be constructed within a broader, feminist framework of human wellbeing and justice, rather than being solely concerned with the achievement of output-based metrics such as financial stability and economic growth. At minimum, in addition to capabilities (the ability to do or be) and self-efficacy, human wellbeing requires adequate provisioning through three interconnected channels: paid labour, unpaid care activities and support from the government (Nussbaum, 2003; Sen, 1999). Paramount in this approach is the need to address other types of injustice that may intersect with gender inequality, especially by race and class. Hence, a comprehensive response to the COVID-19 crisis emphasizes social reproduction as an integral part of the economic system and judges the success of policy responses by how they promote human wellbeing for all.

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The authors have nothing to disclose and no conflicts of interest.

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