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To cite this article: Jennifer Cohen & Yana van der Meulen Rodgers (2021) The feminist political economy of Covid-19: Capitalism, women, and work, Global Public Health, 16:8-9, 1381-1395, DOI: 10.1080/17441692.2021.1920044

To link to this article: <https://doi.org/10.1080/17441692.2021.1920044>



Published online: 27 Apr 2021.



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COMMENTARY



The feminist political economy of Covid-19: Capitalism, women, and work

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ABSTRACT

Analysing the pandemic through a feminist political economy lens makes clear how gender, race, and class structures are crucial to the functioning of capitalism and to understanding the impacts of the pandemic. The way capital organises production and reproduction combines with structures of oppression, generating vulnerability among the racialised and gendered populations worst impacted by Covid-19. Using global data, this commentary shows that during the pandemic, women experienced relatively greater employment losses, were more likely to work in essential jobs, and experienced a greater reduction in income. Women were also doing more reproductive labour than men and were more likely to drop out of the labour force because of it. Analyses of capitalism in feminist political economy illustrate how capital accumulation depends on women's oppression in multiple, fundamental ways having to do with their paid and unpaid work. Women's work, and by extension their health, is the foundation upon which both production and social reproduction rely. Recognising the pandemic as endogenous to capitalism heightens the contradiction between a world shaped by the profit motive and the domestic and global requirements of public health.

ARTICLE HISTORY

Received 16 October 2020
Accepted 14 April 2021

KEYWORDS

Covid-19; capitalism; gender; unpaid work; social reproduction; public health; occupational segregation

1. Introduction

The Covid-19 pandemic is inextricably linked to capitalism, as the virus has impacted social and economic structures and has deepened the chasm between those at the top and bottom of social hierarchies. The uneven social effects of the pandemic have received increasing attention: in countries around the globe, women and people of colour have lost more jobs than white men, low-income families have experienced relatively greater hardships, and gender gaps in unpaid work within the home have widened (Kabeer et al., 2021). Yet by treating the pandemic as an external shock to the economy and society, analyses of the pandemic's impacts tend to be ahistorical and take the existing economic system as given. Less frequently acknowledged is the role that capitalism plays in causing the pandemic and in generating those patterns of impact.

This gendered and racialised history constitutes the background against which Covid-19 has unfolded. Not only has capitalism aided the transmission of Covid-19, the methods through which capital forcibly (and unevenly) integrated countries into the global economy continue to disadvantage populations that have suffered, while advantages accrue to populations that have caused suffering. Deeply intertwined in this two-way relationship between capitalism and Covid-19 are the

legacies of slavery, discrimination, and the gender, racial, and global divisions of labour. The ways in which capital organises production and reproduction combine with systems of oppression by gender and race to generate vulnerability among the populations who suffer the most adverse effects of Covid-19.¹

In a capitalist context, the pandemic has exacerbated inequities related to the gendered and racialised work of production and social reproduction. Women, especially women of colour, make up a disproportionate share of workers in poorly-paying jobs on the frontlines, where they risk exposure to the disease (Alon et al., 2020; Wenham et al., 2020). Globally, women also perform a relatively greater share of reproductive labour within the household, a workload that has grown as a result of stay-at-home orders (Bahn et al., 2020). These problems are particularly acute for single parents who work in essential jobs in areas where schools and day-care centres have closed. Many of these challenges have more severe consequences for women of colour and lower-income women, especially those who have needed to continue working outside of the home in jobs deemed essential. While scholars have recognised and documented these issues, they have neglected the linkages to the capitalist organisation of gendered and racialised work.

At its core, capitalism is about capital accumulation, or economic growth. The capitalist organisation of production and reproduction allows – even compels – rapid circulation of people, products, and pathogens across long distances, at times through exploitative processes associated with capital accumulation such as colonisation. The motor of capitalism is the profit motive. In the organisation of production and reproduction, the profit motive incentivises a set of cost-minimising practices that interact with systems of oppression. Some of these practices are related directly to the pandemic, with profit-seeking serving as an impediment to effective responses by individuals and policymakers to the pandemic, both ideologically and practically. For example, a jump in demand early in 2020 incentivised price gouging, an antisocial entrepreneurial activity that contributed to the shortage of personal protective equipment for healthcare workers. The vast majority of healthcare workers are women, especially among those who do direct care (Cohen & Rodgers, 2020).

This essay adds to the emerging scholarly discourse on Covid-19 by analysing the pandemic and its impacts in the context of the gendered and racialised history of capitalism. We posit that profit-seeking generates and further reinforces the inequities caused by the Covid-19 health and economic crises. To support this argument, we link the macro context of capitalism to micro effects, moving from the interaction of capitalism's dynamics with social hierarchies to the uneven impacts of the pandemic on individuals.

The first section of our analysis describes how the gendered and racialised ways capital organises production and reproduction have historically contributed to the spread of pandemics. We then discuss three channels that demonstrate how capital uses systems of oppression for profit maximisation: neoliberal globalisation, occupational segregation, and social norms around gender roles. Next we present data about the impacts of the pandemic on employment, income, and time use by gender. We conclude that Covid-19 must be understood as a consequence of the capitalist dynamics of production and reproduction, with negative ramifications that reinforce deep-seated inequities perpetuated by capitalism. Throughout, we highlight how a feminist political economy framework provides new insight into capitalism, revealing how paid and unpaid work are inextricably linked.

II. Capitalism: A feminist global political economy perspective

To mainstream economists and many other social scientists, the Covid-19 pandemic appears to be an 'exogenous shock,' something that originated outside of capitalism and has been inflicted on the economy (Wong, 2020). All stakeholders are presumably aware that policy decisions can make the pandemic's impact better or worse, but the appearance of the virus itself is considered external to the economy and economic processes.

This view is ahistorical. Rather, we need to consider Covid-19 an endogenous phenomenon, something internal to capitalism. The pandemic and its spread are themselves partly functions of neoliberal globalisation as a regime of capital accumulation (Aglietta, 2015; Bowles et al., 1986; Kotz & McDonough, 2010). This perspective is consistent with transdisciplinary research examining the interactive effects of social and economic structures and disease (Friedler, 2021). Our emphasis is not on narrow economic concerns about production and consumption, it is on capitalism in its socially- and historically-contingent form.

Theorising through the lens of feminist political economy clarifies and politicises the role of the Global North in shaping the world's political economy over time. Feminist political economy requires examining the ways people reproduce society itself by provisioning to meet their needs, a critically important analytic for understanding the transmission of infectious diseases (Cohen et al., 2020). This area of scholarship offers a window into the gender, race, and class structures that are crucial to recognising the state of capitalism prior to the pandemic and the impacts of the pandemic within capitalism. This perspective invites interrogation of the divisions of labour within and between countries, with a focus on how phenomena like feminised work and gender wage gaps reflect historically-contingent economic and political power relations.² Understanding the pandemic as endogenous to capitalism heightens the contradictions between a world shaped by the profit motive and the domestic and global requirements of public health.

Karl Marx argues that global interconnectedness is a necessary consequence of capital's drive to generate profits. He writes, 'The need of a constantly expanding market for its products chases the bourgeoisie over the entire surface of the globe. It must nestle everywhere, settle everywhere, establish connexions everywhere' (Marx, 1848, p. 16). For Marx, the pursuit of gains compels finding or creating ever-larger markets. A globally integrated capitalism is what Marx (1848, p. 16) anticipates: 'we find new wants, requiring for their satisfaction the products of distant lands and climes. In place of the old local and national seclusion and self-sufficiency, we have intercourse in every direction, universal inter-dependence of nations'. With global integration comes globalised health risk. Critically, it is the capitalist character of this integration that renders it a formidable threat to health, and not just during pandemics.

Early pandemics spread through trade, colonisation, and imperialism – each of which were intimately related to how capital organised production and reproduction along gender and race lines. For example, the Cocoliztli epidemics in Mexico during the 16th century spread as they did in part because of the way Spanish colonisers structured the lives of indigenous Aztec women and men around agricultural production (Sellars & Alix-Garcia, 2018). The American plagues brought by colonisers were transmitted not simply through contact and lack of immunity, but also because capturing and moving indigenous people for forced labour served as a conduit for the virus (Dunbar-Ortiz, 2014; Gallay, 2002). Smallpox spread quickly through slave trade networks, which were established by European colonisers to force indigenous women and men into colonial production and reproduction (Ostler, 2019). Indigenous women were particularly vulnerable to enslavement because colonisers viewed them as having a unique ability to learn languages and act as translators. Their role as cross-cultural 'emissaries', however, did not spare indigenous women from sexual servitude or from the suffering, overwork, and disease inherent to life in crowded, unsanitary labour camps (Barr, 2005).

Feminist political economy requires looking beyond the physiological into the social, specifically into the organisation of work (Cohen et al., 2020). Viral transmission in historical pandemics and Covid-19 make clear that the gendered and racialised division of labour and the ways work is organised – corollaries of changing transportation technologies – are key social determinants of health. It was not until the age of industrial capitalism with attendant gendered factory-based production that one of the many outbreaks of infectious disease became a quickly-moving, global pandemic. By 1830 an influenza pandemic became global within a year (Saunders-Hastings & Krewski, 2016). The flu of 1889 reached the U.S. from Russia in only four months as it spread in workplaces and along railroad lines and steamships (Valleron et al., 2010). In the twentieth century, global

pandemics spread even more rapidly and viruses mutated more quickly as the modes of transmission included not only ever-faster commerce but also the movement of U.S. military troops (primarily men) during World War I and the Vietnam War (Grais et al., 2003; Kilbourne, 2006).

Contemporaneous and ongoing racialised and gendered processes related to capitalism – factory production, urbanisation, overcrowding, industrial farming, and climate change – have increased the risk of pandemics and broadened their reach. For example, deforestation caused by the production of four major commodities – beef, soybeans, palm oil, and wood products – has been linked to the spread of deadly viruses and parasitic infections, including yellow fever and malaria, from wildlife to human beings (Vittor et al., 2020). Deforestation has particular bearing upon on women, who are more likely to eke out subsistence livelihoods on the basis of resources gathered from nature (Fernandes, 2005). Urbanisation and overcrowding – related results of capitalist development – are also associated with rising speeds at which infections spread (Nandy, 2004; Wu et al., 2017). In cities around the globe, these processes are explained in part by the arrival of millions of migrants from rural areas in pursuit of wages, a consequence of increased commodification of necessities, the destruction of social economies, and the industrialisation of agricultural labour (Escobar, 1995; Nandy, 2004). Migration is becoming a feminised phenomenon and, for women, responsibility for reproductive labour and care-giving in population-dense settings likely means they are less able to self-isolate.

In the next section we examine more concretely how the two-way relationship between capitalism and Covid-19 takes place, connecting the macro-historical context to the micro-level effects of Covid-19 on women's employment, earnings, and time use.

III. Linking the macro context to micro impacts

Feminist research in economics highlights how capitalism systematically creates and maintains gender and race hierarchies – in terms of both earnings and the division of labour – and disproportionately benefits dominant groups (Bergmann, 1974; Bueno, 2015). In this section, we describe three channels through which the disparate outcomes of these hierarchies are realised for different populations. The three channels are neoliberal globalisation (trade liberalisation and capital mobility), occupational segregation, and social norms around gender roles.

The profit motive dictates minimising costs, which is facilitated by firms' use and reinforcement of gender and race hierarchies. The resulting disparities manifest in the form of measurable inequities in employment, earnings, and time use. Although the channels and resulting disparities largely preceded the pandemic, the pandemic has deepened these inequities and rendered them even more dire. For example, if women tend to work close together inside factories (and provide direct care for children) – as a consequence of capital mobility, occupational segregation, and gender roles – their likelihood of exposure to Covid-19 is higher than that of men who are able to work from home.

a. Neoliberal globalisation

Competition in the global marketplace can cause wider gender wage gaps within countries that liberalise their trade policies, often in response to structural adjustment programmes.³ Feminist research for several Asian countries shows that wage discrimination against women increases within countries that open to international trade (e.g. Menon & Rodgers, 2009). Rather than competition putting pressure on firms to eliminate costly discrimination against women – as neoclassical economists, led by Becker (1959), would predict – pressure to cut costs due to international competition hurts women's relative pay. Lack of enforcement of anti-discrimination legislation combines with employer and union practices that favour male workers, resulting in women bearing the brunt of employers' cost-cutting efforts as businesses compete in the global marketplace. Through the profit-seeking it entails, capitalism generates economic inequality by mobilising differences among workers, which reinforces gendered hierarchies.

Some feminist economists have argued that gender wage gaps reflect patterns of competitive advantage and form a centrepiece of capitalist development strategies (Osterreich, 2019). For example, in South Korea, gender wage gaps in the manufacturing sector supported export competitiveness and the country's export-led economic growth (Seguino, 1997). As women's share of manufacturing employment rose during South Korea's early export drive in the 1970s and 1980s, women remained clustered in low-paying occupations due to gender roles and stereotypes. Norms defined women as secondary earners and employers believed women were well-suited to the work because they were less likely than men to unionise. Some may recall references to the 'nimble fingers' of Asian women workers' (Elson & Pearson, 1981, pp. 92–93).

Feminist economics research has also focused on the footloose way capital moves from one country to the next in search of the lowest-cost producers, a strategy facilitated by the concentration of low-paid women workers in key sectors. An important channel occurs through the incentives that firms have to pursue outsourcing and subcontracting as a strategy for reducing costs. This strategy, albeit cost-saving in the short term, reallocates production to a relatively precarious segment of the labour force in which feminised jobs become increasingly insecure. A large body of evidence has documented poor working conditions, worker abuses, lack of union rights, and discrimination by gender in countries that rely on exports and footloose capital as an engine of growth (Berik & Rodgers, 2009).

These detrimental features of global integration imply that women workers are more vulnerable to the global economic contraction caused by the pandemic. Global GDP growth was predicted to go down to -4.4% in 2020 (IMF, 2020, p. 8). Globally, trade in goods was expected to fall by 13% to 32% (Azevêdo, 2020). Closures and lockdowns had a heavy impact on the employment and earnings of those working in export-oriented manufacturing in the Global South, especially women, because consumption of goods fell dramatically in destination markets.

b. Occupational segregation

Globally, women and men cluster in different occupations and industries. In most countries, developed and otherwise, women are clustered in clerical work, services (especially in health and education), sales, and low-skill manufacturing jobs. Men, on the other hand, dominate high-paying legislative and managerial posts, production work in crafts and trades, and plant and machine operations. Occupational segregation often occurs by race as well, such that within the occupations in which women are clustered, women of colour hold the least secure, lowest paying jobs (Holder, 2018). Job segregation arises due to public and private sector hiring practices that favour men, the exclusion of women from on-the-job training opportunities, and promotion discrepancies between men and women. When women are concentrated in relatively lower-paying occupations, and when pay structures within occupations are inequitable across gender, then women have lower average earnings than men as well as less wealth, fewer assets, and less security. By implication, occupational segregation raises men's pay by limiting competition for jobs reserved for men (Bergmann, 1974).

Capitalist economic development brings marked changes to the distribution of workers across occupations, with a pronounced shift out of manufacturing into professional and service occupations. This shift reflects people who switch jobs as well as (and more commonly) individuals who move into and out of the labour force. However, even in those countries where men's and women's occupational distributions have become more similar over time, the distribution of workers across occupations is still noticeably different for men and women. Occupational segregation by gender and race has remained a persistent facet of labour markets in high-income economies. For example, fewer women than men reach high-level positions in scientific and technical disciplines in most countries, and women have remained under-represented in professional scientific employment across the business sector and academia (Huang et al., 2020; Xie & Shauman, 2003). There is increasing recognition of the high costs of low diversity in these areas. Women

and people of colour bring a distinct set of experiences, skills, work styles, and attitudes to the table, with the potential to raise productivity at all levels.

Labour markets in the Global South are becoming more 'polarised' due to the role and pace of technological change (World Bank, 2015). That is, the share of employment in high-paying, higher-skilled jobs and in poorly paid, feminised jobs is increasing, while the share of employment in mid-level jobs is decreasing. While this polarisation may be beneficial globally in terms of increasing overall productivity, individuals with limited access to education and high-skill jobs are likely to suffer disproportionately (World Bank, 2015). Women are more likely than men to fall into this group, and they have experienced job losses due to trade-induced technological advances. Hence upgrading of technology and rising capital intensity are associated with displacement of women from the manufacturing workforce (Tejani & Milberg, 2016). Evidence for 30 higher income countries between 2011 and 2016 indicates that women's jobs are relatively more vulnerable to automation as women tend to be engaged in more routine work across all occupations compared to men (Brussevich et al., 2018). These kinds of losses for women can also happen in the service sector, especially when jobs in information, communication, and technology are outsourced from economies of the Global North to the Global South (Kongar & Price, 2010).

Business closures related to Covid-19 have disproportionately hit sectors in which women are over-represented, reducing their employment and earnings. Further, the race to the bottom in terms of low pay and job quality limits access to the basic necessities required to maintain health. During the pandemic, these disadvantages disproportionately accrue to women and their households at the lower end of the income distribution within and across countries.

Occupational segregation is linked to gender roles, which are salient both for associating women with certain kinds of paid work (especially in care services), and for assigning women disproportionate responsibility for unpaid reproductive labour. The two are intricately linked in that women's unpaid work constrains their labour market participation and contributes to occupational segregation.

c. Social norms around gender roles

Gender and race hierarchies are 'compatible' with the needs of capital in the realms of both paid and unpaid work. Women worldwide are tasked with responsibility for what is considered 'women's work,' including care-giving and domestic work such as cooking and cleaning. Superficially, such work might appear disconnected from paid work and capitalist production. However, capital depends fundamentally on women's work, as it is through their labour – physiological (e.g. birth) and social (e.g. reproductive labour) – that workers, who form the labour supply, are reproduced.

Social norms around gender roles facilitate the operation of price competition, capital mobility, and occupational segregation. Each is a channel through which capital takes advantage of – and reinforces – women's subordinate position in the gender hierarchy to minimise costs and maximise profits. This 'cost-minimisation' takes place through the positions that women occupy in the capitalist organisation of production and reproduction.

Women's reproductive work effectively acts as a subsidy for capital, which does not pay for the pool of well-socialised, healthy workers from which it hires. Women give birth to and provide care for people who are currently employed by capital for the purpose of generating profits. On a day-to-day basis, women's uncompensated domestic work meets the needs of the people, many of whom are also employees. Women's reproductive labour is captured in the concept of the second shift, in which women do paid work and then return home for a second shift of unpaid work in the home (Hochschild, 2003). For women of colour there is often a 'third shift' of community-based work oriented toward collective activism and the provision of services that governments have neglected (Banks, 2020).

During acute and prolonged crises, women act as shock absorbers for households; they work longer hours than men to make up for restricted support, lost wages, and reduced remittances.

Further, women may be pulled out of the work force due to their responsibility for reproductive labour.

Given the historical context and the three mechanisms described above, with respect to employment and earnings we expect that women: (1) are more likely than men to work in sectors with the heaviest job losses, (2) are more likely than men to work in the low-wage service sector jobs considered essential during the pandemic, and (3) have experienced greater income losses than men. Moreover, we anticipate that lockdowns have contributed to greater unpaid workloads for both women and men, but that the increased care work and housework has fallen disproportionately on the shoulders of women. Therefore, we expect to see that women: (4) are doing more reproductive labour than men, and (5) are more likely than men to have left the labour force due to increased demands in the household.

We expect that these effects are more severe for women of colour. However, race-disaggregated data on paid work and time use are not readily available for most countries, and in the era of Covid-19, data by race is especially limited. This limitation is itself indicative of the negligence of states and organisations to understand the disparate outcomes of racialised hierarchies across individuals and communities. We do have some information for individual countries. For example, in the U.S. during the early months of the pandemic, unemployment rates for women exceeded those of men, and they were even higher for Hispanic women and Black women. Some of the biggest employment losses for Black women occurred among low-wage occupations such as cashiers and childcare workers (Holder et al., 2021). Similarly, in South Africa, women saw relatively larger drops in employment and working hours than men, and job losses were larger for African individuals compared to non-African (Casale & Posel, 2020). As a result of the lack of cross-country race-disaggregated data, our analysis also suffers from this limitation, and the data presented are limited to gender.

IV. Measurable impacts on women: Employment, income, and time use.

Regarding employment losses (H1), data from the International Labour Organisation (ILO) indicate that on average, 40.0% of all women workers and 36.6% of all men workers globally were employed in industries hardest hit by lockdowns early during the pandemic (ILO, 2020a). Industries with particularly acute job losses include hotel and food services, wholesale and retail trade, entertainment, business services, and labour-intensive manufacturing. Women's exposure to the risk of job loss in hard-hit industries was particularly high in Central America, where 58.9% of all women workers were employed in these industries, and in Southeast Asia (48.5%). In addition, industries with the most business closures had a relatively higher concentration of women in their workforces compared to the share of women in the total labour force. For instance, globally women make up 54.0% of workers in hotel and food services, and 61.0% of workers in entertainment, while they comprise just 38.7% of the global labour force (ILO, 2020a). Women's concentration in industries with the most business closures contributed to greater drops in employment for women than men in 18 out of 21 countries with available data, as shown in Figure 1.

Cross-country data on employment in essential jobs during the pandemic are less readily available, making it more challenging to test hypothesis H2, that women are more likely than men to work in these jobs. Data for the U.S. indicate that 64.4% of workers in frontline industries (defined as grocery stores, public transport, logistics, cleaning services, health care, and childcare) are women (Rho et al., 2020). In addition, people of colour constitute a larger proportion of frontline workers (41.2%) compared to their share of the overall work force (36.5%). Among those most at risk on the frontline are nurses, and global data indicate that the share of nurses who are women ranges from 65% in Africa to 86% in North and South America (Boniol et al., 2019). Nurses face relatively greater risk of exposure to infection, job stress, depression, and fear of exposing loved ones to disease than those in most other kinds of occupations (Connor et al., 2020).

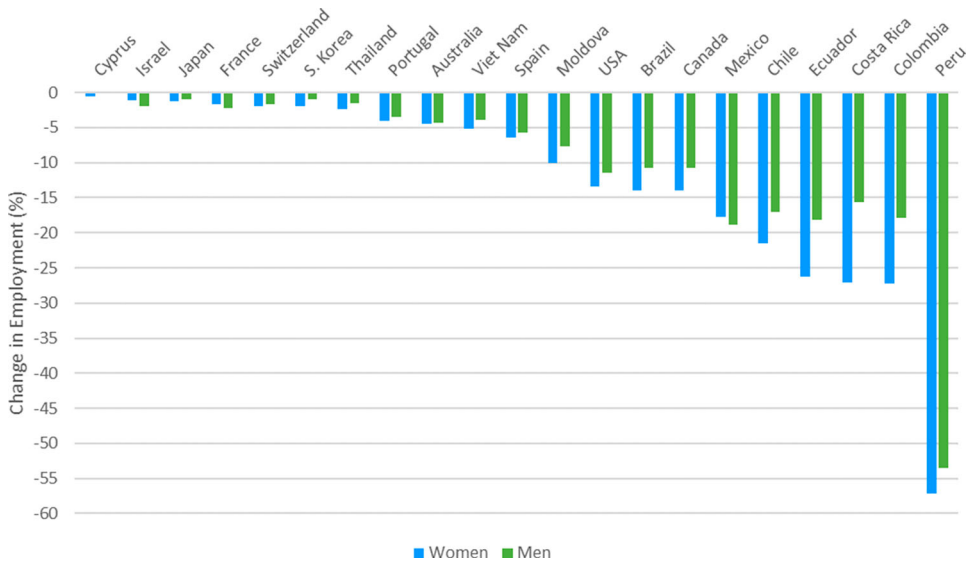


Figure 1. Change in employment April 2019–April 2020 for selected countries (in percent). Source: ILO (2020b).
 Note: Country selection based on availability of sex-disaggregated data.

Global data also support the hypothesis that women experienced greater losses in post-support labour income during the pandemic than men (H3). Data for six countries – half from the Global North and the other half the Global South – show that women experienced larger income losses than men in all countries but one (Figure 2). These income data include not only compensation from paid jobs but also government pandemic support, earnings from self-employment including returns to capital, and other income transfers. We would expect women’s income to fall more than men’s due to their relatively greater employment declines, but what is striking is that income flows from other sources failed to make up for this relative shortfall. The only exception is the U.K., where the Coronavirus Job Retention Scheme helped to minimise income losses, especially

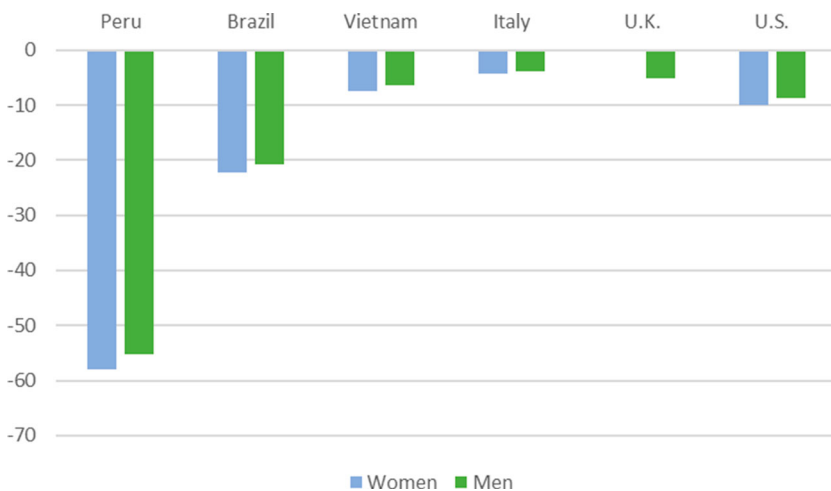


Figure 2. Change in post-support labour income by gender for countries with available data, second quarter of 2020 (in percent). Source: ILO (2021).

Note: Post-support labour income includes wage earnings, government-based support, self-employment income, and other transfers. Country selection based on availability of sex-disaggregated data. See ILO (2021) for a detailed explanation.

for women, by allowing the furlough of employees with caring responsibilities (HM Revenue and Customs, 2021).

That women spend more time on reproductive labour than men is a well-documented inequity (i.e. Connelly & Kongar, 2017). Support for the hypothesis that women are doing relatively more reproductive labour during the pandemic (H4), comes from international data showing that time spent on care work and domestic work has increased for both men and women, but it has increased and intensified more for women. In Table 1, which reports time use for unpaid care work and domestic work for ten developing countries in the Asia Pacific region, shows that in 15 out of 20 cases (10 countries * 2 types of work), the percent of people who reported that they spent more time on at least one unpaid work activity during the pandemic increased more for women than it did for men. The data for one activity indicate that on average, 60% of women and 54% of men reported more unpaid care work, and 63% of women and 59% of men reported an increase in unpaid domestic work since the pandemic started. The gender gap for the intensity of unpaid work (as measured by at least three activities) is even larger: on average, 30% of women and 20% of men reported increases in the intensity of unpaid domestic and care work. This overall conclusion that the pandemic caused unpaid workloads to increase for both women and men, but more for women, is found in other countries as well, including Australia (Craig & Churchill, 2021), Spain (Farré et al., 2020), Turkey (Ilkcaracan & Memis, 2021), the U.S. (Zamarro & Prados, 2021), and the U.K. (Cantillon et al., 2021).

Finally, for hypothesis H5 – that women are more likely than men to leave the labour force because of the demands of reproductive labour – we look to a decomposition of the global decline

Table 1. Percent of women and men whose time spent on unpaid work increased since start of pandemic.

	At least 1 activity			At least 3 activities		
	Women	Men	Difference	Women	Men	Difference
Afghanistan						
Unpaid care work	77	68	9	36	27	9
Unpaid domestic work	77	56	21	35	11	24
Bangladesh						
Unpaid care work	61	63	-2	51	31	20
Unpaid domestic work	58	49	9	29	9	20
Cambodia						
Unpaid care work	40	50	-10	35	20	15
Unpaid domestic work	61	54	7	20	10	10
Indonesia						
Unpaid care work	56	41	15	28	23	5
Unpaid domestic work	65	68	-3	26	7	19
Maldives						
Unpaid care work	64	62	2	26	27	-1
Unpaid domestic work	68	60	8	27	14	13
Nepal						
Unpaid care work	71	72	-1	31	28	3
Unpaid domestic work	73	70	3	29	23	6
Pakistan						
Unpaid care work	59	56	3	34	32	2
Unpaid domestic work	56	44	12	19	13	6
Philippines						
Unpaid care work	69	67	2	19	16	3
Unpaid domestic work	66	81	-15	40	32	8
Samoa						
Unpaid care work	87	48	39	67	70	-3
Unpaid domestic work	71	32	39	39	7	32
Thailand						
Unpaid care work	53	44	9	30	27	3
Unpaid domestic work	68	57	11	30	26	4

Note: Data based on survey of selected countries in Asia and the Pacific.

Source: UN Women and Women Count (2020).

in paid employment. Aside from workplace closures, a second reason for women's relatively larger employment declines is their greater unpaid care responsibilities and the increased need for child-care and home-schooling during the pandemic. Globally in 2020, women experienced an average 5.0% reduction in employment compared to 3.9% for men. A decomposition analysis in ILO (2021) indicates that women's withdrawal from the labour force accounts for most (4.3 percentage points) of their employment reduction. In contrast, men were more likely to be officially unemployed (and searching for a job) as opposed to dropping out of the labour force (Figure 3).

Overall, these global data provide support for our five hypotheses: during the pandemic, women experienced relatively greater employment losses (H1), were more likely to work in essential jobs (H2), and experienced a greater reduction in income (H3). Women were also doing more reproductive labour than men (H4) and were more likely to drop out of the labour force because of it (H5).

V. Discussion

The pandemic has had predictable and disproportionately negative impacts on women's employment, income, and time use relative to men. Our analysis illustrates how capital accumulation depends on the subjugation of women in multiple, fundamental ways having to do with the devaluation of their paid work. A feminist political economy perspective takes us even further and reveals that the crucial link between paid and unpaid work, and between the household and the firm, is women. Nowhere is this point made so clear as in the global evidence that women have left the labour force en masse during the pandemic due to unpaid reproductive labour. Capital accumulation depends on feminised paid work – but all paid work, feminised or not, depends on women's unpaid work. Women's work, and by extension women's health, is the foundation upon which both production and social reproduction are built.

Rather than ending our macro-to-micro analysis simply with data demonstrating the disproportionate economic and social impacts on women that hinge on their oppression, we must take into consideration the likely negative implications for public health. The case of nurses is instructive. Globally, approximately 85% of nurses and midwives are women (Ghebreyesus, 2019), and nearly 70% of workers in the health and social sector are women (Boniol et al., 2019). The health of the population is largely determined by the resources allocated to, and the capacity of, healthcare systems. Nurses are the majority of healthcare practitioners, which means the functioning of

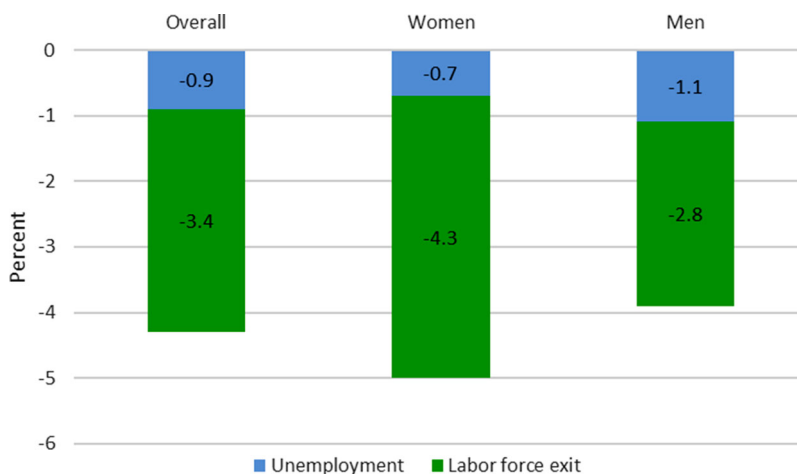


Figure 3. Decomposition of global employment losses, 2020 (in percent). Source: ILO (2021).

Note: Each bar represents the decline in total employment compared to pre-pandemic employment.

healthcare systems depends on their continued effective participation. In those countries where doctors are scarce and nurses are the most senior healthcare practitioners available, nurses' well-being is the foundation of public health. Yet nurses are some of the most burnt-out and stressed-out workers worldwide, and there are already persistent shortages of nurses in most countries (Cohen & Venter, 2020).

Public health depends on healthcare systems, which in turn depend on nurses who were already struggling to cope with the demands of paid work and reproductive labour prior to Covid-19. Moreover, capitalist production relies on public health. Ultimately, the stability of capitalist economies depends on women's health and their ability to cope with the demands of paid work in feminised, devalued jobs and the demands of their unpaid work in the household. This reliance of the capitalist economic system on women's health and labour suggests systemic and structural fragility at the level of societal reproduction.

VI. Conclusion

Given the endogeneity between capitalism and the spread of disease as argued here, pandemics appear not merely predictable but inevitable. The Covid-19 crisis points a spotlight on the vulnerability of those individuals from whom the gains of capitalism are extracted, with devastating economic and health effects. The pandemic is exposing fault lines of the existing economic, political, and social system (laws, social norms, infrastructure) and the disparities in the lived experiences of men and women, of whites and people of colour, and of different classes. Yet in the battle to secure high rates of profit, protecting the labour force and those who depend on workers from the inevitability of a pandemic was not a priority of several national governments, including that of the U.S. Prioritising profits over health was evidenced by the general lack of preparedness before the pandemic hit and then the state failure to take adequate measures once it did.

The profit motive also erodes a key element of successfully dealing with global problems: international solidarity (IJsselmuiden et al., 2010). The pandemic has triggered an isolationist stance—a macro scale form of social distancing—among a number of 'first-world' governments. This stance has included increased barriers to international trade, travel restrictions, and attempts to clamp down on immigration. But health is a public good. Collectively we are only as healthy as those least able to access healthcare. Hence 'vaccine nationalism,' in which vaccines are effectively being withheld from poorer countries, is not strategic, in addition to being unethical and inhumane (Ghebreyesus, 2021). In a globally integrated world, those in the first world will only be as healthy as those in the third world—and vice versa—partly on the basis of immigration flows, many of which were established by first-world capital to meet its own needs.

The requirements for social reproduction contradict the requirements for capital accumulation. The claim that governments were shutting down economies—when it was abundantly clear that people were doing household production, engaging in social reproduction activities, educating children, working on the frontlines in essential jobs, and teleworking from home—does several things to mask this contradiction without mitigating it in any way. This imaginary of a 'closed' economy reinforces the perceived higher value of paid work relative to unpaid work, it attempts to obscure the dependency of production on reproduction, and it imposes a false separation between sites of work perceived as valuable (which, not coincidentally, generate profits) and devalued work.

Any comprehensive response to the Covid-19 crisis must recognise the gendered division of paid and unpaid work as an integral part of an economic system. A leader to take this approach is Hawaii's Department of Human Services, which issued a Feminist Economic Recovery Plan for Covid-19 (Hawaii State Commission on the Status of Women, 2020). It is the first time an official U.S. state agency has developed an explicitly feminist plan to deal with this pandemic. Priorities in the Hawaiian plan include providing paid family leave and paid sick leave, creating universal free childcare and long-term eldercare, boosting pay equity and job creation in education and nursing, and providing marginalised groups with increased access to maternal and child health

services. Another excellent example is a call for a feminist economic agenda for the World Health Organisation that ran recently in a leading medical journal (Herten-Crabb & Davies, 2020).

Globally, this pandemic has affected people very differently based on who they are and what jobs they have. The pandemic has revealed that transformative change is needed in the ways that production and reproduction are organised, and that the requirements for social reproduction must supersede the requirements for capital accumulation. Currently governments around the world are planning economic recovery packages that vary in size and scope. For such policy responses to promote human well-being for all, they must recognise and remediate centuries of disadvantage resulting from gendered and racialised patterns of capitalist production and reproduction.

Notes

1. Our focus is limited to gender and race. We acknowledge the pervasiveness of additional systems of oppression, like heteronormativity and ableism, and plan to investigate pandemic-related inequities experienced by other marginalised groups as data become available.
2. Feminised work refers both to demographics and status. Feminised jobs include those formerly held primarily by men in which women's representation has increased and even overtaken that of men. Related, feminisation refers to the perceived and market value of work associated with women, such as childcare.
3. Structural adjustment programmes are a set of conditions imposed on poorer countries that require loans from international financial institutions like the World Bank and International Monetary Fund. They tend to include market liberalisation, or opening a country's economy to international trade.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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