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Featured Panelist:

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- Shamminaz Polen (OXFAM Canada)
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COVID-19 and the care economy in the Global South

The COVID-19 pandemic crisis has triggered a crisis of care, highlighting the disproportionate caregiving roles that fall on the shoulders of women around the globe. Balancing work and care has always been tenuous, especially for women, and especially in low and middle income settings. The pandemic has both underscored and exacerbated existing inequalities in who bears the responsibility for the care of children, the disabled, the ill and the elderly. Indeed, we read story after story of how the traditional gender norms around care are in fact being reinforced, in part because women have suffered disproportionately from job losses. With schools and daycares closed around the world, women must navigate increased care needs with livelihood provision in the face of a historic economic crisis.

In this seminar, the panelists discussed the myriad of ways in which the crisis in care has manifested itself since the beginning of the pandemic. Women find themselves even more overburdened with care responsibilities than before the pandemic, contributing to an increase in stress and mental health issues. Conversely, many domestic workers in the Global South who provide care for families have lost their jobs. The impact of COVID-19 on the relationship between care and work is not a homogeneous one and varies greatly according to women's occupations. On the one hand, women who have maintained employment (e.g. essential workers or women working in the informal sector) face the challenge of caring for their young children with school and daycare closures. Because of the precarious nature of these jobs and out of necessity for earning a living, there is a real concern that adolescent girls will need to "pick-up the slack". Meanwhile, especially in urban areas with large migrant populations like in Kenya and Bangladesh, relying on informal care becomes difficult as the pandemic has led to a return of migration of extended family members. For some, the crisis has led to an increased need for health care workers, an occupation in which women are disproportionately represented, leading to an increased demand for care services, both for work and at home.

Moreover, the key to lifting lockdowns relies on supporting individuals and families' return to work, which will inevitably require some return to daycare services for children. However, because of the lockdowns and the fact that parents may be unwilling to expose their children to the virus, many child-care centers have closed due to the lack of stable demand. In many countries, child-care centres are a "policy blind-spot", are unregulated, and operate economically precariously, leading to concerns of a collapse in the child-care centre market at a time when lockdowns are lifted and parents return to work.

Research Priorities

Priority 1:

The pandemic has added additional care burden on women. How to redistribute care responsibilities, especially in contexts characterised by entrenched gender norms, remains a central research question. Recognizing that these norms may be slow to change, one possibility is to start by identifying those roles that are most likely to get buy-in from male household members. A concern is that much of this additional care will ultimately land on adolescent girls, which will turn the clock back considerably on their educational attainment and long-term wellbeing.

Priority 2:

Maintaining social distancing in a child-care setting is challenging when dealing with toddlers. What tools and techniques can be developed to promote social distancing for this age group?

Priority 3:

With schools being closed, homeschooling is an additional care responsibility which is especially difficult for parents with limited literacy and numeracy skills. They may require additional support to relieve some of their burden while maintaining their school-aged children actively engaged with schoolwork. Research into digital citizenship and the development of appropriate distance learning tools that can assist overburdened, stressed, and often illiterate parents would be especially helpful. Whether or not IT is part of the solutions that may be used, the need for targeting the appropriate intervention will always be present.

Policy Implications

Implication 1:

The pandemic has highlighted that childcare is an essential service. Policy efforts should support quality child-care services as a priority to reopen the economy. This means looking at child-care subsidy programs for parents, encouraging employer supported care options, and exploiting the potential for public and private partnerships in this space.

Implication 2:

Additional investments will be necessary to ensure child-care centres receive the additional protections they need to control the spread of the disease. Many child-care centres in some of the most disadvantage regions, especially in densely populated urban informal settlements, do not currently have access to running water, so the notion of washing hands frequently remains a hypothetical one.

Implication 3:

Parents and child-care centres alike have received mixed messages from public health officials about whether they should close or not during lockdowns. Whether governments move to regulate the child-care sector or not during the recovery period, parents, providers and policy makers would all benefit from clearer guidelines about how to manage hygiene, safety and outbreaks.

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