

A Partnership Among Geisinger Commonwealth School of Medicine, Johnson College, Keystone College, Lackawanna College, Luzerne County Community College, Marywood University, Misericordia University, Penn State Scranton, Penn State Wilkes-Barre, The Wright Center for Graduate Medical Education, University of Scranton & Wilkes University



THE INSTITUTE FOR PUBLIC POLICY & ECONOMIC DEVELOPMENT



Employment Inequities and Caregiver Barriers in a Post-COVID World

April 2022

The Institute

Turning Information into Insight

The Institute is a non-profit economic and social innovation research and policy organization dedicated to empowering business and community leaders with research-based strategies for informed decision-making. We conduct independent, non-biased research to identify the opportunities, issues, and challenges unique to the region and to find innovative solutions to help solve the problems facing our communities. The Institute also offers a wide array of research, consulting, and support services to help organizations boost productivity, increase profitability and be successful in their missions. The Institute is a partnership of 13 colleges and universities and the business community. The Institute has served clients in a number of states, including the federal government.

Jobs, Economy & Economic Development Task Force

Robert Luciani, Prudential - Chair

Pam Anslinger, NeighborWorks Northeast

Karen Baker, Johnson College

Clarence Baltrusaitis, NET Credit Union

John P. Blake, Congressman Matt Cartwright's Office

Fran Calpin, Keystone College

Colleen Carter, McCarthy Tire Service

John Cognetti, Hinerfeld Commercial Real Estate

Julie Schumacher Cohen, University of Scranton

Laura Ducceschi, Scranton Area Foundation

Lindsay Griffin, Greater Wyoming Valley Chamber of Commerce

Katie Leonard, Ed.D., Johnson College

Joe Lettiere, Greater Hazleton CAN DO Inc.

Amy Luyster, Greater Scranton Chamber of Commerce

Alana Roberts, PPL Electric Utilities

Kate Sickora, WVIA

Lucyann Vierling, Workforce Alliance

Marwan Wafa, Ph.D., Penn State Scranton

The Institute Team

Teri Ooms, Executive Director

Andrew Chew, Director of Research

Dr. Jolene Carey-Pace, Research Analyst

Jill Avery-Stoss, Data, Director of Operations

Sarah Bender, Research Assistant

© 2022. All Rights Reserved. The Institute

The Institute

Turning Information into Insight

Signature Underwriters

Andrew J. Sordoni

Foundation

Luzerne County

PPL Electric Utilities

Sordoni Family Foundation

Contributing Underwriters

Altitude Philanthropies

Borton-Lawson

Geisinger Health System

UGI Utilities

WVIA Public Media

Supporting Underwriters

BlackOut Design

FNCB

Greater Hazleton CANDO

Highmark Blue Cross Blue Shield

M&T Bank

Navient

PNC

Prudential

The Luzerne Foundation

The Wright Center for

Community Health

Contents

Introduction..... 3

COVID-19 as a Career Shock..... 3

Non-Skill Barriers Exacerbated By COVID-19 4

Employment Trends by Gender throughout COVID-19 4

Caregivers and Gender Inequity in the Labor Force..... 7

Childcare Changes Since COVID-19..... 10

The Effect of COVID-19 on Caregiving beyond Children 11

Initiatives Supporting Opportunities for Women 16

Economy & Gender Inequality..... 17

Implications 20

Summary & Recommendations 22

 Employer Programs and Initiatives 24

 Childcare Industry 27

 Outlook and Policy Options 28

Conclusion 33

Appendix..... 36

References 41

Introduction

The COVID-19 pandemic has fundamentally changed people's lives around the globe. It has led to increases in social inequalities concerning health (van Dorn et al., 2020) and drastic fluctuations concerning the economy (Hipp & Bünning, 2021). COVID-19 has also led to a growth in gender inequities and exacerbated the needs of caregivers in the labor force, including parents of young children and those caring for elderly or disabled family members (Hipp & Bünning, 2021).

This report explores how countrywide trends relative to caregivers that were present prior to the pandemic were heightened throughout COVID-19 and how these trends affect Northeastern Pennsylvania. This report addresses how employer programs or government policies and initiatives can help alleviate barriers for caregivers not only throughout COVID-19 but also in a post-pandemic world.

COVID-19 as a Career Shock

A career shock can be defined as "a disruptive and extraordinary event that is, at least to some degree, caused by factors outside the focal individual's control and that triggers a deliberate thought process concerning one's career" (Akkermans, Seibert, & Mol, 2018, p. 4). In this regard, it comprises two key elements: (1) an event and (2) a process of initial sense making, which means that a disruptive and extraordinary event is not necessarily a career shock in itself. For example, unexpectedly losing a mentor or valued co-worker can be interpreted as a significant shock by one person, whereas another may continue with 'business as usual' (Akkermans, Seibert, & Mol, 2018).

Akkermans et al. (2018) argue that career shocks can have different attributes, potentially determining their impact on people's careers, such as frequency, controllability, intensity, valence, and duration. For example, a single career shock may be low in intensity (e.g., a colleague leaves the organization), meaning it might not cause significant deliberate thought processing at first. However, if it happens multiple times (e.g., a number of colleagues leave), that is, when the frequency is high, the cumulative effect could be profound. Applying this conceptualization to current events, it is clear that the Covid-19 pandemic is a highly disruptive and extraordinary event. While low in frequency, its low controllability makes it more likely to initiate a deliberate thought process (Akkermans et al., 2018).

The degree of intensity, duration, and valence experienced varies according to individual circumstances. For example, small business owners and people in retail or tourism are likely to experience a high level of intensity and duration, being at risk of losing their business and jobs. In terms of valence, the pandemic would generally be classified as negative because of job insecurity, loss of income, the emotional impact of social distancing, and increased general anxiety. Yet, there may be positive consequences, such as spending more time with immediate family and not having to commute. Furthermore, although most occupations are negatively impacted, others are booming, such as software companies and home gym makers (Akkermans et al., 2018).

A career shock can have a different impact in the short-term vs. the long-term and for different career stages. In a study of early career employees' decisions to pursue graduate education, Seibert et al. (2013) found that a positive career shock (receiving a quick raise or promotion) positively related to the employee's intentions to pursue graduate education (measured cross-sectionally), but negatively related to that employee's likelihood of applying to graduate school 16 months later. And, two negative career shocks – having a mentor depart the organization and a significant organizational change – did not

impact the employee's immediate intentions to attend graduate school. However, it did impact the likelihood that the employee subsequently applied to graduate school 16 months later. As these findings demonstrate, the actual impact of a career shock on one's career outcomes may not be immediate but rather only manifest over time (Akkermans et al., 2018).

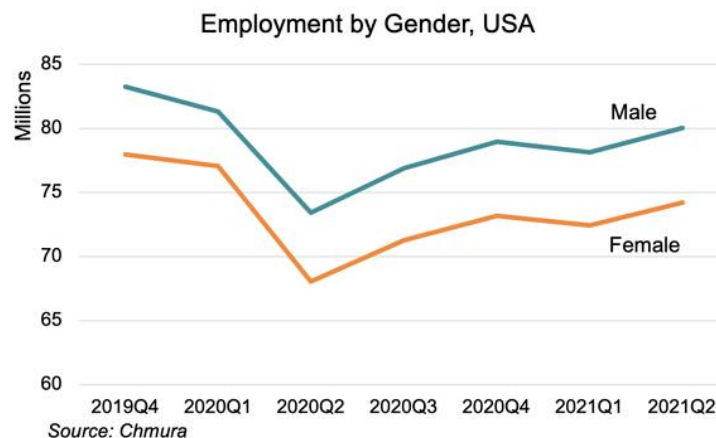
Research has also found that specific career shocks may impact one's career outcomes in different ways based on one's career or family stage (Kraimer et al., 2019). Related research has also found that a significant national shock impacts individuals' stress levels based on their family status. In particular, Ragins, Lyness, Williams, and Winkel (2014) examined the impact of the 2008 financial and housing market crisis (which they termed a "national shock"). They found that fear of housing foreclosure was more strongly (positively) related indirectly to physical symptoms of stress, through negative home-to-work spillover, among individuals with family responsibilities than those without dependents.

Non-Skill Barriers Exacerbated By COVID-19

After only a few months, the COVID-19 job losses were more extensive than the total multi-year effect of the Great Recession. Moreover, there are significant disparities in job losses across demographic groups and people with different levels of education. Much of the overall variation in recent unemployment stems from differences across different types of jobs. For example, in April, the Current Population Survey (CPS) found that current unemployment rates are about 44 percent lower among workers in positions more compatible with remote work. In contrast, workers in jobs that require more face-to-face contact are at a higher risk of recent unemployment (Montenovo et al., 2021). Childcare and transportation disruptions have played a significant role in the disruption of work, leading to increased unemployment.

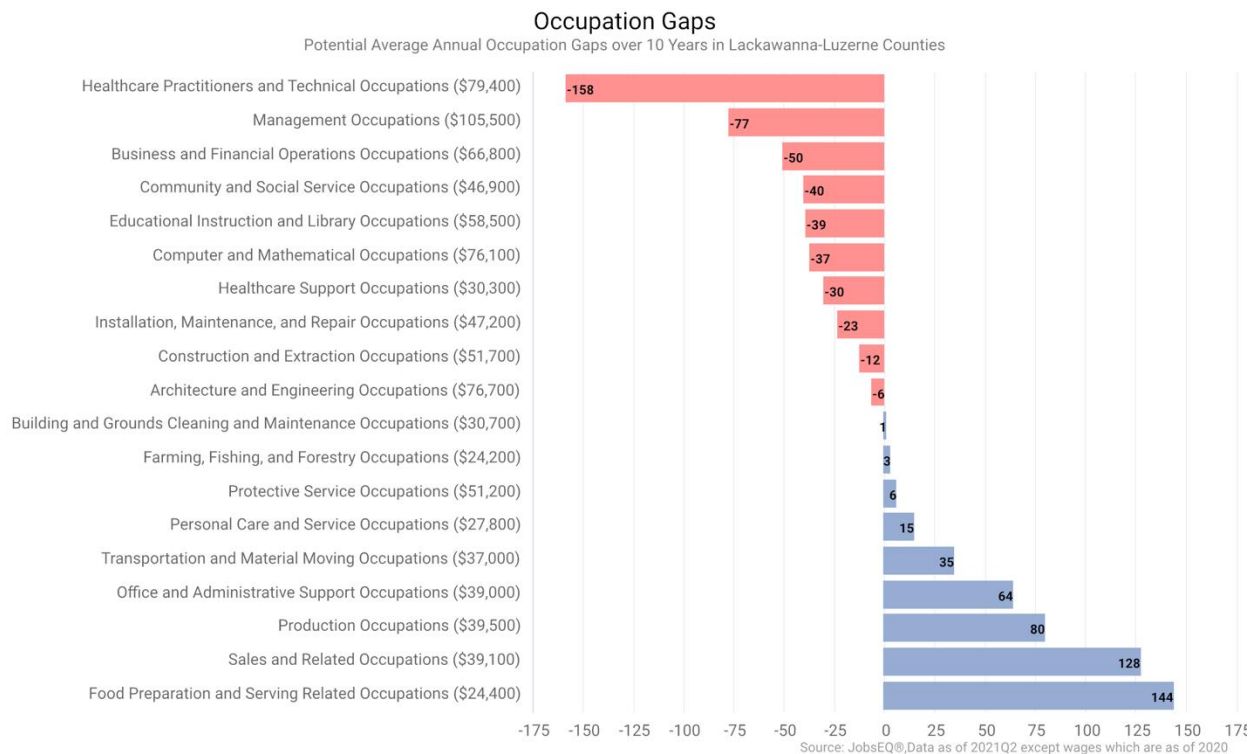
Employment Trends by Gender throughout COVID-19

Data from the Quarterly Workforce Indicators series from the Bureau of Labor Statistics and Chmura's JobsEQ indicate that between the fourth quarter of 2019 and the second quarter of 2020, the nationwide number of women employed fell 12.7 percent, compared with a decline of 11.8 percent for men. As of the second quarter of 2021, female employment has recovered an estimated 62 percent of jobs lost, five percentage points below the 67 percent recovered by men (Clapp, 2021; Quarterly Workforce Indicators series from the Census Bureau).

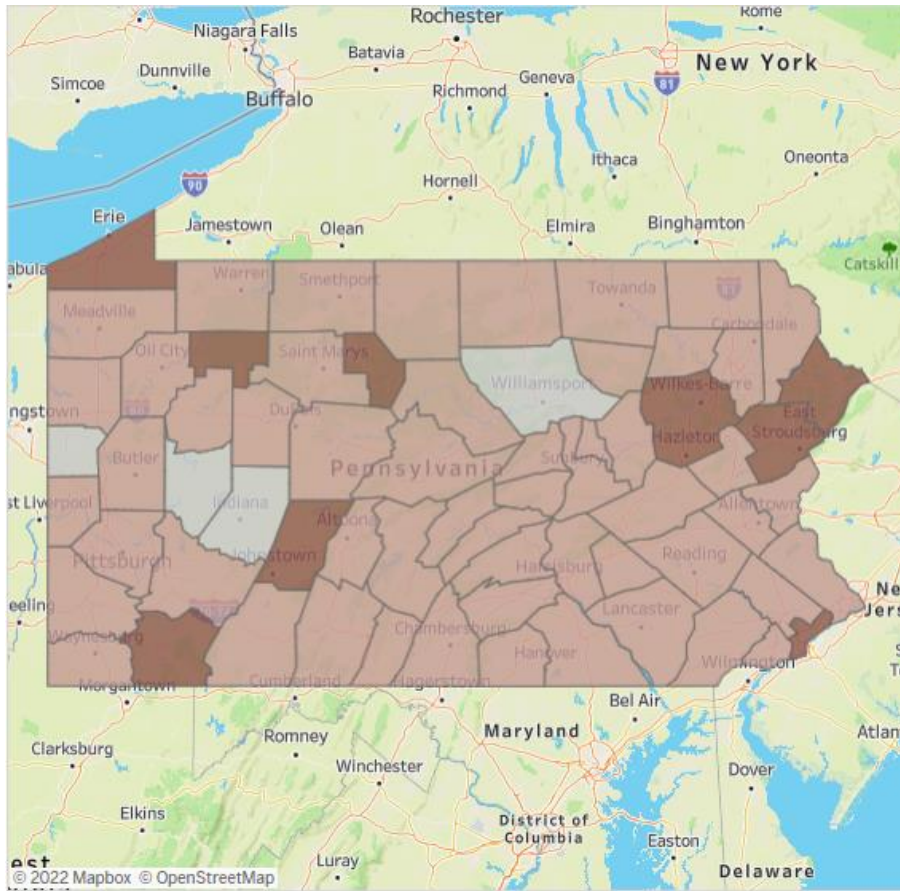


The greater impact for women stems largely from the industries most impacted by the pandemic. Women's most significant job losses were in accommodations and food services, health care and social assistance, and retail trade—all industries in which women account for a greater share of employment. However, women bore a greater share of job losses within these industries. For example, 16.4 percent of women in the retail trade lost their jobs, compared with 13.6 percent of men. This disparity has continued during the recovery, as women have recovered 59 percent of jobs lost in retail trade, compared with 73 percent for men. These differences do not hold across all industries. Women and men experienced job losses and have recovered at similar rates in sectors such as professional, scientific, and technical services; information; real estate and rental and leasing; and finance and insurance (Clapp, 2021).

The graph below forecasts the potential average annual occupation gaps over the next ten years throughout Lackawanna and Luzerne counties and demonstrates that there is projected to be a continuation of occupation gaps in the health care industry, an area where women account for a substantial share of jobs.



The graph below from the Center for Workforce Information & Analysis demonstrates that several counties in Northeastern Pennsylvania have an average unemployment average that exceeds the state average unemployment rate. (Pennsylvania Center for Workforce Information & Analysis, Labor Statistics Dashboard - County State Comparison)



Date

State Comparison

- greater than PA
- less than PA
- same as PA

Furthermore, the tables below demonstrate that while Lackawanna County has seen a slight decrease in unemployment compensation claims, Luzerne County has experienced a shift toward a larger share of women's continued unemployment claims throughout the pandemic.

Weekly Unemployment Compensation (UC) Claims: Lackawanna County				
	Initial Claims Total	Percentage of Claims – Female	Continued Claims Total	Percentage of Claims - Female
Q1 2020	6,521	50.9%	10,148	54.6%
January 2, 2021	590	42.5%	6,372	49.9%
January 1, 2022	351	41.3%	1,440	44%

Weekly Unemployment Compensation (UC) Claims: Luzerne County				
	Initial Claims Total	Percentage of Claims – Female	Continued Claims Total	Percentage of Claims - Female
Q1 2020	10,379	52%	16,513	53.3%
January 2, 2021	996	38.7%	12,022	50.2%
January 1, 2022	596	41.1%	3,409	54.2%

Caregivers and Gender Inequity in the Labor Force

An even more important channel for differential impacts on women and men is that many regions have closed schools and daycare facilities at various points during the pandemic. During the onset of the pandemic worldwide, more than 1.5 billion children were out of school. This statistic has dramatically increased the need for childcare. In addition, grandparent-provided childcare is often discouraged due to the higher mortality rate for the elderly, and given social distancing measures, sharing childcare with neighbors and friends is also very limited. Thus, most families have no choice but to watch their kids themselves (Alon et al., 2020).

Based on the existing distribution of childcare duties in most families, mothers are likely to be more affected than fathers. Single mothers, of which there are many in the United States and who are often in a disadvantaged economic position, to begin with, will take the biggest hit. Together, these factors suggest that the COVID-19 pandemic will disproportionately negatively affect women and their employment opportunities (Alon et al., 2020). The effects of this shock are likely to outlast the actual epidemic. A sizeable literature documents that earnings losses from job losses are highly persistent (Stevens 1997) and much more severe when they occur in recessions (Davis and von Wachter 2011). Workers who lose jobs now forgo returns to experience and are likely to have less secure employment in the future (Jarosch 2015).

The consequences are not only limited to those who lose jobs but also those who are about to enter the labor market for the first time. Despite this gloomy outlook, it is also believed that the COVID-19 crisis can bring about some changes that can potentially reduce gender inequality in the labor market in the long term. Today, a large part of gender inequality in the labor market is related to an unequal division of labor in the household. Even though women's labor force participation is now close to or equal to men's in most industrialized countries, women continue to provide a disproportionate share of housework (such as cooking and cleaning) and childcare. Recent literature in labor economics has documented that the gender pay gap is closely related to (expected and actual) childbirth. From this perspective, long-run progress towards more gender equality is likely to stem primarily from changes in social norms and expectations that lead towards an equal division of labor within the home (Alon et al., 2020).

At least two channels have been identified through which the COVID-19 pandemic will likely accelerate changing social norms and expectations. One is on the side of employers. Many businesses are now becoming much more aware of their employees' childcare needs and respond by rapidly adopting more flexible work schedules and telecommuting options. Some of these changes are likely to prove persistent through learning by doing and changing norms. As a result, mothers and fathers alike will gain flexibility in meeting the combined demands of having a career and running a family in many places. Since currently, women are more exposed to these competing demands, they stand to benefit disproportionately (Alon et al., 2020).

There has been a dynamic development of gender inequalities throughout the pandemic, and gender inequalities seem to have also risen due to the pandemic (Hipp & Bünning, 2021). Collins et al. (2020) found that women were more likely to reduce their working hours than men in the US. In a cross-country comparison of Germany, the US, and Singapore, Reichelt et al. (2020) reached similar conclusions but also found some variation in the pandemic's gendered impact for the countries under study (Hipp & Bünning, 2021).

According to Montenovo et al. (2021), the COVID-19 pandemic made it risky to engage in economic, social, familial, and cultural activities that are otherwise commonplace. These changes have had disparate impacts across demographic and socio-economic groups. Job characteristics have emerged as significant moderators. For example, employment losses have been greater among people in jobs that involve face-to-face contact, and fewer losses occurred in jobs that can be done remotely or are in essential industries. On the labor supply side, the transmission mechanism also raises the health risks of work tasks that require face-to-face contact with customers or co-workers, with risks varying with individual characteristics (Guerrieri et al. 2020). Labor supply might decline through other channels as well. For example, people's ability and willingness to work may have declined because the epidemic has compromised childcare services, schooling options, and other types of home and family health care availability (Dingel et al. 2020).

The economic downturn caused by the current COVID-19 outbreak has substantial implications for gender equality, both during the downturn and the subsequent recovery. Compared to more typical recessions, which affect men's employment more severely than women's employment, the employment drop related to social distancing measures significantly impacts sectors with high female employment shares. In addition, closures of schools and daycare centers have massively increased childcare needs, which has a tremendous impact on working mothers. The effects of the crisis on working mothers are likely to be persistent due to high returns to experience in the labor market. Beyond the immediate concern, opposing forces may ultimately promote gender equality in the labor market. First, businesses are rapidly adopting flexible work arrangements, which are likely to persist. Second, many fathers now have to take primary responsibility for childcare, which may erode social norms that currently lead to a lopsided distribution of the division of labor in housework and child care (Alon et al., 2020).

According to Hipp & Bünning (2021), women had a slightly higher likelihood of working less throughout the lockdown period. Yet, essential workers who are predominantly female (Koebe et al. 2020) had a lower probability than employees in other occupations to be working less than before the lockdown. During the lockdown, parents were considerably more likely than childless people to be working less than before, with differences between mothers and fathers widening towards the end of lockdown.

The likelihood of working from home was only weakly related to gender and parenthood. In contrast, respondents in essential occupations were considerably less likely to work from home than those in other occupations. Moreover, despite slight changes in how parents divided the additional childcare, mothers still did substantially more unpaid work during the lockdown than fathers (Hipp & Bünning, 2021).

The division of housework appears not to have changed over the course of the crisis. This fact might be one reason for Hipp & Bünning's (2021) observation that women, in particular mothers, were less satisfied with work, family life, and life in general than men at the beginning and middle of the lockdown period, and why lower satisfaction with work remained even towards the end of the lockdown. In

Germany, for example, analysis suggests an increase rather than a reduction in gender equalities during the pandemic.

A second channel runs through social norms and role models in individual families. While, in many cases, mothers will pick up a large share of the additional childcare (and homeschooling) during the crisis, there will also be a sizeable fraction of families where role models will be reversed. Many medical doctors are women, as are most nurses. Other critical businesses that will continue operating during the crisis include grocery stores and pharmacies, which feature high female employment shares. A sizeable fraction of women working in such areas are married to men who will either lose employment during the crisis or will be able to work from home (e.g., many office workers). Many men inevitably turn into the primary child care providers in such families. The literature on policy changes that engineer a similar change (e.g., "daddy months" and other forms of paternity leave) suggest that such a reallocation of duties within the household is likely to have persistent effects on gender roles and the division of labor (Alon et al., 2020).

Occupations vary immensely by whether people say they are able to telecommute—ranging from 3 percent for transportation and material moving to 78 percent for computer and mathematical. The effective actual time that people do telecommute in normal times is small. However, for the current situation, the ability is more relevant than past behavior. To understand what fraction of men and women work in telecommutable jobs, consider occupations where at least 50 percent of workers state they can telecommute. It is found that 28 percent of male workers but only 22 percent of female workers are employed in these highly telecommutable occupations. These numbers suggest that more men than women will easily adapt to the changing work environment during the crisis in terms of their occupations. Conversely, more women will potentially face loss of employment, which is the opposite of the pattern in normal economic downturns (Alon et al., 2020).

Another salient aspect of the COVID-19 crisis is that it involves large-scale closures of daycare centers and schools, implying that children stay at home, where they have to be cared for and (if possible) educated. This fact poses particularly severe challenges for single parents. For parents who raise their children together, the division of childcare will depend on how much work flexibility each parent has in terms of working from home while also taking care of children. It will likely also depend on the current division of childcare within each family (Alon et al., 2020).

Household arrangements and single mothers' exposure to school and daycare closures along with types of family arrangements play a prominent role in the current crisis for two reasons. First, as in usual recessions, job loss will be less severe financially if a second earner is in the family. Second, the school closures are an enormous shock to all families with children, even more so if there is only one parent in the household who has to deal with the sudden spike in child care needs (Alon et al., 2020).

There are almost 130 million households in the United States. Slightly less than half are married couples (with and without children), 17 percent are single-parent households (i.e., "Family, Female Householder" and "Family, Male Householder") 35 percent are non-family households, which are primarily singles living by themselves. There are around 15 million single mothers, accounting for just under 70 percent of single-parent households (Alon et al., 2020).

Childcare Changes Since COVID-19

Prior to COVID-19, the allocation of childcare within households was uneven, with women bearing the greater share. For families with young children, the months of lockdown have meant providing many additional hours of childcare—equivalent to a full-time working week. Women have done more of this childcare than men (roughly 10 hours a week more). Partly, this is because they are less likely to be working, but that does not account for all the difference. It could also be that women are cutting down the number of hours they work, in which that data was not collected. However, it is demonstrated throughout the data that the quantity of the additional childcare done by women is much less sensitive to their employment status than it is for men. When comparing women working from home with men in furlough and the unemployed, women engage in relatively less additional childcare. Otherwise, women do more of the additional childcare than men, independently of their work status. This means that many women are left juggling work with childcare. In the short term, this may negatively impact their mental health; preliminary evidence shows that women have experienced a more considerable deterioration in their mental health than men during the pandemic (Coviello et al., 2015; Adams-Prassl et al., 2020b).

Labor productivity is also likely to suffer, ultimately reducing earnings and career progression and adding to existing gender pay gaps. Coviello et al. (2015) show that judges who juggle more trials at once instead of working sequentially on a few of them at each unit of time take longer in closing a case. Evidence from online job markets shows that women earn 20 percent less per hour on average, which women can partly explain with young children having more fragmented work patterns that affect their ability to complete a task (Adams, 2020).

There is emerging evidence that, in the academic community, women's productivity has suffered more than men's since the current crisis began. When looking at submissions to prominent working paper series, there is a smaller share of women (particularly mid-career women) among authors of COVID-19 papers (AmanoPatino et al., 2020; Shurchkov, 2020). In the immediate future, as workplaces reopen before childcare centers and schools do, couples will have to make tough decisions about who stays at home to look after the children and who goes to work. Evidence suggests that women may be more likely to take on even more of the burden. There is, as yet, no direct evidence on the impact of COVID-19 on gender norms. In many households, the higher burden of additional childcare done by women may entrench pre-existing gender norms. However, in other families, where men are not working, the allocation of the additional hours of childcare is now more equal. The existing literature on the long-term effects of changes in domestic labor due to shocks is mixed, and it remains to be seen whether any changes are permanent. Recent evidence from paternity leave policies aimed at fathers' involvement with children is inconclusive. Ekberg et al. (2013) do not find an effect of 'daddy months' in Sweden in fathers' likelihood to take medical leave to care for children. However, Farré and González (2019), Patnaik (2019), and Tamm (2019) show that paternity leave leads to a persistent increase in fathers' involvement in childcare in the cases of Spain Canada, and Germany, respectively.

Several things are different about the current situation compared to the context of previous studies. The first is the scale of the demand-side shock. The changes have been profound. The total amount of childcare being done at home completely dwarves the usual amounts because of the closure of almost all formal childcare. Second, unlike previous economic crises where employment losses are focused on particular sectors and occupations, the supply-side effects have also been widespread. The third difference from, for example, the effect of paternity leave mandates is that this is not a deliberate policy

to promote a more equal distribution of childcare but an unintended consequence of measures to stop a virus from spreading. In the longer term, COVID may have changed how we organize work. Firms have made investments to make it possible for workers to work from home, and in many cases, the concept has been proven. In the university setting, academics have had to adapt to deliver lectures online. In corporate environments, meetings are now run live via online platforms, and many services, such as fitness classes, are now being offered online as effectively. The ability to work from home in the future may sound like good news for mothers but can be a double-edged sword if they continue to juggle work with family care (Sevilla & Smith, 2020).

Assuming economic conditions return to their pre-epidemic state, policymakers are right to help workers maintain jobs and preserve links to their employers. On the other hand, if economic conditions do not return to normal rapidly, then the smooth reallocation of workers into different types of jobs may also be necessary (Montenovo et al., 2021).

The Effect of COVID-19 on Caregiving beyond Children

According to the Center for Disease Control (2021), two out of every three caregivers in the United States are women, meaning they provide daily or regular support to children, adults, or people with chronic illnesses or disabilities. And, women who are caregivers have a greater risk for poor physical and mental health, including depression and anxiety. Female caregivers report having more physical and mental distress and poor health compared to male caregivers (CDC, 2021). The COVID-19 pandemic can add even more stressors to caregiving (CDC, 2021).

There is much unknown about the course of this pandemic and its long-term impacts on our communities. But, we do know that COVID-19 will continue to transform the delivery of long-term services and supports, including caregiver support, as well as the ways we interact with our loved ones into the future (Lightfoot & Moone, 2020).

Social distancing and fear may also continue for older adults and their caregivers when many have returned to work, and the social distancing restrictions are lifted. It is critical to examine which types of formal caregiving supports are needed and most effective during crises such as COVID-19 and which emerging caregiving supports should be retained after the crisis ends.

Connecting caregivers to both formal and informal supports is helpful both during the global pandemic and after, as research demonstrates that difficulties for intergenerational caregivers existed prior to COVID-19, is currently exacerbated due to the crisis, and will continue to be problematic without the proper support of business and government (Lightfoot & Moone, 2020).

With families still contending with the effects of the COVID pandemic, many workers with jobs who also care for a loved one at home have reached a breaking point, according to a Fidelity Investments study. While more than two-thirds of family caregivers looking after children and adults say they are ready for challenges, nearly half say they can't manage another year like the last one. And although many companies are now offering more support, more than 4 in 10 working caregivers may have to pick between their jobs and family duties in the coming year (Dore, 2021).

“Caregiving has become increasingly complex over the last few years, placing an uneven weight on many women, who all too often shoulder the brunt of family duties.”

Stacey Watson, Senior Vice President of Life Events at Fidelity Investments

More than 1 in 5 adults – or 53 million Americans – are unpaid caregivers, according to a report from the National Alliance for Caregiving and AARP, and 61% are women. And, nearly 6 in 10 lack time for their mental health amid family responsibilities (Dore, 2021).

The COVID-driven combination of school and senior centers closings, business shutdowns, and the shift to remote work has mounded greater caregiving responsibilities on families with both young children and older parents or loved ones. And, since two-thirds of U.S. caregivers are women, they are bearing the brunt of this growing challenge. According to a recent study by AARP and S&P Global, 60% of women who juggle work and caregiving responsibilities are now providing more care than before the pandemic, and 75% of these workers/caregivers have indicated experiencing a moderate or major increase in stress levels. And according to a McKinsey/LeanIn.Org report on women in the workplace, the burnout gap between men and women doubled compared to a year ago, and one in three women have considered leaving the workforce or downshifting their career, which explains in part why women are leaving the workforce in record numbers (Staglin, 2021).

Yet, family caregivers play an essential role in maintaining the health and well-being of individuals with chronic and disabling conditions. They offer emotional and instrumental support and coordinate healthcare services, and nearly half of them often perform skilled tasks such as injections, catheter or colostomy care, wound care, and medical equipment monitoring (Reinhard et al., 2019). As a result of COVID-19, family caregivers are navigating new social restrictions while providing care to their loved ones in the community. They are faced with unanticipated stressors, especially in caring for the most vulnerable group of individuals at increased risk for severe illness from COVID-19 (Tisminetzky et al., 2020).

Compounding this is the national and local policies implemented to contain the spread of COVID-19 may have led to a change in caregiving intensity, increased feelings of stress, and limited time for family caregivers to manage their own health. For instance, community-based services such as adult day centers were closed, which limited the amount of support and respite care usually received by family caregivers of community-dwelling persons with dementia (Greenberg et al., 2020).

Family caregivers are facing numerous challenges due to the limited access to other caregiving sources and their concerns about their loved ones' physical and mental health. Family caregivers are assuming added responsibilities and adapting to their new caregiving routine. In a study by Savla et al. (2021), a third of family caregivers were not receiving support from other family members, and some were concerned about being the sole caregivers. Moreover, many of their participants had some level of burnout because home health services were reduced or stopped. This finding was echoed in a second study in which Cohen et al. (2020) found that family caregivers of persons with advanced dementia were most concerned about the paid caregivers no longer assisting with their loved ones' care. While these two studies focused on a different population of family caregivers, the concerns about limited caregiving support reflect a universal experience of family caregivers during the COVID-19 pandemic and require timely intervention (Irani et al., 2021).

The United States offers less generous social welfare protections for families and caregivers than most other nations (Colombo, Llena-Nozal, Mercier, & Tjadens, 2011). Social policies and programs that maximize these individual risks also compound racial and gender inequalities that accumulate across the life course (Harrington Meyer & Herd, 2007). And, despite increases in women's formal labor force

participation over the course of the last half-century, the burden of informal care work remains highly gendered, with wives, daughters, and other women being more likely to provide any care – and to provide more care – to one or more family members than are men (Patterson & Margolis, 2019). “Essential” workers, in particular, are often caregivers for children or aging parents, and both caregiving burdens and such employment are clustered among women and racial/ethnic minority populations in the U.S. (Robertson & Gebeloff, 2020; Van Houtven et al., 2020). As an article in *The New York Times* noted, “One in three jobs held by women has been designated as essential ... Nonwhite women are more likely to be doing essential jobs than anyone else.” (Robertson & Gebeloff, 2020). (Stokes & Patterson, 2020).

Even outside of a pandemic context, caregivers are at risk of stress saturation and burnout (Maslach et al., 2001). Caregiver burden includes both objective and subjective strains that may be experienced differentially by men and women (Christie et al., 2019; Craig & Mullan, 2010; van Ee et al., 2016). While historically far more women report adopting culturally supported roles as family caregivers, men's accounts of the burdens felt when in similar roles are less frequently studied (McGill, 2014). Evidence of gender effects on caregiver distress during the COVID-19 pandemic indicates mixed results (Russell et al., 2020; Wade et al., 2021) (Russell, 2021).

Other types of support may be more challenging to maintain during the COVID-19 pandemic. However, even with the resources to provide older family members with this support, these services are not available in all urban and suburban areas and are much less likely to be available in the rural areas where many older families reside (Brandt et al., 2019).

Compounding this problem, members of the middle generations of multigenerational families often find themselves providing support to their older parents and their own children simultaneously (Fingerman et al., 2011; Fingerman et al., 2016). The COVID-19 pandemic is likely to complicate support decisions in multigenerational families (Stokes & Patterson, 2020). Families may be even more likely to concentrate their support resources toward particular family members. The direction of this concentration of support up or down intergenerational lines may well differ by race. Research has shown that White, middle-aged adults tend to provide more support to their adult children than their older parents, whereas Black middle-aged adults tend to provide more support to their aging parents than their adult offspring (Fingerman et al., 2011; Park, 2018). Furthermore, research has shown that Black families often have more living generations and greater potential support needs but fewer resources compared to White families (Park et al., 2019)

Co-residence is a strategy that multigenerational families may employ to promote social support exchanges and mitigate risks during the COVID-19 pandemic. In recent decades prior to the pandemic, co-residence became a common response to intergenerational support needs; in fact, in 2019, more than one-third of adult sons and more than one-quarter of adult daughters aged 18–24 years co-resided with parents (U.S. Census Bureau, 2019). Similarly, the number of older parents co-residing with their midlife adult children nearly tripled between 1988 and 2018, particularly among parents with lower incomes or physical or cognitive limitations (Eickmeyer & Brown, 2019). Black, Hispanic, and Asian American young adults aged 18–24 years, with the number residing in their parents' household increasing from 47% to 52% just between February and July (Fry et al., 2020).

Although this shift was the strongest among White families, the increase was seen across racial and ethnic groups and among both women and men, and in both urban and rural areas (Parker et al., 2020).

In many families, members of multiple generations decide to live together to share resources because of financial shortfalls in the face of the COVID-19 economic downturn (Parker et al., 2020). During the pandemic, younger adults were particularly vulnerable to pay cuts and job loss (Mendez-Smith & Klee, 2020).

According to a recent Pew study, nearly one in five young adults who moved into their parent's homes in the spring and summer of 2020 did so because they had lost their jobs or experienced other serious financial difficulties. The economic stressors associated with the COVID-19 pandemic are likely to increase feelings of tension in multigenerational families. Young adults' additional support needs may create strain in their relationships with their parents. In other families, the decision to live together may not have been intentional. The closure of residence halls resulted in the return of college students to their parents' homes; in fact, the recent Pew study (2020) reported that approximately one-quarter of young adults who returned home did so because their colleges had closed (Fry et al., 2020).

Women provide the majority of care to older family members, and as a result, they are also more likely to experience the consequences of caregiving (Committee on Family Caregiving for Older Adults et al., 2016). According to the life course perspective, it is essential to consider how social-historical time shapes the experiences and consequences of family relations (Daaleman & Elder, 2007; Settersten et al., 2020); as such, it is important to consider how the COVID-19 pandemic may influence the consequences of family caregiving, as well as caregivers' ability to minimize the costs of caregiving (Gilligan et al., 2020).

In summary, COVID-19 may exacerbate the psychological, physical, relational, and financial costs of caregiving. As access to formal services has been restricted and concerns about COVID-19 spread in these settings has increased, family caregivers may feel as if they have no option but to assume additional care duties and 'costs.' An intersectional perspective underscores how certain caregivers—notably women, low-income, and Black caregivers—are particularly vulnerable within this context. (Gilligan et al., 2020).

An estimated 41 million family caregivers provide 34 billion hours of care to other adults in the United States. This care is valued at over 470 USD billion annually (AARP Public Policy Institute, 2019). Caregiving touches nearly all Americans in some way.

*There are only four kinds of people in the world. Those who have been caregivers. Those who are currently caregivers. Those who will be caregivers, and those who will need a caregiver.”
Rosalyn Carter (Snelling, 2012).*

The care provided informally by family can take many forms, such as assisting with activities of daily living or offering social and emotional support. The care can occur in a variety of settings, including a care receiver's home, the caregiver's home, an assisted living establishment, or a nursing home. Family caregivers provide, on average, 20 hours per week of care for a period of nearly five years, with roughly one-third providing care to more than one older person living in the community (Gaugler & Kane, 2015).

Trends in family caregiving of older people living in the community show declines as the population ages and successive generations have less children (Stone, 2015), which can put more responsibility on a smaller number of caregivers, as well as an increased reliance on formal systems to provide care.

With COVID-19, family caregivers of older adults in community settings are often providing this care from a distance. Family members also provide care to older relatives living who are living in long-term care settings, including nursing homes and assisted living facilities. These caregivers spend about as much time with their relatives as do those caring for those in community settings (Port et al., 2005). As there are significant staffing shortages in long-term care settings (Geng et al., 2019), which have been exacerbated by COVID-19 (Mettler et al., 2020), family caregivers of those living in formal settings might feel extra stress worrying about the care their family member is receiving and a sense of helplessness at their lack of ability to monitor their care (Lightfoot & Moone, 2020).

The response to COVID-19 has dramatically affected the delivery of formal systems and supports for caregivers. For example, one crucial support for caregivers is adult day services, where an older adult attends a day program that provides socialization and health-related services. Adult day services provide critical respite for caregivers who may be employed or have a number of other tasks that need to be accomplished (such as grocery shopping, medical appointments, caring for young children, etc.). In many states, adult day services have been closed due to stay-at-home orders, such as in Minnesota, where all 225 adult day service programs were closed, displacing thousands of older adults, many of whom experience cognitive and memory impairment, who attended adult day programs during the week. Service providers have needed to innovate quickly and continue to practice nimble, flexible project management to continue to support caregivers (Light & Moone, 2020).

The following is a case example of how one service provider has adapted its services to provide caregiving support (Lightfoot & Moone, 2020).

Adaptation and innovation in service delivery FamilyMeans is a nonprofit social services agency in Washington County in Minnesota. As a recipient of an Older Americans Act Title III-E contract, the organization provides a comprehensive array of services and supports for caregivers. During the COVID-19 crisis and stay-at-home orders, FamilyMeans caregiver support staff have begun to initiate a number of telesupport services, including:

- Conducting caregiver consultation over the phone, Skype, or Zoom.
- Contacting individual clients via phone and writing notes to ensure needs are being met and connections continue.
- Providing in-home respite through volunteers over telephone and videoconference. One volunteer found a streaming movie that a particular care receiver would enjoy. They watched it simultaneously while the caregiver had a break for a couple of hours.
- Offering online videos with messages from staff for respite care participants. The videos are 20 minutes long and offer some social interaction and familiar faces for people with memory loss.
- Holding Memory Cafes via zoom. Memory Cafes are lunches supported by local restaurants for people living with dementia and their caregivers. With restaurants closed, these Cafes have moved to a virtual setting.
- Holding Zoom coffee breaks with staff where anyone can join for drop-in support.

- Increasing e-mail communication to weekly posts, which include ideas for activities that can be done from home (such as exploring a live eagle cam, online exercise classes, and a self-care resource developed by mental health staff).

Services funded by Title III-E may differ in availability and response to COVID-19, and connecting caregivers to local supports is necessary. Finding a caregiver support provider is a phone call or mouse click away. Nationally caregivers can contact the Eldercare Locator, connecting them to local information and assistance programs offered through states and area agencies on aging (Lightfoot & Moone, 2020).

Initiatives Supporting Opportunities for Women

There are numerous instances of initiatives that focus on increasing gender equity in the workplace and accelerating opportunities for women prior to and throughout the pandemic.

1. Along the Way project, Montgomery County, Pennsylvania - Along the way is a non-profit organization that sends child-care workers to the homes of low-income single mothers and is geared toward helping overnight and weekend shift workers, particularly people with hotel, retail, and restaurant jobs which were the first to lose their positions during the pandemic. The non-profit also sponsors career-help programs and offers discounted access to lawyers and even car mechanics to allow women to rise out of poverty. ([Along The Way PA](#))
2. Women’s Fund of Greater Birmingham, 2019 – Leverages the power of collective giving to strategically invest in organizations and initiatives that create social and economic mobility for women through systems change and alignment of critical economic assets ([Women's Foundation of Alabama \(wfalabama.org\)](#)).
3. The Women’s Foundation of Alabama - The Women’s Foundation of Alabama has invested over \$6 million in initiatives, research, and policy to strengthen our community by building equitable opportunities for women ([Women's Foundation of Alabama \(wfalabama.org\)](#)).
4. Hawaii’s Building Bridges, Not Walking on Backs Initiative – Centers on Improving women’s lives in the state’s economic recovery from the pandemic recession. This initiative, developed by the Hawaii State Commission on the Status of Women, adopts an intersectional lens, offering recommendations not only for rectifying the gender pay gap but also for using federal loans to bolster critical social services and for addressing other issues of importance to women, such as the need for increased access to domestic abuse shelters and reproductive health care (4.13.20-Final-Cover-D2-Feminist-Economic-Recovery-D1.pdf (hawaii.gov)).
5. States such as Colorado, Connecticut, and Idaho, for example, have been providing monetary incentives for those who are unemployed to return to work. Targeting these incentives to women who may wish to return to work could spur recovery. (https://www.nap.edu/read/26303/chapter/1#seca_37)

When the Federal Families First Coronavirus Response Act (FFCRA) expired in December 2020, along with its mandate for employers to provide paid sick leave, some states and localities instituted their own policies. For example, Philadelphia, which prior to FFCRA’s expiration offered COVID-19-specific paid leave to cover those not eligible under that act, has since enacted COVID-19-related paid sick leave for eligible individuals working for employers with 50 or more employees (Nagele-Piazza, 2021 - [Here’s How the Supreme Court Is Shaping Employment Laws \(shrm.org\)](#))

Several states and cities, including- Oregon, Seattle, New York City, San Francisco, San Jose' and Emeryville, California, have in place such comprehensive protections as advance notice of work schedules, additional compensation for unexpected schedule changes or on-call hours, the right to accept or decline added or lengthened shifts, mandatory rest periods between shifts, and the right to request scheduling accommodations (<https://www.epi.org/publication/fair-workweek-laws-help-more-than-1.8-million-workers>).

In Emeryville, a study of the effect of the city's fair workweek policy on mothers of young children found that it reduced schedule unpredictability, leading to overall improved well-being and subjective reports of better sleep quality, illustrating how effective such measures can be (Ananat, Gassman-Pines, and Fitz-Henley, 2019).

Economy & Gender Inequality

While women were already doing most of the world's unpaid care work prior to the onset of the COVID-19 pandemic, emerging research suggests that the crisis and its subsequent shutdown response have resulted in a dramatic increase in this burden. The negative impacts for women and families will likely last for years without proactive interventions. What is commonly referred to as "the economy" would not function without the (often unrecognized) foundation of work provided by the "care economy": the reproduction of everyday life through cooking, raising children, and so forth.

The paid economy has slowed not only because people are physically not allowed into workplaces but also because many families currently need to raise and educate their children without institutional support, which is reducing remunerated working hours and increasing stress. It has long been recognized that gross domestic product ignores the care economy, and heterodox economists have promoted alternative economic systems that could value care work and facilitate a fairer sharing of domestic labor while promoting environmental and economic sustainability. It cannot go unrecognized that there are implications of the COVID-19 pandemic and opportunities through policy for addressing the burden of unpaid care work (Power, 2020).

The invisible and unpaid work of women and the work each of us does to maintain everyday life for ourselves and our family is often referred to as the Care Economy, and it depends on our economic and social status and personal family situation, but might include raising children, cooking, cleaning, caring for elderly relatives, shopping, household management, as well as mental tasks such as planning schedules and performing emotional labor such as tending family relationships. Of course, not all of this work is done by females, but globally women and girls are responsible for 75% of unpaid care and domestic work in homes and communities every day (Moreira da Silva 2019). The International Labor Organization (ILO) calculates that, on average, women around the world perform 4 hours and 25 minutes of unpaid care work every day compared with 1 hour and 23 minutes for men (Pozzan and Cattaneo 2020). This unpaid care work is variously called the care economy, the core economy, and the reproductive economy. Informally, it is sometimes referred to as the hypocrisy economy, when people talk about empowering women because they now also work outside the home in the paid economy, in addition to taking care of their children and home, without any systemic attempt to encourage or enable men to take more responsibility. This is what sociologist Arlie Hochschild famously referred to as "the second shift" based on her studies of heterosexual couples in the 1970s and 1980s (Hochschild and Machung 1989).

More recently, feminist economists have drawn attention to the “third shift,” which refers to the undervalued and unpaid emotional labor that is mostly taken care of by women. Sociologist Heejung Chung (2020) describes the situation as “ensuring the emotional wellbeing of not only ... children but also parents and other family members. In other words, they are in charge of the mental load of worrying about the family.” Despite claims that women can “have it all” (Slaughter 2015), this aspiration is a myth for many women. Unpaid care responsibilities have a negative and measurable impact on women’s participation in the paid economy. The ILO (Addati et al. 2018) estimates that 606 million women, or 41% of those currently inactive from the standpoint of formal employment, are outside the labor market because of their unpaid care responsibilities (Power, 2020).

The Table below indicates the disparities that exist between women and men with regard to job changes and recovered jobs across all industries. *(Note the complete table by industry can be found in the Appendix).*

USA Job Change and Recovery by Gender								
	Job Change 2019Q4 - 2020Q2				Recovered Jobs (2021Q2)			
	Female		Male		Female		Male	
Total - All Industries	-12.7%	-9,900,079	-11.8%	-9,844,718	62%	6,135,408	67%	6,618,883

According to Madgavkar et al. (2020), what is good for gender equality is good for the economy and society as well. The COVID-19 pandemic puts that truth into stark relief and raises critically important choices and opportunities.

As COVID-19 continues to affect lives and livelihoods worldwide, we can already see that the pandemic and its economic fallout are having a regressive effect on gender equality. Madgavkar et al. (2020) calculate that women's jobs are 1.8 times more vulnerable to this crisis than men. Women make up 39 percent of global employment but account for 54 percent of overall job losses. One reason for this greater effect on women is that the virus significantly increases the burden of unpaid care, which women disproportionately carry. This factor, among other things, means that women's employment is dropping faster than average, even accounting for women and men working in different sectors.

Even before the coronavirus, indicators showed that tangible progress toward gender parity had been uneven and that large gender gaps remained across the world. Now, without intervention to address the disproportionate impact of COVID-19 on women, there's a risk that progress could go into reverse. This reversal would set back the cause of gender equality and hold back the global economy. Conversely, taking steps to redress the balance now could improve social and economic outcomes for millions of women globally and help boost economic growth (Madgavkar et al., 2020).

While most people's lives and work have been negatively affected by the crisis, an analysis by Madgavkar et al. (2020) demonstrated that overall, women's jobs and livelihoods are more vulnerable to the COVID-19 pandemic. The magnitude of inequality is striking: using data and trends from unemployment surveys in the United States and India, where gender-disaggregated data are available, it

is estimated that female job loss rates due to COVID-19 are about 1.8 times higher than male job loss rates globally, at 5.7 percent versus 3.1 percent respectively. At a country level, the data suggest that in the United States, women made up 46 percent of workers before COVID-19. Factoring in industry-mix effects indicates that women would make up 43 percent of job losses. However, unemployment data suggest that women make up 54 percent of the overall job losses to date. The gendered nature of work across industries explains one-fourth of the difference between job-loss rates for men and women. The lack of systemic progress to resolve other societal barriers for women explains the rest (Madgavkar et al., 2020).

Madgavkar et al. (2020) point out that the nature of work remains significantly gender-specific: women and men tend to cluster in different occupations in both mature and emerging economies. This, in turn, shapes the gender implications of the pandemic: The analysis shows that female jobs are 19 percent more at risk than male ones simply because women are disproportionately represented in sectors negatively affected by the COVID-19 crisis.

Madgavkar et al. (2020) estimate that 4.5 percent of women's employment is at risk in the pandemic globally, compared with 3.8 percent of men's employment, just given the industries in which men and women participate. The reason is that women have more than the average share of employment in three of the four most affected sectors, as measured by employment declines globally. Compared with the aggregate share of women in global employment—39 percent—women have 54 percent of global jobs in accommodations and food service, which are among the sectors worst affected by the crisis; 43 percent of jobs in retail and wholesale trade; and 46 percent in other services, including the arts, recreation, and public administration. Some sectors, such as manufacturing, where men are a large majority of those employed, have also been severely affected. Other sectors, such as education and healthcare, where women are the majority, have suffered a relatively minor impact.

Even before the pandemic, Madgavkar et al. (2020) noted that the progress toward gender equality had been uneven. The gender effects of the COVID-19 crisis highlight the uneven progress toward gender equality. Indeed, in the aggregate, progress toward equality in work and society has stayed relatively flat in the five years between 2014 and 2019. In 2014, the global Gender Progress Score (GPS) score was 0.60; today, it is 0.61 (on a scale of 0 to 1, where 1 signifies full parity between women and men). Gender equality in work continues to lag behind gender equality in society, with a GPS of 0.52 versus 0.67, respectively.

The world has made progress on a few aspects of gender equality, such as maternal mortality, the share of women in professional and technical jobs, and political representation. However, the level of female participation in the labor force is about two-thirds that of men and has hardly budged in that period. Within this overall picture, countries, and regions can vary significantly. For example, India has seen a slight decrease in female labor-force participation in the past five years, while Indonesia has registered a slight increase. Prior to the pandemic, it was argued that narrowing the global gender gap in work would not only be equitable in the broadest sense but could be one of the largest boosters to global Gross Domestic Product (GDP) growth. Conversely, the lack of progress on gender equality is proving to be economically costly (Madgavkar et al., 2020).

In previous research, Madgavkar et al. (2020) found that the cost of making sufficient investments in five areas (education, family planning, maternal mortality, digital inclusion, and unpaid care work) could amount to \$1.5 trillion to \$2.0 trillion in incremental public, private, or annual household spending in

2025, or 1.3 to 1.7 percent of global GDP in that year. This is 20 to 30 percent more than what would be spent in a business-as-usual case in 2025 (as a result of rising population and GDP).

McKinsey's research also found that the economic benefits of narrowing gender gaps are six to eight times higher than the social spending required. And it is not just countries that stand to gain from investing in women and girls; McKinsey research has also found a diversity dividend for companies. For example, those in the top quartile for gender diversity on executive teams were 25 percent 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 in terms of resilience and the ability to recover from the current crisis; they could be limiting their access to talent, diverse skills, leadership styles, and perspectives. It is critical to ask, under the circumstances, what measures should policy and business leaders consider? Just as we have seen variations among countries in progress toward gender equality, the policies to be put in place will also need to be tailored to the national context (McKinsey & Company, 2020).

The pandemic response can be viewed as gender-regressive. In April, the United Nations (2020) released a report confirming that unpaid care work has increased, with children out of school, heightened care needs of older persons, and overwhelmed health services. But the pandemic and lockdown are not experienced equally: for some people, there are advantages to the ongoing COVID-19 pandemic (Power, 2020).

At the same time, families are under a whole new set of pressures, depending on circumstances. As a feminist advocate and writer Chloe Cooney (2020) recently noted, the pandemic response is highlighting how problematic the existing system is for families: "It's always been a farce to think about caretaking and family responsibilities as 'personal life decisions' that get handled outside of work hours. This current situation is almost prophetically designed to showcase the farce of our societal approach to separating work and family lives." The demands on working parents of our previous "normal" everyday life were already stressful, overwhelming, lonely, and nonsensical – and the burden on women tended to be worse. According to a large biological study of eleven key indicators of chronic stress levels in the UK, working mothers with two children were found under pre-pandemic conditions to be 40% more stressed than the average person (Chandola et al. 2019) (Power, 2020).

Implications

Montenovo et al. (2021) indicate large disparities in the current labor market crisis, and they suggest a role for targeted public policies. Although women with young children do not have statistically larger increases in recent unemployment than men with young children, their higher rate of "employed-but-absent" is worrying despite the disruptions in school and child care. It could indicate more considerable losses in future employment. Moreover, single parents, who are overwhelmingly women, experienced a more significant decrease in employment between February and April as well as between February and May than their married counterparts.

The average age of mothers is 20-34 (107,061), followed by the 35 to 50 age range (37, 77), which is a substantial population who fall into the prime working age bracket of 25-54. Additionally, 11.5% of households in Pennsylvania have at least one child in the 5-14 age range, followed by under 5 (5.4%) and 15-16 years (3.6%). This data is exacerbated by the fact that there is a significant burden faced by workers with young children who do not have childcare options. The industries where parents are left

without a caregiver in the highest percentages are those in education/childcare industries and health care/assistance industries. More detailed data can be found in the Appendix.

By industry	Child under 14	Child under 14 no caregiver
Education/Child Care	0.319	0.251
Health Care/Assistance	0.341	0.247

As such, all of this information compounded indicates that addressing childcare obligations as part of “re-opening” strategies and as we move forward out of the pandemic is an important consideration for policymakers and employers in Pennsylvania.

The strong message emerging from this culmination of research is that the faster policymakers and business leaders act to push for greater gender equality, even as the COVID-19 crisis continues, the bigger the benefits not just for gender equality but also economic growth. There is a real risk of losing even more economic output—and the economic security it could mean for millions of women—than COVID19 would normally imply for all workers. Women stand to lose both in terms of parity and in terms of economic benefits if nothing is done and the stagnating record of the past five years settles in as the norm—on top of the gender-regressive shock we see as a result of COVID-19 (Madgavkar et al., 2020).

Efforts to support new child care options are essential in this setting. In May, during the reopening phase, there was some evidence of racial disparities in re-employment. For example, Black workers become employed at a proportionately lower rate compared to other groups, pointing at more profound structural damage to the economy. Previous research documents significant scarring effects of graduating from high school and college during a recession—the longer-term impacts of early-career setbacks may be even larger than the near-term effects (Rothstein 2019; Montenegro et al., 2021).

Summary & Recommendations

The evidence suggests that women will be vastly more affected by the rise in caregiving needs following the closures of schools and daycare centers and various other impediments during the crisis. The 15 million single mothers in the United States will be the most severely affected, with little potential for accessing other sources of childcare under social isolation orders and the little possibility to continue working during the crisis. Supporting these women and their children during the crisis is among the most immediate and vital policy challenges. Even among couples raising their children together, there are clear indications that women will be much more affected by rising childcare requirements. There are already many more married women than men who are stay-at-home parents and are likely to pick up most of the increase in the workload. And among the many couples with children who work full time (44 percent of the total), the women provide about 60 percent of childcare hours. In times of high childcare needs (i.e., when children are young), the women's share is even higher. It is likely that much of this division of labor will persist. For some working married women, this will mean that they will temporarily drop out of the labor force. Others will continue to work from home—including, for example, mothers on the tenure track at an academic institution—but they will be more impaired in their ability to get work done compared to married men in the same situation. While these women are in a more favorable position than single mothers, they may still face severe setbacks in career progression and their future earnings potential (Alon et al., 2020).

Concerning the effect of COVID-19 on workplace flexibility and gender norms, the COVID-19 shock is likely to place a disproportionate burden on women. Unlike regular recessions, the COVID-19 downturn is expected to reduce employment in sectors where women comprise a significant fraction of the workforce (Alon et al., 2020).

The research presented has two critical implications for understanding the career consequences of the Covid-19 pandemic. First, studies should be designed to capture both short-term and long-term consequences. Although research is likely to find that this specific career shock has primarily negative career and psychological consequences in the short-term (e.g., job loss, reduced salary, lower career, and work satisfaction), over time, some individuals may move into more satisfying careers or job roles through their own proactive career behaviors. Indeed, research has demonstrated that employees who experience a novel and critical adverse workplace event were more likely to engage in improvisation behaviors such as taking advantage of opportunities and "thinking outside the box" (Chen, Liu, Tang, & Hogan, in press). Conversely, other individuals may be in occupations that have adapted to the pandemic requirements of social and physical distancing (e.g., education, journalism, and government). Thus, the effects of the pandemic shock on respective career outcomes may be neutral or even positive in the short term. But the long-term economic consequences of social distancing and closure of non-essential businesses to industries dependent on government support may lead to severe budget cuts and, thus, job insecurity in the future. At this point, how long is "long-term" is not clear (Akkermans, 2020).

While the negative impacts of Covid-19 are likely to be far-reaching, in some instances, they may also incur positive career outcomes. In this respect, a career shock that is initially negative may, over time, result in positive career experiences, opportunities, and outcomes (Seibert et al., 2013). Zikic and Richardson (2007), for example, argued that whereas unexpected job loss might initially be viewed negatively, over time, it may give rise to opportunities for career exploration and change. Indeed, many

of the managers in their study indicated that what had initially seemed like a negative experience had ultimately allowed them to make positive career changes increasing their job satisfaction and opportunities for life balance. Similarly, Rummel, Akkermans, Blokker, and Van Gelderen (2019) showed that for some young entrepreneurs, being forced to leave a corporate career was initially a negative experience but ultimately led them to become successful entrepreneurs.

In the case of Covid-19, it may be that sudden changes in employment (including unemployment) coupled with the broader societal changes are interpreted by some people as epiphanies causing them to re-evaluate either their career trajectories or broader life aspirations. For example, in their study of retirement decisions, Vough, Bataille, Noh, and Lee (2015) reported that adverse life events, such as death or sickness in the family, can create a re-evaluation of career aspirations leading to more positive life decisions. In a study among former professional athletes, Richardson and McKenna (2020) also provide a further example of how a negative career event, e.g., on-field career-ending injury, provided an opportunity for former players to change their career direction. This provides an example of what Akkermans et al. (2018) refer to as triggering a deliberate thinking process.

For some, the negative career shock brought about by Covid-19 might also bring about opportunities for changing work arrangements, career development, and skill upgrades. Indeed, there have been widespread reports about how some companies who might have been reluctant to allow employees to work from home are now discovering the added advantages, including adopting new forms of technology to cater to more flexible work arrangements (The Economist, 2020). This trend may also challenge the reported 'flexibility stigma' attached to those who take advantage of telecommuting (Golden & Eddleston, 2020; Kaplan, Engelsted, Lei, & Lockwood, 2018), which may, in turn, reduce both employee and employer willingness to use/offer it. Another potentially positive outcome of Covid-19 relates to the necessity to upgrade skills and competencies – particularly concerning the use of technology. For example, whereas the move to online learning technologies can be unsettling for some academics who are more accustomed to and comfortable with the non-online classroom (Kilgour, Reynaud, Northcote, McLoughlin, & Gosselin, 2019), there have been growing reports about how academics have been upgrading their technological skills with the sudden demand to switch from in-class to online delivery and often in a matter of days if not weeks' notice (McKinsey & Company, 2020). Similarly, other workers whose organizations have moved to provide much-needed medical supplies are also developing new skill sets and finding new meaning in their work. The 'silver lining' of these trends may, therefore, be that some individuals who may have otherwise been reluctant to engage in proactive skill development and career behaviors have augmented both their short- and long-term career sustainability by effectively dealing with the current changes in work demands (De Vos, Van der Heijden, & Akkermans, 2020).

The shift in economic and employment disparities along with newfound opportunities due to the pandemic, the patterns that follow, and comprehensive data must be observed through the post-COVID years, as it is unknown yet, the surmounting effect this will have on future employment for women and the potentially long-lasting impact on the economy.

The Covid-19 pandemic can be considered a career shock that significantly impacts people's work and careers. Insights through career shocks literature can offer ways of understanding this impact and help guide future research based on these insights. The effect will be the consequence of a dynamic interplay between contextual and individual factors, which will differ for people across career and life stages. And,

there may be differences between short-term and long-term consequences. For example, even though the pandemic is a negative career shock, some may have longer-term positive implications. It is critical to understand the work and career implications of Covid-19 as a career shock and support people in dealing with this shock (Akkermans, 2020).

Perhaps even more importantly, women will be affected by the increase in childcare needs stemming from closings of schools and daycare centers. This impact is the most severe for single mothers, who outnumber single fathers by a large margin. In families where both parents are present, mothers usually did the majority of child care before the crisis. If the relative division of labor in the family persists during the crisis, this suggests that there will be a disproportionate impact on women, even for these families (Alon et al., 2020).

Nevertheless, counteracting forces may promote gender equality during the recovery from the current crisis and improve our regional workforce needs.

Employer Programs and Initiatives

Many companies are realizing that they need to support their employees more with caregiving, not only because they need the support, but also to retain workers,” Watson said. And the trend is expected to continue, with nearly two-thirds of employers planning to boost child-care benefits and more than 4 in 10 wanting to expand senior-care offerings, according to a Care.com and LifeCare survey of human resource professionals and C-suite decision-makers (Dore, 2021).

However, the study found that many caregivers aren’t leveraging these perks, with fewer than half of eligible employees asking companies about these benefits. Companies can take the initiative and focus on the responsibility of communicating benefits to employees as employees can be nervous about asking about benefits and flexibility in fear of losing their job. Those who developed and put a plan into place felt better prepared and said it made “caregiving significantly less stressful.” (Dore, 2021).

The answers start with understanding the needs of employees who are doing double duty as caregivers. Employees are often hesitant about discussing their caregiving role out of fear managers might doubt their work commitment or pass them over for promotions (Staglin, 2021).

Organizations could create a culture where employees feel comfortable and confident sharing their needs with HR and business leaders. The solution may be as simple as offering more flexible hours, which most companies began accommodating during COVID-19. Another solution is offering peer support services - both in the community and virtually – through employee assistance programs or health plans (Staglin, 2021).

Employers could also recognize that the need for caregiving isn’t going away after the pandemic. Already, one in seven Americans belongs to the sandwich generation – people caring for both aging parents and young children. This means compensation/benefits policies may be mismatched with workers’ needs. Fewer than one in five Americans have access to paid family leave, despite evidence that it improves worker retention and enhances loyalty and morale (Staglin, 2021).

Of course, leaders can also model healthy practices by sharing their own caregiving stories, which signals to employees that they understand the stress caregiving imposes and the need for workplaces to adjust

to accommodate these responsibilities. This also helps reduce stigma and creates a culture that positively impacts the mental health of all workers (Staglin, 2021).

The need to juggle full-time work with family caregiving will not only survive the pandemic, but it's also a challenge that will grow for millions of employees as America's population ages. Organizations that act now can help employees manage their professional and personal responsibilities while alleviating stress, enhancing loyalty, and keeping valuable people in the workforce (Staglin, 2021).

Individual organizations or managers can support workers who are balancing care responsibilities (Plaisier et al., 2015). However, policies set at the state and national levels can be much more effective at providing the support necessary to allow caregivers to forego formal work during critical periods in order to focus on caregiving, especially when these policies are free from administrative burdens (Herd & Moynihan, 2019). Intergenerational relationships, family structure, and public health are inseparable, and the most effective public policy regimes and interventions will be those that recognize these intersections and design policies accordingly (Stokes & Patterson, 2020).

Madgavkar et al. (2020) see a role for all stakeholders and some overarching themes that, although are not novel concepts, should be given serious consideration moving forward, and include the following considering the serious implications of COVID:

- Interventions to address unpaid childcare.
- The importance of reducing the gender imbalance in responsibility for care cannot be overstated. Interventions to tackle this problem include better recognition of unpaid work, reducing the amount of unpaid work, and rebalancing it between men and women.

1. More flexible work arrangements: Many businesses are currently adopting work-from-home and telecommuting options at a broad scale for the first time. It is likely that some of these changes persist, leading to more workplace flexibility in the future. Given that mothers currently carry a disproportionate burden in combining work and childcare duties, they stand to benefit relatively more than men from these changes. Goldin (2010) points to the lack of flexibility in work arrangements and hours, particularly in financial and business services, as one of the last sources of the gender pay gap.

2. Changes in social norms and role models: Many fathers will now also shoulder additional childcare and homeschooling responsibilities. In a sizeable number of families, fathers will temporarily turn into primary childcare providers. These changes are likely to push social norms towards more equality in the provision of childcare and housework. With the role of workplace flexibility, consider, first, the role of more flexible work arrangements. If there is a persistent increase in the ability to work from home for women and men alike, it is essential to consider how the division of labor in the household will change? A sense of this potential impact can be gauged by comparing the time spent on childcare between parents who can work from home and those who cannot. Right now, many businesses are adopting work-from-home options on a large scale. It is likely that a sizeable fraction of this additional flexibility will stay in place after the actual crisis. Once businesses have invested in remote-working technology and the learning-by-doing involved in the transition, going back to the status quo is not attractive. As a result, many workers will benefit from added flexibility in combining career and childcare needs. This change will be a benefit to both mothers and fathers. Still, given that mothers currently carry the majority of the burden of childcare, in relative terms, they are likely to gain more, both because of added flexibility in their own work and more contributions from their husbands (Alon, 2020).

There is an opportunity and a possibility that the COVID-19 shock will push these norms towards more gender equality? To assess this possibility, one can draw a parallel between the COVID-19 crisis and the last major shock to women in the labor market, namely World War II. During the war, millions of women entered the labor force to replace men in factories and other workplaces. The impact of the war shock was particularly large for married women with children, who had meager labor force participation rates in the pre-war economy. Literature documents that the shock of World War II had a considerable and persistent effect on female employment. While some of this impact was at the individual level (i.e., women who entered the labor force during the war increased their employment also after the war), another component works through shifting cultural norms. Fernández, Fogli, and Olivetti (2004) show that boys who grow up in a family where the mother is working are later on more likely to be married to women who also work (they use the World-War-II shock to identify the size of this effect). This observation suggests an impact on social norms. These boys observed a more equal sharing of duties at home and in the labor market between their parents compared to single-earner families, which had repercussions they desired in their own families (Alon, 2020).

There is also evidence that shifting social norms and beliefs were one cause of the secular rise in the labor force participation of married women from the 1960s to the 1990s. Fernández (2013) and Fogli and Veldkamp (2011) argue that women gradually learned, by observing other working women in their families and neighborhoods, about the true costs and benefits of being in the working force (including potential effects of working on children). As more women worked, there were observations to learn from, which accelerated the transition to higher female labor force participation levels.

The example of World War II suggests that temporary changes to the division of labor between the sexes have long-run effects. Still, one can ask how is this likely to play out during the COVID-19 crisis? An important question is how much fathers' childcare responsibilities will increase? Many fathers will be working from home during the crisis while also taking on childcare responsibilities. The mere fact of being at home rather than at a workplace is likely to increase men's childcare responsibilities. This effect is expected to be significant during the crisis because given that schools and daycare centers are closed, the overall need for childcare is much higher. Hence, even if (as is likely), on average, women will shoulder the majority of the increase, many fathers will still experience considerable growth in their childcare hours. This higher exposure will likely have at least some persistent effects on future contributions to child care, be it through learning by doing, more information about what kids are actually doing all day, or through increased attachment to children. We would expect even more significant effects within families where the COVID-19 crisis also shifts the relative distribution of childcare hours towards men. One group for which this is likely to be the case in families where the mother is already staying at home, but the father previously worked out of the house and is now either working at home or not employed. We expect the most significant impact on the division of labor among couples where, because of the COVID-19 crisis, fathers temporarily turn into the leading provider of childcare. We expect this to be the case for couples where both parents are currently in the labor force and where the father is able/forced to work from home during the crisis while the mother is not. For example, this would be the case if the mother is in a "critical" occupation (a medical doctor or other healthcare professionals who can't work from home). In contrast, the father is in a field that switches to telecommuting during the crisis (such as education and a lot of non-critical office work) (Alon et al., 2020).

McKinsey Global Institute (MGI) has determined that the value of unpaid care work done by women is \$10 trillion, or 13 percent of global GDP. Potential interventions could include these:

1. Employer- or state-funded provision of childcare or tax policies that encourage both spouses to work.
2. Family-friendly policies, including flexible programs and part-time programs, to support workers experiencing an increased childcare burden during the pandemic and beyond.
3. Rethinking performance reviews and promotions, as well as a senior- and middle management buy-in to ensure the wide scale adoption of changes.
4. A professionalized childcare industry, with public-financing support, in developing countries, where the social-services infrastructure is less well-developed; this could enable many women to work and create employment for many others.
5. Access to basic infrastructure, which in the long run can reduce the time women spend on unpaid work; for example, in lower-income countries, a significant portion of the time women devote to such work includes tasks like fetching water and firewood.

Any drive toward gender parity arguably starts with efforts to change entrenched, widespread attitudes about women's role in society. This is an extremely difficult and complex challenge that will require all stakeholders to play a sustained part over the long term (Madgavkar et al., 2021).

Governments, businesses, and other stakeholders can run campaigns and enlist male champions to help drive home the idea that a larger number of women at work represents socially and economically beneficial progress. Interventions to address women's economic participation must also address broader societal aspects of gender inequality. Indeed, the two go hand in hand, as our previous research has shown. Therefore, governments and businesses must consider safeguarding girls' education, tackling violence against women, and protecting maternal health, to name a few crucial issues (Madgavkar, 2020).

More data are needed to understand better the links between women in society, women at work, and economic growth—particularly the factors that drive job loss and recovery among women. Some critical questions also remain, including how future trends such as automation might amplify or blunt the impact of COVID-19 on women and how the pandemic affects the wages, job security, and benefits of women. Answering such questions could shape future decisions by governments, multilateral organizations, and companies (Madgavkar, 2020) and also impact how these entities design and implement additional programs to assist families. Such programs can take the form of after-school programs, such as SHINE with expanded offerings, before-school care, and overnight or onsite daycare.

Childcare Industry

The child care industry must also change to reflect worker needs. Shift work such as found in hospitality, retail, distribution, and manufacturing may require evenings, overnight, and weekends. Those offerings are typically not available in the childcare industry. However, in order to reflect employer and employee's needs, these options must become available. In home child care at the family home or the care home, are also options to expand services to meet needs.

Outlook and Policy Options

While the U.S. family and social welfare policies are not as robust as other countries in general, those that specifically support family caregivers are even slimmer. The U.S. does not have a formal federal system that supports caregivers, instead of relying on piecemeal state policies, in stark contrast with other peer nations (Organization for Economic Cooperation and Development, 2011). The widest-reaching benefit – the Family and Medical Leave Act (FMLA) – grants only uncompensated time off and only guarantees leave and the maintenance of group health benefits for 12 weeks. And, it does apply to all employers in the U.S. However, the ability to take unpaid leave is not practically available to all caregivers, many of whom may be unable to forego consistent income while providing care to loved ones or for whom caregiving responsibilities persist over long periods of time.

Congress did pass the Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act in 2018 to establish a national strategy to acknowledge and assist family caregivers through policy, infrastructure, and programming. Previously, the National Family Caregiver Support Program was established in 2000 and offers grants to states and territories in order to provide services to caregivers of an older adult, focusing on information and connections to services like respite care (e.g., planned or emergency care provided to caregivers) (Administration for Community Living, n.d.).

Although an important step, more funding is needed to directly help family caregivers, who spend roughly 7,000 USD per year out-of-pocket on costs associated with caring for an older family member (Rainville et al., 2016). The current policy landscape leaves gaps in care needs, forcing many families to handle expenses themselves for extra support (e.g., respite care) (Whittier et al., 2005). Caregivers of Black and Hispanic older adults, in particular, report challenges in accessing support services, but it is not clear what role the availability, affordability, and/or desirability of services offered play in these choices (Potter, 2018). Caregiving responsibilities and burdens were intensified during COVID-19 when stay-at-home orders were in place, making access to available supports and services crucial yet difficult to obtain (Stokes & Patterson, 2020).

The COVID-19 pandemic and associated recession have significantly affected women's workforce participation. These impacts have varied from job loss to additional caregiving responsibilities. Hispanic women have been particularly affected, demonstrating the historical gender and racial inequalities in the labor market. To address the impacts of the COVID-19 pandemic and recession on women's employment, state and local decision-makers can use available federal funds to mitigate these impacts while also laying the foundation for longer-term solutions. State and local decision-makers can use these strategies both for supporting caregiving responsibilities and career development (National Academies of Sciences, Engineering, and Medicine, 2021).

Statistics show that 2.5 million women left the job market throughout the pandemic, compared with 1.8 million men (U.S. Bureau of Labor Statistics, 2021). Data from the Current Population Survey (CPS) reveal that women's labor force participation from January 2020 to January 2021 declined by 1.8 percent, halting any gains made prior to the pandemic and underscoring chronic issues with female labor force participation (Goldin, 2021). Black and Hispanic women, low-income workers, non-college-educated workers, and those in service occupations are most affected (Albanesi, 2021; Chetty et al., 2020; Goldin, 2021).

The federal government has provided some funds to states and localities through the American Rescue Plan and the CARES Act – including unemployment compensation, economic impact payments, a child tax credit, a small business tax credit, emergency capital investment, and paycheck protection loans – to support workers dealing with the economic effects of the pandemic. These funds present opportunities for state and local decision-makers to take short-term actions to support recovery and employment for women, who made up 47 percent of the total U.S. labor force prior to the onset of the pandemic (Goldin, 2021).

The 2000 Older Americans Act reauthorization included a provision to support informal caregivers known as the National Family Caregiver Support Program (Title III-E). The passage of Title III-E acknowledged the crucial role caregivers play in the lives of older Americans. Funding through the Older Americans Act flows to states and area agencies on aging, who then develop relationships with providers in the community to offer direct support to caregivers. Eligibility for Title III-E mirrors most of the Older Americans Act Titles with some uniqueness. Services are available to people 18 years and older, providing care to someone 60 years and older or someone of any age with dementia. The program also supports relative caregivers 55 years and older who provide care to children or adults with disabilities (Administration for Community Living, 2019).

Also, similar to the other Titles, a Title III-E provider cannot charge for services but can request either a voluntary contribution or utilize a quasi-sliding fee scale known as cost-sharing. Services cannot be denied due to a caregiver's inability or unwillingness to pay. The CARES (Coronavirus Aid, Relieve and Economic Security) Act included an additional 100 USD million for Title III-E (Administration for Community Living, 2020). Services available under Title III-E are comprehensive and include coaching and counseling, support groups, education, respite care, adult day services, and supplemental services. Supplemental services often target the care receiver but benefit the caregiver somehow. For example, a care receiver may need their lawn mowed, and the primary caregiver may not be able to provide this service. Still, it is crucial in order for the caregiver to continue to provide care. Another agency could be engaged to offer the lawn mowing service as a way to support the caregiver, so they can continue to provide other care (Lightfoot & Moone, 2020).

Numerous state governments have imposed social distancing and stay-at-home guidelines for residents, with exceptions for "essential" workers and activities such as grocery shopping and exercise. Yet these guidelines may be limited in influence when it comes to working caregivers, especially those who are economically and socially marginalized, for whom the decision to stay home and protect loved ones from infection may at the same time be a decision to go without pay, forego health insurance coverage, and risk food insecurity or even eviction. For working caregivers, broad-based policies such as paid family and sick leave may be critical for helping families physically distance when needed to either quarantine or prevent further spread of the virus while also balancing care roles (Schulz, 2020). (Stokes & Patterson, 2020).

Although there is no federal policy to date, some states have or will soon be implementing paid leave for caregivers, including California, New Jersey, Rhode Island, New York, and Washington (National Partnership for Women & Families, 2019). California implemented a program in 2004 entitled the California Paid Family Leave Program (CA-PFL), and early analyses show that the program is effective in helping caregivers to continue work, especially for some particularly at-risk populations, including

middle-aged working caregivers or the near-poor (Kang et al., 2019). This program also reduced the proportion of older adults that required care in nursing homes (Arora & Wolf, 2018)

Policymakers should bear in mind that families and public health go hand-in-hand and that policies aimed at workers, caregivers, and older adults can help advance life expectancy and reduce health inequities (Moen & DePasquale, 2017; Schulz, 2020). In such cases, the more universal and accessible these policies are, the more likely they are to benefit caregivers and families in need (e.g., Herd & Moynihan, 2019).

Take income support in the context of the current crisis, for example. Unemployment benefits support those laid off, but not those who voluntarily quit to reduce the risk of infection for themselves and/or dependent family members, nor does it cover workers across all sectors (Badger & Parlapiano, 2020). Further, eligibility and application requirements to access unemployment benefits vary across states and can create barriers to obtaining benefits in a timely fashion (Badger & Parlapiano, 2020). Conversely, programs such as universal basic income, direct payments to caregivers, or stimulus checks like those proposed and passed in April, can help families provide basic goods like housing and food so that they can focus on their caregiving responsibilities without restricting eligibility or requiring administrative burdens in order to access needed funds (for instance, those required to file for a dependent tax credit).

Unfortunately, even when supports are available, families are often unaware of them, unable to determine whether they qualify, or simply unable to complete the difficult and time-consuming documentation required (Herd & Moynihan, 2019). It is therefore critical that policies and programs implemented be as broad-based and accessible as possible, without the presence of onerous administrative burdens, in order to maximize the likelihood that benefits will actually accrue to the most marginalized and at-risk populations (Herd & Moynihan, 2019) (Stokes & Patterson, 2020).

While short-term solutions will assist with current employment and economic inequities, long-term solutions that address systemic and institutional gender and racial inequities in the labor market are needed (National Academies of Sciences, Engineering, and Medicine, 2021).

Broad Concepts:

Supporting caregiving responsibilities

- Providing direct financial support for women and their families.
- Invest in the childcare infrastructure.
- Introduce family-supportive policies.

Supporting Workforce and Career Development

- Invest in workforce development and education targeted at women.
- Promote women's access to traditionally male-dominated jobs.
- Provide access to mental health services for women.

Reviewing Federal and State Legislation Around Child Care Funding and Registration/Operations

- Expand Head Start programs for early Pre-K, Pre-K, and before and after school programs
- Child care facility regulations should be adopted to include in home child care (not classified as a home visit).

Challenges for families during the current crisis are unprecedented, severe, and falling disproportionately on those least able to respond, such as low-income single mothers. There are many policy options available that local governments could use to address specific challenges families are likely to face not only during the COVID crisis but also moving forward in a post-COVID world.

Examples of policies that might be considered to address these challenges include:

1. Government subsidies to replace pay for workers who need to provide child care during the crisis due to school and daycare closures and are therefore unable to work, conditional on a continued employment relationship (i.e., workers can return to work immediately after the crisis).
2. Suspending work requirements for government assistance programs such as Temporary Assistance for Needy Families (TANF) and Medicaid during times of current and future school and daycare closures.
4. Extending some degree of unemployment benefits to workers voluntarily separating from employment to provide child-care when no other child care options are feasible.

This is not a comprehensive list, and each policy involves tradeoffs with factors such as budgetary impact and work incentives. However, the policies provide examples of how some of the specific challenges posed by the COVID-19 crisis could be addressed. Some countries such as Germany and Denmark have already adopted measures that allow workers to remain on their employer's payroll during the crisis despite working zero or reduced hours.

In the United States, an additional factor relevant for evaluating measures that protect employment is that health insurance is often employment-based. Hence, protecting employment would have an additional effect of preserving health insurance. The COVID-19 also raises policy questions for employers. Many universities are already extending tenure clocks for all junior faculty as a response to the COVID19 epidemic. But recent evidence from Antecol, Bedard, and Stearns (2018) suggest that gender blind tenure clock extensions for parents actually reduce female tenure rates and increase male tenure rates, likely because of differences in time spent on childcare.

Similar mechanisms are at work in corporate settings where bonuses are tied to hours worked: mothers will likely find it harder to meet these targets because of childcare provision during the crisis while most men will not, exacerbating the gender wage gap. Finally, there will be other consequences of the current crisis that will fall disproportionately on women that future research will unveil. In normal recessions, incidents of domestic violence increase (Siflinger, Tertilt, and van den Berg 2012). With families cooped up inside, these risks will further increase, and women are much more likely than men to be the victims of domestic violence. Further, some states are restricting access to abortions during the crisis, and the impact of the pandemic on fertility more broadly remains to be seen (Akkermans et al., 2018)

Lack of access to affordable and quality childcare may also be preventing some women from re-entering the workforce or searching for new jobs. Before the pandemic, many parents struggled with childcare responsibilities, causing job disruptions (Morrissey, 2017). While the COVID-19 pandemic has exacerbated this challenge, state and local governments can support assistance programs in the short term to help mitigate the impacts on women's employment. State-level programs providing support to cover the costs of such essential services as childcare and transportation have been shown to increase the retention of workers, particularly women of color (Wilkinson and Kelly, 2018). For example, the Oklahoma Department of Human Services offered 60 days of subsidized childcare to people looking for

work because of their loss of employment during the pandemic ([NGA, 2021](#)).¹² Investment in childcare needs to go beyond just availability but should focus on quality and affordability as well ([Morrissey, 2017](#)).

Family-supportive policies and practices can, in the short term, enable women with dependent caregiving demands, including women with childcare needs, women with school-age children, or women caring for older relatives, to continue or return to work. Research on the effects of access to paid family leave has shown that it reduces the number of female employees leaving their jobs in the first year after giving birth, increases household income, increases the number of hours women work, and lowers poverty rates for mothers ([Baum and Ruhm, 2013](#); [Jones and Wilcher, 2020](#); [NASEM, 2016](#); [Stanczyk, 2019](#)).

The introduction of family-supportive policies alone is insufficient ([Allen, 2001](#)). Policy needs to be coupled with cultivating a work environment that supports policy implementation without fear of repercussions. Support from supervisors has been associated with less work-family conflict and can be a vital element of a family-supportive culture ([French et al., 2018](#)). Providing supervisors with training on how to offer work-life support to employees is one way to foster a more family-supportive work environment ([Hammer et al., 2011](#)).

The need to value the care economy to tackle gender equality is acknowledged in the United Nations Sustainable Development Goal 5, Target 5.4: “recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies, and the promotion of shared responsibility within the household and the family as nationally appropriate.” Target 5.4 was inspired by the “Triple R Framework,” which was developed to better value, include, and support the care economy ([Power, 2020](#)).

The Triple R Framework originally promoted policies to “recognize, reduce and redistribute” care work ([Elson 2017](#)) and was adopted by the United Nations Secretary-General’s High-Level Panel on Women’s Economic Empowerment, established in September 2015, as well as other women’s advocacy organizations. Recognition acknowledges that unpaid care work is often taken for granted and ignored both in households and in broader society. Recognition means taking unpaid care work into account in analysis and policymaking, including recognition of social norms, gender stereotypes, and power relations and discourses ([Samman et al., 2016](#)). Reduction implies reducing the amount of care work through public investment in infrastructure, including transport, water, electricity, and cooking stoves in areas where the necessary services and equipment are lacking ([Addati et al., 2018](#)). Redistribution of care work implies sharing the work between households and society as well as between women and men. It includes challenging gender stereotypes and norms, provisioning of public childcare services for working parents, and tackling gender discrimination at work ([Samman et al., 2016](#)). Later, a fourth “R” – represent – was added to the framework to promote the representation of carers in relevant policy-making and developing the capacity of carers so that they can be directly included in decision making ([Action Aid, Institute for Development Studies, and Oxfam 2015](#)). The International Labour Organization added the fifth “R” – reward – as part of their focus on decent work ([Addati et al., 2018](#)). The appropriate reward for care work is now acknowledged as essential to avoid the “care drain,” where women leave their families and possibly also migrate to provide low-paid care work to others, therefore moving their own unpaid care responsibilities onto other family members, such as grandparents or older children ([Folbre 2006](#); [Power, 2020](#)).

The five Rs can be promoted at all levels, from individual to institutional, and already numerous organizations are encouraging action to improve gender equality during the pandemic and beyond. For instance, a wide range of think tanks, researchers, and nongovernmental organizations (NGOs) are calling for bailout and stimulus packages that specifically include social protection measures that reflect an understanding of women's unique circumstances and recognition of the care economy. Specific proposals include paid leave for those unable to come to work because they are taking care of children or elders at home but might well be targeted only at formal sector employees (Power, 2020).

In developing economies, the majority of female workers are in the informal sector, and so special efforts should be made to identify and compensate informal sector workers to ensure more equitable outcomes (Bhatia 2020). Specific policies to support and protect unpaid carers during the COVID-19 pandemic focus on rewarding (paying) and redistributing care work (UN 2020; Alon et al. 2020): Government subsidies to replace pay for workers who are unable to work (or who work reduced hours) while caring for children while school and daycare are closed due to the pandemic. Removing the requirement (for carers) to actively seek work in order to be eligible for unemployment benefits. Extending unemployment benefits or other cash transfer schemes to those resigning from employment to provide child care or other unpaid care work due to the pandemic. Expanding access to paid family leave and paid sick leave. (Power, 2020).

It is unclear whether, when we enter a post-COVID world, the ability of men and women to work from home may generate further change in the division of household labor and caregiver responsibilities. Policymakers should be thinking about implementing policies that encourage the ongoing technological investments made by the private sector that COVID has spurred to support more work flexibility while at the same time fostering a more equal division of childcare responsibilities within the household. Policies that specifically incentivize fathers to work from home may constitute a good starting point for successfully reinforcing the modest shift towards a more egalitarian direction started with COVID documented here (Sevilla & Smith, 2020).

Conclusion

The forces impacting the participation of women during the pandemic are highly complex. While data suggests that the lack of in-person schooling has weighed on women's labor force participation with young children, other factors also seem to be at play. As schools have started up with a universal return to in-person education, there is an opportunity for a rise in the labor force participation rates of women with young children. That said, the outbreaks of COVID-19 may discourage some mothers from returning to work, particularly those with unvaccinated children at home. Moreover, the quarantining that has occurred at some schools has generated considerable uncertainty, which itself may be a drag on women's return to work.

On the other hand, the end of federal Pandemic Unemployment Assistance could encourage some people to enter the labor market. While most of those people should be categorized as unemployed, it is possible some could be entering from out of the labor force, and it could be difficult to differentiate this from the impact of schooling. Recent evidence suggests the effects of remote learning on labor force participation for women is small, and a return to in-person instruction may not significantly shift the current trend in women's labor force participation (Aaronson, 2021).

Disproportionate Impact of COVID on Women in the Workforce: Pennsylvania

Job Change 2019Q4 – 2020Q2	Female # -483,639
Job Change 2019Q4 – 2020Q2	Female % -15.2%
Job Change 2019Q4 – 2020Q2	Male # -449,685
Job Change 2019Q4 – 2020Q2	Male % -14.1%

Gender Difference Recovery Points – Pennsylvania	-17.6%
---	---------------

Data Source: Chmura Economics

While advancements have been made over recent decades regarding women's rights, wage equality, and participation in formal labor markets, this pandemic has made it clear that something has got to give. Moms are trying to juggle multiple responsibilities: the job they get paid to do in the formal labor market alongside the responsibilities of parenting and childcare. It is not enough to strive for gender equality in corporate boards and among workforce management, and it is likely that major domestic issues like disruptions in childcare influence the gender wage gap over time. Parents—especially mothers—remain ever vulnerable to the availability of affordable childcare while they work. Without more formal and intentional systems of care, mothers will forever be vulnerable to career scarring during any major crisis like this pandemic or any other event that triggers an increase in domestic tasks within their household (Heggeness, M., 2020)

It is clear that if we expect a future where mothers reach full employment, public discussions should include detailed plans for affordable and comprehensive quality childcare and robust school infrastructure. The consequences of not creating this environment are immediately relevant for at-risk working mothers. Today, around 70 percent of mothers actually work in the formal labor market, compared with over 90 percent of fathers. Parents, especially mothers, are one of the groups that are most vulnerable to post-pandemic detachment from the labor market. If we do not include their needs in our public policy discussions of post-pandemic full employment, it will be a missed opportunity for the economy and society at large. If we are ever going to even the playing field for women and parents in the workforce, we need to prioritize discussions of childcare. The economy can never fully open if schools and childcare remain closed. A gender-equal labor market will never be fully realized unless we acknowledge the double bind of mothers and the dual responsibilities of household production and formal labor market activities that are disproportionately distributed toward women, particularly mothers (Heggeness, M., 2020).

A question worth raising is if mothers and caregivers will be able to keep their jobs as the pandemic continues and they are continually forced to balance childcare, household production, online schooling, and work? What are the long-term effects as they are forced to disengage from work or multitask work with online schooling oversight for their children? Furthermore, what role do fathers play in the intermediate and long term? More extensive policy discussions should address other factors of well-being, including mental health, stress, and material well-being (Heggeness, M., 2020).

According to Madgavkar et al. (2020), procrastination is a losing game, and the time for action is now. The evidence from the research is clear: what is good for greater gender equality is also good for the economy and society as a whole. The COVID-19 pandemic puts that into stark relief and raises some critically important choices: act now to remove barriers to greater female labor-force participation and a more prominent role in society and reap the economic and social benefits; delay and still benefit, but to a substantially lesser degree; or allow the disappointing status quo to prevail and slide backward, leaving a massive economic opportunity on the table and negatively affecting the lives of millions of women. Parity is powerful. This is the time for policymakers and business leaders to step up and make it a reality (Madgavkar et al., 2020).

At this moment, it is vital to consider what will the care economy look like in the post-COVID-19 economy. It is clear that in order to prevent further deepening of gender inequality, it is necessary and possible to take account of the additional unpaid care burden placed on women and families during the COVID-19 pandemic. Given that a large proportion of people have reservations about going back to their pre-pandemic “normal” life and are interested in making changes in their own lives and in wider society (RSA 2020), this could be an opportunity for systemic changes that enable care work to be valued and accounted for in economic and social policies (Power, 2020).

Appendix

Table 1 - USA Job Change and Recovery by Gender

USA Job Change and Recovery by Gender								
	Job Change 2019Q4 - 2020Q2				Recovered Jobs (2021Q2)			
	Female		Male		Female		Male	
Total - All Industries	-12.7%	-9,900,079	-11.8%	-9,844,718	62%	6,135,408	67%	6,618,883
Agriculture, Forestry, Fishing and Hunting	0.8%	5,757	3.0%	41,166	n/a	n/a	n/a	n/a
Mining, Quarrying, and Oil and Gas Extraction	-15.9%	-16,768	-18.2%	-102,152	0%	50	0%	261
Utilities	-0.5%	-927	-1.0%	-6,032	-68%	-632	-33%	-1,977
Construction	-6.4%	-104,023	-9.0%	-686,702	120%	125,025	84%	575,166
Manufacturing	-10.3%	-397,282	-9.1%	-834,569	50%	199,850	58%	482,371
Wholesale Trade	-8.1%	-151,187	-7.1%	-295,317	39%	59,616	45%	133,884
Retail Trade	-16.4%	-1,378,334	-13.6%	-295,317	59%	806,499	73%	821,308
Transportation and Warehousing	-10.1%	-233,160	-8.8%	-465,528	74%	172,071	86%	399,909
Information	-8.6%	-104,850	-9.3%	-180,049	61%	64,182	57%	101,935
Finance and Insurance	-1.4%	-52,519	-1.4%	-36,856	117%	61,488	117%	43,303
Real Estate and Rental and Leasing	-10.5%	-127,269	-10.7%	-169,988	63%	80,555	62%	106,054
Professional, Scientific, and Technical Services	-4.4%	-221,563	-5.3%	-309,396	143%	316,540	119%	366,766
Management of Companies and Enterprises	-6.4%	-79,428	-5.9%	-69,977	18%	14,673	20%	14,041
Administrative and Support and Waste Management and Remediation Services	-16.2%	-727,063	-15.4%	-905,428	63%	460,494	67%	606,662
Educational Services	-10.2%	-867,083	-9.8%	-499,149	25%	214,834	26%	128,334
Health Care and Social Assistance	-8.2%	-1,493,025	-6.9%	-349,929	68%	1,016,417	83%	290,054
Arts, Entertainment, and Recreation	-37.5%	-566,103	-37.0%	-590,603	62%	349,153	63%	373,174

Accommodation and Food Services	-37.2%	-2,881,722	-35.9%	-2,375,097	61%	1,746,979	64%	1,524,296
Other Services (Except Public Administration)	-20.8%	-780,026	-13.9%	-470,577	58%	456,140	96%	449,737

Note: the public administration and unclassified sectors are excluded from this analysis due to data availability. Recovery data are not shown for the agricultural sector as its employment expanded over this period.
Source: Chmura, JobsEQ®, QWI

Table 2 – Pennsylvania Birth Rate



Table 3 – Percentage households in Pennsylvania with children aged 17 and under (U.S. Census Bureau)

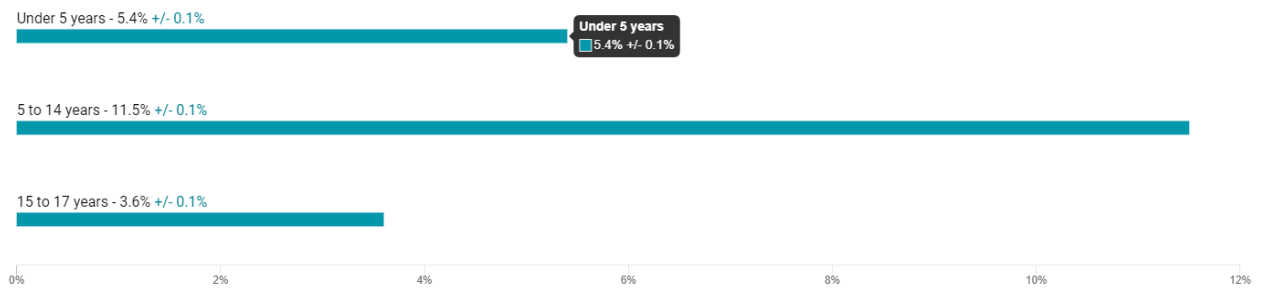
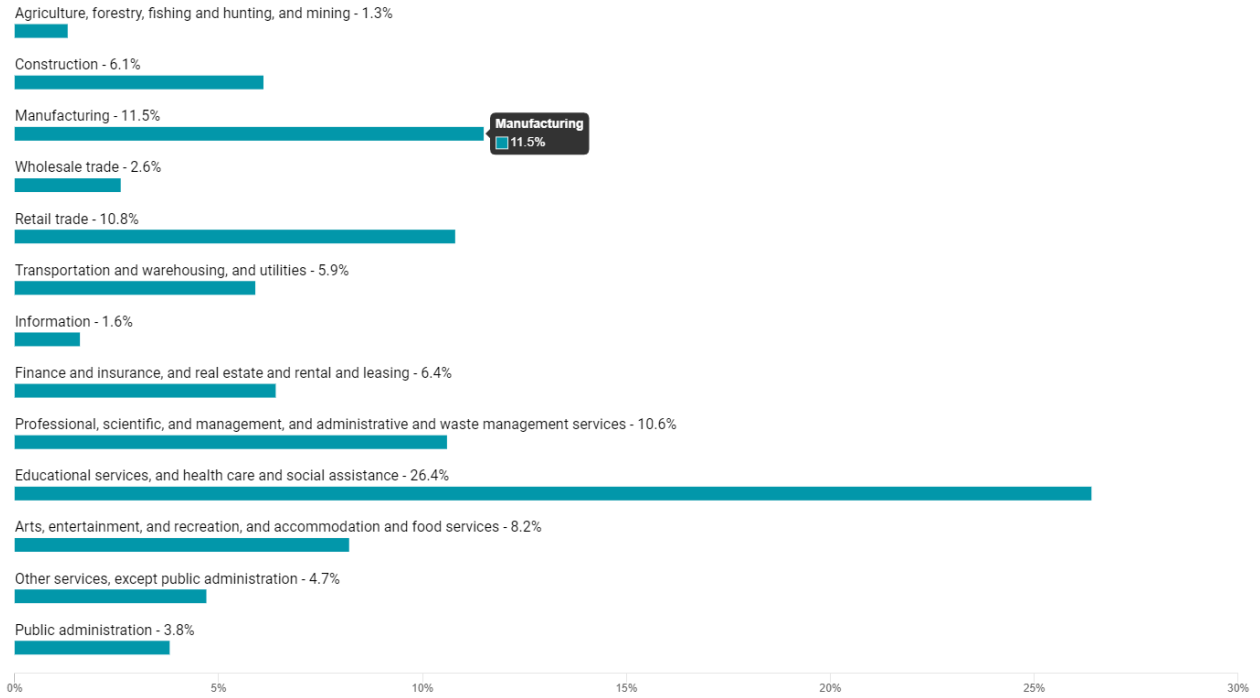


Table 4 - Industry for the Civilian Employed Population in Pennsylvania (U.S. Census Bureau, 2021)

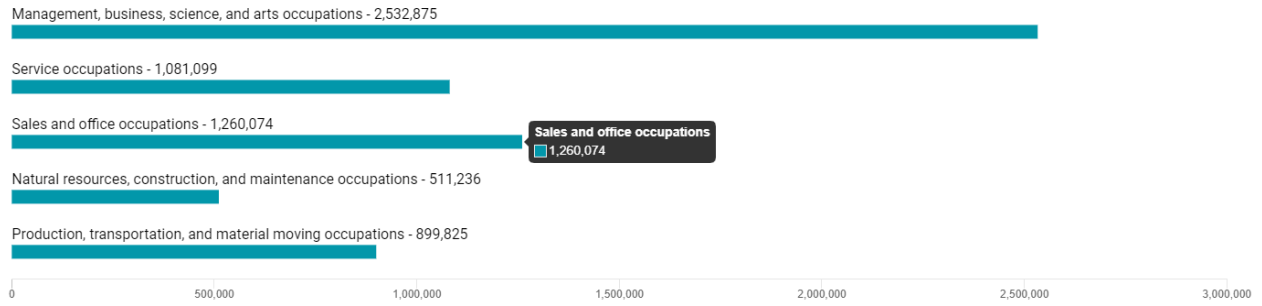


Note:

Females in Agriculture, Forestry, Fishing and Hunting in Pennsylvania 19.7%

Females in Agriculture, Forestry, Fishing, and Hunting in United States 18.7%

Table 5 – Occupation for the Civilian Employed Population in Pennsylvania (U.S. Census Bureau, 2021)



Note:

Females in Computer, Engineering and Science Occupations in Pennsylvania 26.0%

Females in Computer, Engineering and Science Occupations in United States 26.9%

(Dingel et al., 2020)

	Children under 14	All kids 6-14	All kids under 6	Kids in both age ranges
Share of workforce with child in household	0.323	0.155	0.094	0.073
Share of workforce with child and no available caregiver in household	0.214	0.107	0.063	0.045
Share of workforce with household childcare obligations	0.112	0.057	0.032	0.024
Share of under-55 workforce with household childcare obligations	0.136	0.067	0.040	0.029

Notes: The share of the workforce with no available caregiver in household is defined as the share of workers with no non-employed household member. The share of the workforce with

household childcare obligations is defined as the share of workers who would have to remain home so that each household with a child would have at least one adult at home.

Table 6

United States - Workforce Childcare Obligations by Industry (Dingel et al., 2020)

Share of workforce in each industry with:

	Child under 14	Child under 14 and no available caregiver
Total	0.323	0.214
Agriculture	0.361	0.204
Construction	0.371	0.198
Manufacturing	0.324	0.202
Wholesale	0.317	0.203
Retail	0.292	0.183
Transportation	0.317	0.182
Utilities	0.329	0.215
Information	0.295	0.199
Finance	0.320	0.231
Professional	0.319	0.213
Education/Child Care	0.319	0.251
Health Care/Assistance	0.341	0.247
Arts/Recreation	0.310	0.197
Other Services	0.314	0.207
Public Administration	0.329	0.237

This table depicts spatial variation in the share of workers with childcare obligations and no available caregiver in their household. While this figure is as low as 13 percent and as high as 33 percent for some commuting zones, the vast majority of regions are near the national average of 21 percent. Thus, addressing childcare obligations as part of “re-opening” strategies is an important consideration for policymakers across the United States during COVID and in a post-COVID environment.

References

- Albanesi, S. (2021). The impact of the COVID-19 recession on the US labor market: Occupation, family, and gender. SEAN_Albanesi.pdf (nber.org)
- Akkermans, Jos & Richardson, Julia & Kraimer, Maria. (2020). The Covid-19 crisis as a career shock: Implications for careers and vocational behavior. *Journal of Vocational Behavior*, 119. 103434. 10.1016/j.jvb.2020.103434
- Alon et al., (2020). The impact of COVID-19 on gender equality impact of COVID-19 on women in the workforce. Disproportionate Impact of COVID on Women in the Workforce |
- Center for Disease Control (2021). Health Equity- Women, Caregiving, and COVID-19. Women, Caregiving, and COVID-19 | CDC Women's Health
- Chetty, R., Friedman, J., Hendren, N., & Stepner, M. (2020). The economic impacts of COVID-19: Evidence from a new public database built using private sector data. DOI: 10.3386/w27431
- Clapp, P. (2021). The disproportionate impact of COVID-19 on women in the workforce. <https://www.chmura.com/blog/women-in-workforce>
- Collins, C., Landivar, L., Ruppanner, L. & Scarborough, W. (2020). COVID-19 and the gender gap in work hours. *Gender, Work & Organization*, 28(1). <https://doi.org/10.1111/gwao.12506>
- Dingel, J., Patterson, C., & Vavra, J. (2020). Childcare obligations will constrain many workers when reopening the US economy. Becker Friedman Institute. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3579711
- Dore, K. (2021). Some family caregivers may have to pick either jobs or at-home duties. *CNBC*. [Some family caregivers may have to pick either jobs or at-home duties \(cnbc.com\)](#)
- Drange, N. & Rege, M. (2013). Trapped at home: The effect of mother's temporary labor market exits on their subsequent work career. *Elsevier*, 24. <https://ideas.repec.org/a/eee/labeco/v24y2013icp125-136.html>
- Gilligan, M. Sutor, J. & Rurka, M. (2020). Multigenerational social support in the face of the COVID-19 pandemic. *Journal of Family Theory & Review*. DOI:10.1111/jftr.12397
- Goldin, C. (2021). Assessing five statements about the economic impact of COVID-19 on women. Harvard University National Bureau of Economic Research. https://www.nber.org/sites/default/files/2021-06/GOLDIN_SEANWhitePaper.pdf
- Grossbard, S., Childers, C., Wingfield, A., & Allen T. (2021). Short-term strategies for addressing the impacts of the COVID-19 pandemic on women's workforce participation. <https://www.nap.edu/read/26303/chap>
- Heggeness, M. (2020) Estimating the immediate impact of the COVID-19 shock on parental attachment to the labor market and the double bind of mothers
- Irani, E., Niyomyart, A., & Hickman, R. (2021). Family caregivers' experiences and changes in caregiving tasks during the COVID-19 pandemic. *Clinical Nursing Research*, 37. DOI: 10.1177/10547738211014211 journals.sagepub.com/home/cnr
- Jones & Wilcher (2020). Paid family leave increases mothers' labor market attachment. B383 [Paid-Leave-Fact-Sheet.pdf \(iwpr.org\)](#)
- Lena Hipp & Mareike Bünning (2021) Parenthood as a driver of increased gender inequality during COVID-19? Exploratory evidence from Germany, *European Societies*, 23:sup1, S658-S673, DOI: 10.1080/14616696.2020.1833229
- Lightfoot, E. & Moone, R. (2020). Caregiving in times of uncertainty: Helping adult children of aging parents find support during the COVID-19 outbreak. *Journal of Gerontological Social Work*, 63. DOI: 10.1080/01634372.2020.1769793
- Madgavkar et al., (2020). COVID-19 and gender equality: Countering the regressive effects.
- McKinsey Global Institute from COVID-19 impact on women and gender equality [McKinsey](#)
- Miller, E. (2020). Protecting and improving the lives of older adults in the COVID-19 Era. *Journal of Aging & Social Policy*, 32. DOI: 10.1080/08959420.2020.1780104
- Montenovo, L. et al., (2021). Deptrimants of disparities in COVID-19 job losses. DOI:10.3386/w27132

- Morrissey, T. (2017). Child care and parent labor force participation: a review of the research literature. *Review of Economics of the Household*, 15. <https://link.springer.com/article/10.1007/s11150-016-9331-3>
- National Academies of Sciences, Engineering, and Medicine. Short Term Strategies for Addressing the COVID-19 Pandemic on Women's Workforce Participation, 2021. DOI: 10.17226/26303
- Pennsylvania Center for Workforce Information & Analysis. Labor Force Statistics Dashboard. [Labor Stats \(pa.gov\)](#)
- Power, K. (2020). The COVID-19 pandemic has increased the care burden of women and families. *Sustainability: Science, Practice and Policy*, 16. DOI: 10.1080/15487733.2020.1776561
- Reinhard, S. C., Young, H. M., Levine, C., Kelly, K., Choula, R. B., & Accius, J. C. (2019, April). Home alone revisited: Family caregivers providing complex care. AARP Public Policy Institute. <https://doi.org/10.26419/ppi.00086.001>
- Ruesl, B. Hutchinson, M., Park, C., Fendrich, M. & Finkelstein-Fox, L. (2021). Short-term impacts of COVID-19 on family caregivers: Emotion regulation, coping, and mental health. *Journal of Clinical Psychology*. DOI: 10.1002/jclp.23228
- Sevilla & Smith. Baby steps: the gender division of childcare during the COVID-19 pandemic (2020)
- Staglin, G. (2021). *Juggling work and caregiving*. *Forbes*. <https://www.forbes.com/sites/onemind/2021/12/09/juggling-work-and-caregiving/?sh=607c9098114d>
- Stanczyk, A. (2019). Does paid family leave improve household economic security following a birth? Evidence from California. *Social Service Review*, 93. <https://www.journals.uchicago.edu/doi/abs/10.1086/703138?journalCode=ssr>
- Stokes, J. & Patterson, S. (2020). Intergenerational relationships, family caregiving policy, and COVID-19 in the United States. *Journal of Aging & Social Policy*, 32. DOI: 10.1080/08959420.2020.1770031
- U.S. Bureau of Labor Statistics (2021). <https://www.bls.gov/>
- Wilkinson, L. & Kelly, M. (2018). Continuing to build a more diverse workforce in the highway trades. https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1095&context=soc_fac
- Wolfe, J. & Cooper, D. (2018). Fair workweek laws help more than 1.8 million workers: Laws promote flexibility and protect against unfair scheduling practices. *Washington DC: Economic Policy Institute*. <https://www.epi.org/publication/fair-workweek-laws-help-more-than-1.8-million-workers>
- Women's Fund of Greater Birmingham (2019). *Clearing the path: Building a sustainable and inclusive workforce for Alabama*. https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1095&context=soc_fac https://www.womensfundnetwork.org/wp-content/uploads/2021/03/Clearing-the-Path-2019-The-Womens-Fund_Interactive-Web-Share.pdf

The Institute

Turning Information into Insight

THE INSTITUTE FOR PUBLIC POLICY & ECONOMIC DEVELOPMENT



ACADEMIC PARTNERS

Geisinger Commonwealth School of Medicine
Johnson College
Keystone College
King's College
Lackawanna College
Luzerne County Community College
Marywood University
Misericordia University
Penn State Scranton
Penn State Wilkes-Barre
The Wright Center for Graduate Medical Education
University of Scranton
Wilkes University - Managing Partner

OFFICES

85 South Main Street
Wilkes-Barre, PA 18701
570.408.9850

St. Thomas Hall
Suite 107
Scranton, PA 18503
570.408.9850

E-mail: info@institutepa.org
www.institutepa.org