Anneliese Dodds was giving her first <u>interview</u> as shadow chancellor on 6th April and she was gate-crashed by her daughter on the video call, for which the tv presenter resolutely responded "she's welcome any time on this programme". This mimics the widely shared clip of <u>Professor Robert E Kelly</u> who was gate-crashed by his child during a live interview on Korean politics, whereby his wife rapidly ran in to retrieve the child, which was followed by a twitter storm of considerations of gendered and racial domestic care roles. But these are different worlds we live in. Whereas the professor found global notoriety – child sightings are becoming common in the COVID era where a whole world of domestic responsibilities and burdens are obvious through video links into people's homes.

We have <u>written</u> elsewhere about the gendered vulnerabilities and gendered impact of COVID-19, and we ourselves are leading a project to evidence these differential experiences and impacts of the virus. We know that women represent the majority of <u>healthcare workforce</u> globally, and thus if we see increasing rates of infection amongst healthcare workers, then this will undoubtedly affect women disproportionately. We know from <u>Zika and Ebola</u> that outbreaks distort healthcare services where the focus remains on the outbreak, this means that routine services which women access including ante-natal and maternity services, access to sexual and reproductive health and routine childhood vaccination programmes may alter and/or be limited. We have seen already that calls to <u>domestic violence</u> hotlines have seen significant increases in the previous two weeks since much of the world has been on lockdown. We also know that most policies designed to respond to outbreaks are gender-neutral, expecting men and women to be infected and affected equally. This means that sex-disaggregated data isn't always collected, and the burden of care for those infected, or through disruption to routine life (closure of schools, changes to working patterns) is likely to fall disproportionately onto <u>women</u>.

But, despite these likely direct and indirect effects of COVID-19 on women, we identify one area of hope: the recognition by the world, and importantly by employers, of the informal care burden that happens within homes, and which disproportionately, although not exclusively, falls to women. In recent weeks, as the global workforce has moved online, where possible – meetings have been conducted from people's homes, where alongside the meeting individuals have had their routine domestic life visible. Whether this is the unmade bed in the background, the dirty cups on the sideboard, or indeed, a child interrupting the call, this has exposed the reality of people's lives. And while toddlers in the background can lighten an interview or meeting, what they represent is the stress of trying to balance work and family. As physical distancing measures stretch from weeks into months, this impossible balance is going to become even more precarious, with potential negative mental and physical health impacts.

With bosses being able to see into people's dual lives, we hope this raises opportunities for flexible working to increase, for recognition of the balance that many perform between paid and unpaid work and who in the household performs this labour. We also hope for greater recognition of the importance of secure childcare—a sector almost exclusively staffed by women and frequently undervalued—to both our families and our economy. Whilst norms of social reproduction indicate that this is likely to fall to women, this could have two effects: (1) a recognition that women disproportionately take on this burden, and considerations for how to formally recognise this within economies; and (2) the recognition that this is not 1950 and men do not have housewives at home

to perform this load, and a shared parental and domestic responsibility is much more likely, with employers considering more flexible working patterns.

Some <u>employers</u> have paved the way for this; recognising the multiple competing priorities, paid and unpaid that people are currently performing. This has included reduced expectations for work; extensions on contracts; flexible working hours etc. But there is no reason that these need to end when the outbreak does. We hope that this domestic burden might be recognised more comprehensively, and the new world order post-COVID-19 will account for this.

Crisis can be an opportunity for gendered change: WW1 was a watershed moment for women's emancipation with large swathes being added to the workforce, and the creation of women's institutes, which latterly led to women's suffrage. We hope that COVID-19 can be another such movement for greater gender-equality in the workplace. To do so we need to stop apologising for personal lives, and let's see more children on conference calls!