

THE HEALTH CRISIS AND GENDER INEQUALITY

The Covid-19 pandemic has disrupted our daily lives, both at home and at work, in our families and friendships, and in our access to health, culture, goods and services. However, men and women are not affected in the same way, and this crisis tends to exacerbate existing inequalities. The aim of this opinion is to analyse this complex and multi-faceted phenomenon from four angles: health and well-being; work-life balance; the economic and social situation; and governance.

In terms of health and well-being, while women were not more exposed to the coronavirus than men, they were more likely to postpone medical visits during the lockdown period, with negative consequences for their health. They account for the majority of those affected by the 'mental health pandemic' caused by the anxiety-inducing health environment. Access to sexual and reproductive health care, in particular abortion and contraception, has been made more difficult. Finally, the lockdowns have been accompanied by a dramatic increase in domestic violence against women, especially young women, and children.

The lockdowns have exacerbated work-life difficulties. The imbalance in the distribution of domestic and family tasks has increased. Following the closure of schools and childcare facilities, childcare has fallen mainly to women. On the other hand, the responsibilities of caregivers were exacerbated during the lockdowns, leading to situations of domestic and parental burn out. This mental burden on women, which is heightened during periods of confinement, has negative repercussions on equality in the workplace, as it limits their ability to invest in their work, and even encourages them to give up paid work. This is in addition to the fact that teleworking conditions are, on average, worse than they are for men.

Women are particularly affected by the social and economic consequences of the crisis. They make up the bulk of people experiencing poverty, especially single women with children and younger women. They are predominant in the care and support professions, which are in great demand due to the crisis but are not highly valued in symbolic and salary terms. They are highly active in sectors strongly affected by the downturn (retail, tourism, etc.).

Women were a big part of the collective effort to fight the pandemic, but were insufficiently involved in public officials' response to the crisis, even though they are often the first to be affected by decisions. The decision-making bodies, such as the Scientific Advisory Board, are overwhelmingly composed of men. In the media, male figures and experts are over-represented in reporting and debates on the health crisis. Finally, the recovery plan announced by the government in September 2020 does not mention the issue of gender equality.

The health, economic and social crisis have tended to relegate gender equality, the major cause of this government, to the background. Equality is not a luxury in times of crisis, but a requirement for a fairer and more democratic society, which must be built starting now.



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1. PROMOTING WOMEN'S HEALTH AND WELL-BEING

- Implement a national recovery plan for health prevention and the resumption of care, with a particular focus on women, especially those with disabilities, single women with children, migrant women and women living on the streets;
- Extend recognition for the various mental health conditions covered under compulsory health insurance and complementary health insurance, including mutual insurance;
- Ratify and transpose the International Labour Organisation Convention 190 on the Elimination of Violence and Harassment in the World of Work;
- With regard to sexual and reproductive rights: maintain and extend all measures taken during the health state of emergency; improve access to these rights and guarantee the accessibility and availability of support, information and care services;
- Develop listening posts for violence against women in places regularly frequented by the general public;
- Combat violence against young women and LGBTQI+ people by training professionals in the education, justice and youth services systems; supporting the development of appropriate care for the youngest groups; and taking into account the accessibility of information for street people and migrants.

2. IMPROVING WORK-LIFE BALANCE

- Pay particular attention to the impact of telework for women in all workplaces. Any decision on its organisation must be preceded by a gender impact analysis;
- Improve access to and affordability of childcare, particularly for women in face-to-face jobs and single women with children. Extend the childminder allowance to children up to the age of 10.

3. ADDRESSING THE SOCIO-ECONOMIC IMPACT OF THE HEALTH CRISIS ON WOMEN

- Ensure access to basic needs and care for women in difficult circumstances, including access to sanitary facilities and free sanitary pads;
- Facilitate access to housing for women in difficult circumstances by creating a national mutual rental guarantee fund for the most vulnerable, aimed at covering the security deposit and the rental deposit;
- Increase compensation for care professions and work on classifying these jobs based on the principle of "equal pay for work of equal value", by convening a pay conference;
- Make an effort to train and retrain women, in particular for emerging jobs linked to digital technology and the ecological transition;
- Extend access to minimum social benefits for young people under 25, for example by introducing a Guaranteed Social Minimum Income open to those under 25 who are not in employment, education or training, subject to conditions.

4. INCLUDING WOMEN IN THE RESPONSE TO THE CRISIS

- Expand the use of gender data and decision support tools;
- Make parity mandatory in all governance and crisis management bodies and strengthen the CSA's checks on female representation in specific crisis or emergency periods;
- Target part of the recovery plan toward gender equality;
- Strengthen all aspects of gender equality education;
- Conduct a national awareness campaign on gender equality, focusing on violence against young women and LGBTQI+ people and the distribution of domestic and family tasks between partners.