

## Gender and Pandemic: The Feminist Perspective

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*Pearl Ed G. Cuevas<sup>1</sup>*

**Abstract:**

Pandemics are social and political occurrence that are linked to who we are, how we live, and how we deal with our society (Fothergil, 1998). As we received various COVID-19 related information from media, none focuses on the analysis of gender during a pandemic. Gender influences vulnerability and exposure to certain risks. Women have heightened exposure to risks that resulted from their social classes, domestic roles, and lack of power and status. With this, this research will focus on women to gain better understanding of their plight during this COVID-19 pandemic.

*Keywords: Gender, Pandemic, Feminist, Perspective,*

### INTRODUCTION

A pandemic or a disease that is prevalent over the world is considered a man-made disaster. The coronavirus is an ecological health crisis, that became more powerful due to people's inability to take care of the environment (Brown, 2020). Social system and social structure lay the foundation for this socially-constructed phenomenon (Quarantelli, 1994). Pandemics are social and political occurrence that are linked to who we are, how we live, how we structure, maintain our society, and change our eco-system (Fothergil, 1998). Therefore, this new COVID-19 virus affects men and women across all age groups to which no one has an immunity. This means the susceptibility to infection is high, although, some may experience greater sufferings from the burden of this severe disease.

Within the period of community quarantine, massive information related to COVID-19 were reported by media. However, none relates to the analysis of gender in a pandemic. Gender is the central organizing principle in various societies. The reality is the virus transforms our daily routines, environment, and social institutions which affected lesser gender groups (Enarson, 1998). The relationship of gender in a pandemic is examined despite the heightened presence of women health care workers and front liners (WEF, 2020). In this research paper, the focus will be on women's plight during a pandemic.

“Across every sphere, from health to the economy, security to social protection, the impacts of COVID-19 are exacerbated for women and girls simply by virtue of their sex,” (United Nations, 2020). Looking at the

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<sup>1</sup>Centro Escolar University, Manila

intersectional gendered implications of the pandemic, the areas of gender-based violence, economic security, girls' empowerment, and inclusive leadership may be observed. (CWF, 2020)

Women in pandemic situations convey several messages, and, new perspectives on women's needs, interests and experiences during this health disaster. Gender influences vulnerabilities and exposures to certain risks. A woman's heightened exposure may be resulted from their social class, their domestic roles, and lack of power and status. The pandemic poses higher risks to women as it threatens family members which affect women's overall mental health and well-being.

Traditional gender roles are assigned to men which dictate that men must be the primary provider of the family while the women led the domestic sphere which required them to stay home and take care of the children. It reminds us of the old adage "Men must work and women must weep" (Fordham, 1998). This reinforces gender stereotypes during disasters and hazards wherein men must face the storm, and protect women and children. With the new paradigm of gender equality, women are more open to employment opportunities while maintaining the role of family homemaker also called as the "unpaid caring labor" (Lewis, 2020). The pandemic is both a public health and economic crisis. Due to the quarantine, unemployment and retrenchments are inevitable. In some cases, women find ways to help with financial needs of the family. Working during a pandemic, women may also need to sacrifice being away from their families in order to limit virus exposure among family members. This may bring additional stress and depression among women.

Conversely, domestic-violence rates tend to rise during lockdown periods. Stress, alcohol consumption, and financial difficulties are all roots of gender-based violence within homes, Moreover, the community quarantine measures being imposed all over the world increases the mentioned circumstances the primary victims (Lewis 2020).

Bhatt (1995) talked about "gender silence" which at present time relates to the failure to acknowledge explicitly that pandemic is a man-made disaster that occurred on a gendered terrain. Since women's vulnerabilities and capacities were different due to their socio-economic position in the society, the effects of disaster to women may vary (Bari, 1998). This pandemic is deepening prior inequalities, even exposing further the vulnerabilities in social, political and economic systems which are in turn amplifying the impacts of this pandemic. Compounded economic impacts are felt especially by women who are generally earning less, saving less, and holding insecure jobs or living close to poverty (UN, 2020).

OCHA (2020) report showed an overview of the gendered impact of COVID-19 on the livelihoods, income and employment of women and men in different countries. The report explored how men and women are affected differently in their livelihood prospects and coping capacities. According to the report, the risk of rising economic violence is an immediate consequence of deepening gender inequalities during the pandemic (OCHA, 2020).

In the past, the psychosocial effects of disaster on women are measured without examining the larger context of gender relations, and disaster-related interpersonal violence against them (Enarson, 2012). Women are particularly vulnerable economically. Globally, women's personal finances are weaker than men's, and their position in the labor market is less secure. Moreover, single mothers are more likely to be hit harder by the economic downturn that is now in full swing (WEF, 2020). As a pandemic magnifies all existing inequalities, Lewis (2020) believes that the Coronavirus is a disaster for feminism. Regardless of where one looks, it is women who bear the responsibility for holding societies together, be it at home, in health care, at school, or in caring for older persons. The COVID-19 crisis has thrown these gender-based differences into even sharper relief (WEF, 2020).

The high ratio of women who work on the front lines of health services, caregiving, cleaning, and other essential roles, increased their risks of contracting the virus (CWF, 2020). Women working as front liners also reported being stigmatized due to exposure to the illness and they make up 70% of all health and social services staff globally (WEF, 2020).

Thus, the critical resources they need to stay well – reproductive health services, maternal care – may fall by the wayside as the world’s hospitals go into crisis mode. In several countries that experienced the pandemic, the provision of sexual-and reproductive-health services including prenatal and maternal care and access to contraceptives and safe motherhood- is reduced since the resources are re-allocated for the crisis (WEF, 2020). According to UN policy brief, this could lead to more maternal mortalities, young pregnancies and sexually transmitted diseases (Villarreal, 2020).

The COVID-19 pandemic has also disrupted family planning and maternal and newborn health services globally. In the Philippines, studies reveal the indirect effect of this pandemic may significantly increase the annual maternal deaths and unintended pregnancies for 2020 compared with pre-COVID- 19 years (UNFPA, 2020). But these possible deaths, like the unnoticed caring labor on which the modern economy runs, attract less attention than the immediate problems generated by a pandemic (Lewis, 2020).

As the global COVID-19 pandemic continues to spread, more women are at risk. Although the Center for Disease Control (CDC) recommends only discretionary testing of asymptomatic pregnant persons, in areas where infection in the community is widespread, mandatory testing upon presentation to any labor and delivery unit is reasonable. This may be costly and uncomfortable on the part of a mother with birthing pains. However, this is a necessary step because during active labor, there are concerns of viral dissemination when an asymptomatic or pre-symptomatic infected patient is repeatedly or forcefully exhaling (Berghella, 2020). After giving birth, research also suggests that there may be a COVID-19 induced placental infection in certain cases (Kim, 2020). Women who intend to bear a child may need to endure all these concerns at present.

In summary, the society must recognize that women play a crucial role in resolving the crisis associated with the COVID-19. Therefore, including women in the decision making processes is essential when crafting measures to address the issues associated with this pandemic. Given that we all share the same future, policymakers need to listen and engage with women’s rights organizations to ensure a more gender-equal society hereafter.

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