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Excerpted from abstract and introduction

The COVID-19 pandemic has highlighted the importance of childcare to national economies in general and women's economic participation in particular, spurring renewed interest in childcare policy in many countries that have implemented lockdowns. This paper adopts a circle of care framework to analyzes how COVID-19 has affected paid childcare, unpaid childcare and other paid work, and the relationship between these sectors. Analysis is grounded in the lived experiences of parents and childcare educators, documented through 16 semi-structured interviews during the initial lockdown (March–June 2020) in British Columbia, Canada. Experiences from educators suggest their safety was not prioritized, and that their contributions were undervalued and went unrecognized. Mothers, who provided the majority of unpaid care, not only lost income due to care demands, but struggled to access necessities, with some reporting increased personal insecurity. Those attempting to work from home also experienced feelings of guilt and distress as they tried to manage the triple burden. Similarities of experiences across the circle of care suggest the COVID-19 childcare policy response in BC Canada downloaded care responsibilities on to women without corresponding recognition or support, causing women to absorb the costs of care work, with potential long-term negative effects on women's careers and well-being, as well as on the resilience of the circle of care. Pandemic recovery and preparedness policies that aim to promote gender equality must consider all sectors of the circle of care and the relationships between them.

The COVID-19 pandemic has highlighted the importance of childcare to national economies in general and women's economic participation in particular, spurring renewed interest in childcare policy in many countries that have implemented lockdowns. Both UNICEF and the OECD has called on governments to invest in early childhood education to protect child well-being, advance gender equality and support parental employment during and following the pandemic (Gromada et al., 2020; OECD, 2020). The Canadian federal government has particularly taken up this call, prioritizing childcare policy within COVID-19 recovery plans, which it describes as "feminist," and framing childcare within arguments for women's economic participation (Gerster, 2020). In announcing the Canada-Wide Early Learning and Childcare System, in March 2021, including an investment of 30 billion CND over 5 years, the Finance Minister said, "COVID has brutally exposed something women have long known: Without childcare, parents—usually mothers—can't work" (quoted in Department of Finance, 2021).

Indeed, the economic and social importance of childcare is not a new insight for feminist economists or women with dependents—who continue to shoulder the global burden of unpaid care work (Power, 2020). As has been well documented, unpaid care work, performed primarily by women, sustains the economy by enabling household members to generate income and access education (Rai & Waylen, 2013). While all economic activity is dependent on care work, gender norms that place responsibility for care work on women mean that women's economic participation in particular is strongly associated with care responsibilities. Research has documented how the amount of unpaid care work women undertake directly impacts the numbers of hours spent in paid work (Antonopoulos, 2008). COVID-19 school and childcare closures have exacerbated these dynamics, creating a global crisis in childcare that has inhibited progress toward women's economic empowerment and political participation (Gromada et al., 2020). As most gender analysis of the COVID-19 pandemic have noted, there are clear relationships between women's increased unpaid care work and falling employment, as well as how the absorption of childcare duties has cost women not only their income and jobs, but also their health, well-being and social networks (Azcona et al., 2020).

Within this renewed attention to relationships between childcare, economic participation and gender inequality, there is little consideration of the experiences of paid childcare providers during COVID-19. For example, Wallace and Goodyear-Grant (2020) note that media coverage of the COVID-19 related childcare crises in Canada rarely mentions the roles of educators, focusing instead on impacts on working parents. Yet paid care work is also distinctly gendered, with over 90% of childcare educators identifying as women (Statistics Canada, 2020). The sector as a whole is "feminised" in that it is characterized by low pay, lack of benefits and little recognition of its contributions to society (Halfon & Langford, 2015). Lack of consideration of childcare educators' experiences during COVID-19 reflects a continued practice of devaluing paid care work. Seemingly progressive discussions on the impact of care work on mothers' careers can reinforce notions of care work as mothers' work while rendering the work of paid care providers invisible (Powell et al., 2020). This is

despite the fact that the majority of children in Canada receive a combination of paid and unpaid care. There is a need for a more complete picture of the effects of COVID-19 on the childcare sector as a whole, and on all women who provide childcare, whether paid or unpaid.

Antonopoulos (2008) suggest that care be conceptualized as circle, with three interrelated sectors: paid care, unpaid care, other paid work (Figure 1). The circle of care demonstrates how the conditions, provisions and accessibility of paid care work directly impact the level, distribution and conditions of unpaid care; which, in turn effects opportunities to enter and remain in paid work; all of which influence outcomes for care recipients (ILO, 2018). This paper adopts this framework to analyze how COVID-19 has affected each sector, and the relationships between them. In doing so it includes the under researched sector of paid care in analysis of COVID-19 childcare responses and advances research on the relationships between sectors. Analysis is grounded in the lived experiences of those providing care, which illuminate striking similarities and overarching structures of gender inequities that download care responsibility on to women during crises without providing adequate compensation or support.

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