“Who do the lives of domestic workers matter to, apart from themselves and their families? They want our labour at any cost but they have no empathy with our lives.”
— Preta Rafa, Brazil

Cleonice Gonçalves, the first person to die of COVID-19 in Rio de Janeiro, was a 63 year old domestic worker who contracted the virus from her employer who had returned from a vacation abroad. After becoming ill at work, she took a two-hour taxi ride home before checking into the local hospital – which does not have an intensive care unit – before passing away soon after. In the wake of the crisis, activists have organized for rights for the nearly 7 million Brazilian domestic workers, who are disproportionally Afro-Brazilians, within, what one campaigner called, a "structurally racist" society.

“Everyone has a public health obligation to stay home, but only women have a socially enforced responsibility to take on disproportionate domestic work while they are there.”
— Moira Donegan

How did we get here?

In 2015, the world agreed to a roadmap to sustainable development made up of 17 goals: the 2030 Agenda for Sustainable Development. If achieved, we would live in a more just, equitable, and sustainable world with decent work for all, sustainable economic growth, and a significant reduction in inequalities between and within countries. With this roadmap, achieving gender equality would be a goal in and of itself and a cross-cutting aim necessary to achieving the whole Agenda.

Even before the COVID-19 crisis, countries were not on track to achieve the Agenda because of systems, such as patriarchy and neoliberal capitalism, that create and maintain the very inequalities now exacerbated by the crisis.

Neoliberal capitalist economic systems exploit and devalue women’s work as a source of competitive advantage, including lower pay, casualization and informalization of women workers. Trade policies, such as investor-state dispute settlement provisions, inhibit governments from creating pro-poor policies that could benefit women and girls in all their diversity.

Debt repayment strategies and conditionalities, in line with the neoliberal economic model, include practices that exacerbate inequalities. In the context of the COVID-19 pandemic these strategies, including reduction in social protection coverage, privatization of public services, and labor flexibilization reforms, force women and girls to fill in the gaps in services and decrease their access to decent work.

As a result of these systems, prior to the pandemic, globally, 61% of people working were doing so informally, while in low-income countries, 92% of women workers were employed in the informal sector. Public health containment measures force informal workers to stop working or adapt their working methods in ways that lower their incomes or put them at risk of COVID-19 transmission or violence, harassment, or arrest by state authorities. Domestic workers – many of whom are also migrants – are often unprotected by basic labor rights, such as paid sick leave. Some have been required to work more and without proper protection, while others have been told not to work and have not received compensation.

For other themes, please see the full series. WMG also has a set of cross cutting recommendations that can be found separately, within the series.
Women’s Major Group Recommendations

The recommendations below, along with the other recommendations in this series, offer the type of holistic solutions needed to emerge from the COVID-19 crisis ready to build a just and equitable future and achieve the 2030 Agenda.

- Refrain from implementing austerity measures, especially those related to social programs and public services. End privatization of public services.
- Ensure decent work, living wages, and safe physical work environments for all workers, including domestic and care workers, informal sector workers, migrant workers, and sex workers who are inadequately included in current systems.
- Create and resource action plans to respond to the increases in GBV guided by the UN and its expert agencies (WHO, UN Women, and UNFPA). Designate all GBV services as essential and expand and adapt the services to the COVID-19 crisis.
- Support, including financially, and work in partnership with feminist organizations to change permanently patriarchal gender norms in order to:
  - Eliminate all forms of gender-based violence and end all harmful practices;
  - Recognize, make visible, and democratize domestic and care work; and
  - Institutionalize human rights-based gender-responsive policymaking that engages affected communities at all stages of the policymaking process.

Patriarchy shapes societies in ways that put less value on the lives of women and girls, place the burden of paid and unpaid care and domestic work on women and girls, and condone violence and other forms of control to maintain their subservient position. Prior to the COVID-19 crisis, women and girls completed between 2 and 14 times as much care work as men and boys - the wide range a reflection of inequalities within and between countries. Closures of childcare and schools, increased care needs of older and ill people, and overwhelmed health systems, have increased the burden even further during the pandemic. Women are also overrepresented among paid care workers, including and especially within health systems. These frontline workers must be recognized as essential after the crisis ends.

Gender-based violence (GBV) has become a “shadow pandemic” alongside COVID-19. Women, girls, and gender non-conforming people are forced to “shelter in place” with abusive partners, parents, or other family members. Prior to the crisis, 1 in 5 women (15–49 years old) reported experiencing intimate partner violence in the previous 12 months. Now rates of GBV, including femicide, have only increased with social isolation measures, the stress of the pandemic, and inadequate access to justice. Not all governments have prioritized, resourced, or adapted GBV services to respond to the increase in violence compounding the risk to women, girls, and gender non-conforming people.