

PATHWAYS IN THE PANDEMIC

Shifts in Paid, Unpaid, and Caring Work During the COVID-19 Pandemic



The COVID-19 pandemic shifted the lives of Hawai'i's women at work, at home, and in its communities. In a new Women's Fund of Hawai'i report—*Pathways in the Pandemic: Intersectional Impacts of COVID-19 in Hawai'i*—authors found that while women play vital roles in the local economy, the pandemic demonstrated insecurity for women at work and an ongoing de-valuing of “essential” services provided overwhelmingly by women of color. Given that women comprise nearly two thirds of Hawai'i's frontline workers, with three quarters of the healthcare, child care, and social service sector workers being women, their un- or underemployment during the pandemic created large shifts in the labor force:

- Women in Hawai'i experienced the highest rate of unemployment in the U.S. from August 2020 until March 2021, particularly in the health and social assistance sectors.
- Workers in the feminized health and social assistance sectors experienced the largest shift in employment of the most gender divided sectors.
- During the highest phase of unemployment, April-October 2020, the number of women claiming unemployment outnumbered men by 20%.
- No unemployment data is collected for trans* and nonbinary people, leaving questions about experiences claiming or accessing unemployment benefits.
- Filipinx, largely represented in both healthcare and hospitality sectors, were the largest group of unemployed insurance claimants.

The tourism-led recovery created labor market shifts with uneven impacts along gendered, racialized, and classed lines. While middle class workers were more able to negotiate tele-working as part of their terms and conditions of work, predominantly feminized frontline workers were not able to do so. The tourism-led “recovery” also meant that hotel workers are facing increasing demands for flexibility in scheduling, terms and conditions of work, and duties on the job, in addition to increased levels of workplace violence and aggression. Despite the hundreds of millions of CARES Act money pumped into the travel and hospitality industry many housekeepers—largely Filipinx and immigrant women—and other hotel workers found themselves underemployed/unemployed as hotels cut services. Hotels “health-washed” their amenities by using the pandemic as a catch-all reason for cutting key services and pursuing cost-savings measures. The hotel workers union re-

ported that only 52% of their laid off members are back at work, despite hotel occupancy rates at or near pre-pandemic levels, with most of those under or unemployed from the housekeeping departments, which are overwhelmingly Filipinx and immigrant women.

As elsewhere the pandemic also shifted Hawai'i's gendered systems of care. A lack of investment in care infrastructure meant Hawai'i was ill-prepared for a public health crisis which required large scale systems of care for people of all ages. Frontline workers expressed feeling pressure to deliver vital health services like birthing and reproductive healthcare and substance use services. Unpaid caregiving prior to the pandemic was estimated to have created \$2.1b in economic value, which is as a result of women's unpaid labor as primary caregivers. Without affordable and accessible support, systems of care were doubly privatized—relegated to the “private” realm of the family and paid for in the private sector—contributing to the economic and health-related stresses many families faced.

- \$11.9m in CARES Act money went to private child care providers to address the crisis in child care.
- By March 2021, 4,800 childcare placements were lost despite a government mandate taking away means testing for placements.
- Child care worker's wages are some of the lowest in the economy at \$12.43/hour, demonstrating a devaluing of women's labor in a feminized sector.
- Public sector agencies held widely varying policies about whether people are able to undertake caregiving while remote working.

In the face of multiple crises, personal relationships and experiences of past natural disasters allowed for the development and/or redeployment of systems of community care and mutual aid. Communities got together and shared caregiving, food, and other resources to ensure that families could get what they needed.

Given women's important roles in the local economy as workers, caregivers, and community builders, authors argue for re-imagining a “care-led recovery” for Hawai'i which addresses how intersections of identities create uneven material outcomes. Central to this would include building paid caregiving systems as a basic infrastructure need for a functional society; ensuring social safety nets adequately provide for communities; centering gender-based violence and disability in public health and workplace considerations; and ensuring governments engage meaningfully with marginalized communities as a part of the Hawai'i “Economic Resiliency Strategy.” As Haunani Kay Trask reminds in “the Color of Violence,” there are many paths to sovereignty and transformation. “Pathways” suggest histories as well as opportunities: There are well-worn paths and forgotten passages as well as opportunities to pathbreak and chart unique directions.

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