



IMPACT OF COVID-19 PANDEMIC ON WOMEN EMPLOYEES IN ORGANISATIONS

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ABSTRACT

Covid-19 Pandemic continues to spread rapidly. It has affected our day to day life as well as mental health. We may experience stress, anxiety, fear, loneliness and other mental health disorders. The lockdown had a distorting effect on the weakening economy because stores, restaurants, manufacturing, transporting services, and business were all locked down. The COVID has sparked a public health and economic disaster on a never- before seen magnitude, exacerbating systemic issues like inequality. Women are affected more than man. They involve in care responsibilities because school close and members of their family fall ill. They are at higher risk of domestic violence and are unequal disadvantaged by reduced access to reproductive and sexual health services. Globally during 2019-20 female's employment turn down by 4.2 percent while male's employment turn down by 3 per-cent. Those data tell us that female face an even greater risk of covid-19 transmission. Loss of jobs and increased domestic violence. We don't have perfect data only a few organisation collect and share disaggregated sex and gender based data. And how it is affecting women and men differently is not just in the way that the virus is making us sick it is also in our long-term health and economic prospectus.

KEYWORDS : Economy, lockdown, gender equality, women workers, domestic violence, sexual exploitation, low income, employment, discrimination, Mental health, depression, equal pay, women's participation, Dark skin Female.

INTRODUCTION

The disease has since spread throughout the world leading to an ongoing pandemic. Countries that deal with COVID- 19 has the potential to exacerbate existing humanitarian issues. A large portion of the population is forced to choose between social isolation and hunger because they live on what they earn on a daily basis.

Dual Burden on Working Women

During the COVID-19 epidemic, disparities between men and women in the workplace were accentuated. It has affected women self-help group members, women entrepreneurs and home-based works which include almost 50% of all working women. Highly impacted sectors such as trading and services are run by women, comprising operators of small-scale enterprises, petty shopkeepers, beauty parlour, part time workers, personal and non-professional services witnessed relatively high volatility compared to other sectors. Thus COVID-19 posed severe challenges to women-led businesses and exposed pre-existing gender gaps.

Corona Virus (COVID-19) Pregnancy and Breastfeeding

Scientists used to think that women's immune systems became weaker as pregnancy progressed. Pregnancy-related conditions such as diabetes, heart failure, and hypertension pose an additional risk factor for pregnant women, just as they do for non-pregnant women. According to WHO (world health organisation) recommendations, caesarean sections should only be conducted when a pregnant woman has a suspected or confirmed section, should be customised and based on a woman's preference as well as obstetric indications.

New born can also get COVID-19 during child birth or by exposure to sick caregivers after delivery. During this time, women face extreme mood fluctuations, loss of appetite exhaustion, lack of joy in life. According to research, the COVID-19 virus is unlikely to transfer to babies through breast milk. But an infected mother can pass the virus to her infant via respiratory droplets during breastfeeding. There are also a misconception that vaccine affect women's fertility. Women who have not been vaccinated are at a greater risk of developing the disease, especially in light of the new variants.

Girls face increased Risk of Gender-Based Violence

Due to the consequences of COVID-19 Pandemic, girls are being

exposed to new risk including sexual exploitation, violence, marriages, pre-term birth, suicide, gynaecological problem, abortions and sexually transmitted infection such as HIV.

According to WHO, around 30% of women have experienced physical and/or sexual intimate relationship violence as well as no-partner sexual violence throughout their lifetime. Lockdown during the COVID-19 has increased the known risk factors.

The Lack of Good data is Living Many Questions

On COVID-19, we do not have flawless data, thus ideas of data quality and data openness are becoming more importance. The data that our leaders relying upon is not in great shape. The little data on cases hospitalisation, mortality is available. The monthly poll is not designed to track individual's work experience over time. It is only a snapshot of the labour market. It does not include any information on whether persons on temporary layoffs return to their jobs. Work from home is not consistently measured in the survey. Persons fall into one of two categories: employed or unemployed. Persons who have a job, including those who may be temporarily absent, are employed. Persons who unemployed and on layoff but anticipate to be called back to work do not need to look work in order to be classes as unemployed.

Gender Based Violence

- Unintended Pregnancies
- Sexually Transmitted disease
- Gynaecological Problems
- Miscarriages/Pre-term birth
- Induced abortions
- Early Marriages
- Mental Health disorders
- Depression
- Post-Traumatic Stress
- Child Mortality

The Need for a Complete Reset

The COVID-19 has delivered a public health and economic crises on a large scale and heighten systemic problems such as inequality. In some countries, women are not allowed to drive, let alone vote. The without a doubt tremendous response to such a problem is to pursue a "Great Reset" of our economic, Political and social system. The reset that we

want is not a revolution or a shift to some ideology. Rather, it ought to be regarded as a pragmatic step toward equality. Equitable distribution is a pre-requisite to fair comparisons of effort and ability. These are needs in order to allow people to take responsibility for their life. Promoting girl's participation in decision making bodies and social partner institutions.

Girls and women have diverse and specific health needs which must be met now. They have equal rights to participate in, and benefit from, global recovery efforts in a post-pandemic world.

- Move violence against women from a "private matter" to a global public health and human rights priority
- All women have the right to a safe and positive pregnancy and child birth experience, whatever the circumstances these occur in, and need high quality maternity care
- Data must be collected and published separately for men and women. Gender differentiated data must be available for policy maker to be able to assess the situation. Women's group and NGO can be precious allies in collecting information about the real impact of government policies.

Present Situation

- Insufficient resources
- Gender sensitive data are obtained without any
- Consolation with civil society organisations
- Limited data
- Child marriage
- Lack of representation for women and girls at policy level

Action To Consider

- Gender- Sensitive data must be collected
- Build the awareness of gender issues
- Investing in the care economy
- Reduce the current gender gap
- Eliminating violence
- Promoting equal pay for equal work
- Flexible working arrangements
- Share childcare and household Chores equally
- Ensure quality reproductive and sexual health for all
- Increase women's leadership in public health and science

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1. Weekly epidemiological update on COVID-19 - 15 February 2022. February 15, 2022. <https://www.who.int/publications/m/item/weekly-epidemiological-update-on-covid-19--15-february-2022>.