

UK Women's Budget Group, April 2020

Written evidence submission to the Women and Equalities Select Committee:

The Impact of Covid-19 on those with Protected Characteristics

Key facts:

1. Covid-19 presents not only a global health crisis, but a social and economic crisis too. Men make up 73% of Covid-19 critical care cases in England, Wales and Northern Ireland¹ but women are more vulnerable to the social and economic crisis, because of the work they do, paid and unpaid and because of the widespread problem of violence against women. This is in large part because of pre-existing inequalities in the labour market and economy:

Pre-existing inequalities

2. **Women are the majority of health and care workers.** 77% of healthcare workers are women,² as are 83% of the social care workforce.³
3. **Women are the majority of workers with highest exposure to Covid-19.** Of the 3,200,000 workers in 'high risk' roles, 77% are women.⁴ Over a million of these workers are paid below 60% median wages. 98% are women.⁵
4. **Young women are disproportionately likely to work in the sectors that have been hit hardest by the lock-down.** 36% of young women and 25% of young men worked in sectors that have been closed down including restaurants, shops, leisure facilities and travel and tourism.⁶
5. **Women are more likely to be low paid and in insecure employment.** Women are the majority of low paid earners (69%⁷) the majority of those in part-time employment (74%), involuntary part-time employment (57%), temporary employment (54%), zero-hours contracts (54%) and part-time self-employment (59%).⁸
6. **Women are the majority of people living in poverty and female-headed households are more likely to be poor.**⁹ For example, 45% of lone parents (90% of whom are women) are living in poverty.¹⁰

¹ ICNARC, (4 April 2020), Report on 2249 patients critically ill with COVID-19, (<https://bit.ly/2JMQCx1>) Note: does not include cases from Scotland

² WBG, (2020), Health and Gender, (<https://bit.ly/2JMJBw2>)

³ Skills for Care (2019) The State of the Adult Social Care Sector and Workforce in England (<http://bit.ly/31UezsV>) p. 9

⁴ Autonomy (24 March 2020) The Jobs at Risk Index (JARI) (<https://bit.ly/2wVsCVH>)

⁵ *Ibid.*

⁶ IFS (6 April 2020) Sector shutdowns during the coronavirus crisis: which workers are most exposed? (<https://bit.ly/2XgDc4w>)

⁷ WBG (2020) Women, employment and earnings (<https://bit.ly/2R4d4pj>)

⁸ WBG (2020) Women, employment and earnings (<https://bit.ly/2R4d4pj>) based on ONS (Oct 2019) EMP01 SA: Full-time, part-time and temporary workers (seasonally adjusted) (<http://bit.ly/2pZwHnW>)

⁹ WBG (2018), The female face of poverty, (<https://bit.ly/34jMVZa>)

¹⁰ WBG (29 March 2019) DWP data reveals: women and children continue to be worst affected by poverty (<https://bit.ly/2xHdxHi>)

7. **Pre Covid-19, women were more likely to struggle with debt and bills.** 39% of women and 34% of men reported it was a struggle to keep up with bills, some or most of the time, 26% of women and 23% of men said they ran out of money by the end of the month and 29% of women and 23% of men said they would not be able to make ends meet for a month or less if they lost their main source of income.¹¹
8. **On average, women carry out 60% more unpaid work than men.**¹² This means they earn less, own less and are more likely to be living in poverty.
9. **Women are more likely to experience domestic and sexual violence and abuse.** 20% of women and 4% of men have suffered sexual assault, including attempts, since age 16, equivalent to an estimated 3.4 million women and 631,000 men.¹³ More than 1 in 4 women will experience domestic abuse during her lifetime¹⁴: that is 1.3 million women under 60 in the last year alone.¹⁵
10. **Women are the majority (67%) of people living in homelessness,** with single parents making up two-thirds of homeless families with children.¹⁶

Key issues for women:

**Protected characteristics intersect. The different challenges facing different groups of women are outlined in Annex 1: points 104-111.*

11. These inequalities are now becoming pronounced and exacerbated, manifesting in serious problems for many women and girls across the country, especially those who are multiply marginalised by race, ethnicity, income or disability:
12. Women are the majority of healthcare workers struggling with adequate personal protective equipment (PPE) and testing. There are knock-on effects for other areas of health particularly affecting women.
13. Women are the majority of care workers trying to deal with this crisis in an already severely overstretched sector, without adequate PPE. The Government's relaxation of social care standards is cause for concern for many elderly and disabled women.
14. There are gaps in the Government's salary retention schemes for employees and self-employed, which particularly affect women. Pregnant women are at risk of discrimination and workers on zero hours or casual contracts may be made redundant rather than furloughed.
15. Gaps in the social security system disproportionately affect women including amount and eligibility for Statutory Sick Pay (SSP), weaknesses in Universal Credit (UC), arbitrary limits and caps and inadequate provisions for renters.
16. With schools and nurseries closed, the huge increase in responsibility for unpaid care work is falling to women, often without the resources or equipment to cope.
17. Violence Against Women and Girls (VAWG) is already increasing in 'lockdown,' while support organisations remain underfunded.
18. Migrant women still have no recourse to public funds, leaving them exceptionally vulnerable to poverty and destitution.
19. Undocumented migrants may fear using the health service due to links with immigration enforcement. Maintaining social distancing in detention centres – as in prisons - is near impossible, putting both staff and detainees at high risk.

¹¹ ONS (2 April 2020) Early indicator estimates from the Wealth and Assets Survey: April 2018 to September 2019 (<https://bit.ly/34fc1bk>)

¹² ONS (10 November 2016) 'Women shoulder the responsibility of 'unpaid work' (<https://bit.ly/2KBdnG9>)

¹³ Sexual offences in England and Wales: year ending March 2017, ONS, 2018 <https://bit.ly/2C0Y83y>

¹⁴ ONS, 2018, Domestic abuse: findings from the Crime Survey for England and Wales: year ending March 2018 <https://bit.ly/34cTZp8>

¹⁵ ONS, 2018, Domestic abuse: findings from the Crime Survey for England and Wales: year ending March 2018 <https://bit.ly/34cTZp8>

of the 2 million adults who suffered domestic abuse in the last year, 695,000 of these were men. Figures for year ending March 2018.

¹⁶ WBG (2019) A Home of Her Own: Housing and Women (<http://bit.ly/2L9c9Ts>)

Introduction

- 20.** The UK Women’s Budget Group is a network of academics, women’s organisations and social policy experts which analyses the impact of economic policy on women and men and promote alternatives for a more gender equal future. We very much welcome this inquiry. and focus the majority of our response on the impact on women as those with protected characteristics as well as focusing on how other characteristics including ethnicity, race and disability intersect.
- 21.** This submission focusses on the impact of the Covid-19 crisis on women, including women who experience intersecting inequalities as a result of ethnicity, race, disability and income. Our submission is informed by our latest report: [Crises Collide: Women and Covid-19](#). The bulk of evidence below answers these three questions from the Committee and how they relate to women’s experiences: *How have people have been affected by the illness or the response to it? Have there been specific impacts on people due to them having a protected characteristic? Are there any unforeseen consequences to measures brought in to ease the burden on frontline staff?*
- 22.** However, we begin by outlining recommendations for urgent action to mitigate the worst effects of this crisis in response to the latter questions:

Theme	<i>What needs to change or improve, which could be acted on in three weeks’ time;</i>	<i>What needs to change or improve, which could be acted on in 6 months’ time.</i>
Healthcare	<ul style="list-style-type: none"> • Collect and publish sex-disaggregated data and data disaggregated by other relevant characteristics so that response is targeted, and we can learn the different health impact of this pandemic. • Healthcare staff, including those in invisible but highly exposed roles such as cleaning, should be provided with the appropriate PPE, testing and guidance to ensure they are as safe as possible. • Testing for all working in the NHS should be rolled out as quickly as possible • Refugees should be allowed to work, especially if they have medical qualifications in their countries • Decisions about treatment for Covid-19 should respect the human rights of disabled people, people with serious health conditions and older people. It should not be denied to people who would benefit based on assumptions about their quality of life. • Conversations about end of life care, including Do Not Resuscitate forms should be approached with sensitivity. No one should be pressured to refuse treatment. • Relaxing of social care, mental health and child protection regulations must be vigilantly reviewed for its impact on disabled, elderly and vulnerable and standards restored as soon as possible. 	<ul style="list-style-type: none"> • Review and increase funding of all NHS services so that they are better equipped for crises. • Prepare for increase in demand for other health services once the number of Covid-19 related cases has eased. • Review staff pay and training in line with their value

	<ul style="list-style-type: none"> Healthcare charging should be suspended for all pregnant women and new mothers and the NHS reverted to its original universal and collective responsibility principles. Women across the UK should be able to take abortion pills at home. 	
Social care	<ul style="list-style-type: none"> Give local authorities the power to take over care providers and expand local provision, provided they employ workers directly on contracts similar to those used in the NHS. Amend the Immigration Bill so that it does not disqualify and discriminate against care workers whose starting salaries are below the minimum salary threshold, the majority of whom are women. Currently, 1 in 5 care workers are foreign nationals, 1 in 7 are from outside the EU. Co-ordinated strategy for care homes: a clear Government strategy is needed to support residents of care homes and all those receiving care in their own homes or other locations, <i>whether their carers are paid or unpaid</i>. Clear strategy to support all care workers: Similarly, a clear and specific strategy is needed to support care workers, in both residential and home care, and unpaid carers. This also needs to include sufficient funding to support those whose income falls as a result of this crisis. It is particularly important that paid care workers do not feel that they cannot afford to take time off work when not to do so would put their own, the clients' or their families' health at risk; Wage levels of all care workers should be immediately raised to at least the Real Living Wage level (as has already been done in Scotland¹⁷) Appropriate PPE equipment must be readily available to all caring for others outside their immediate household. This is necessary to protect them, those they care for and those that they live with. Testing of care workers in all settings, including residential and domiciliary care, hospices and psychiatric units should be of as high priority as testing of NHS staff. Additionally, so that infection is not unnecessarily taken into care homes, people being discharged into them from hospital should be given priority testing for the virus, alongside critical NHS staff. Technical solutions to stop visits: working with technology companies, the Government should support care homes and providers to put in place 	<ul style="list-style-type: none"> Reinstate, and support with central Government funding, the legal duty on councils to provide social care to all who are eligible as soon as possible. Require care providers to offer all care workers contracts that: guarantee them employment for the hours they are willing to work at wages comparable with those working in similar jobs for the NHS, while urgently developing their training on a par with public health care workers. Establish a national body in England in line with the other countries in the UK, to develop and oversee this. Recognise and accredit the skills of experienced care workers and involve them in training and mentoring new recruits Push ahead with a white paper for the social care sector reform so desperately needed to design a more crisis-resilient and compassionate system which is well integrated with health services at every level, and treats workers and carers with respect and dignity, through high quality training, job security and much improved pay. There will also need to be considerate investment and thought taken to ensure enough childcare is available when parents return to work. Even prior to this crisis, there were serious problems with the supply, access and affordability of childcare¹⁸ and with many parents unable to keep up payment, there

¹⁷ <https://news.gov.scot/news/pay-rise-for-social-care-staff>

¹⁸ WBG, (2020), Childcare: Key policy issues, (<https://bit.ly/34nxXkQ>)

	<p>arrangements to ensure continued contact with those receiving care in isolation and their loved ones.</p> <ul style="list-style-type: none"> • Data collection and reporting: The impact of the virus on the morbidity and mortality of those being cared for in care homes and the community should be measured and reported on. 	<p>is a risk centres will closing leading to a post lockdown shortage.</p> <ul style="list-style-type: none"> • Covid-19 has exposed the precarity of our social infrastructure from education to, health, social and childcare. Rebuilding from the crisis and restarting the economy will require substantial investment in social infrastructure.
<p>Social security</p>	<ul style="list-style-type: none"> • Lift restrictions on benefits that are untenable during the outbreak: LHA rates should be raised to the 50th percentile; the benefit cap, under-occupancy penalty, and two child limit should be lifted; the personal allowance in Universal Credit and working tax credit further increased and sanctions and conditionality must be suspended without exception. • Get Universal Credit to families sooner by making budgeting advances non-repayable grants: Currently families are having to wait five weeks for a payment, or accrue debt in the form of a Budgeting Advance, which is only available as a loan. During the crisis the Government should convert this into a non-repayable grant. • Increase Employment Support Allowance payments in line with the rise in Universal Credit and Working Tax Credit: at present, up to 2m disabled people have been left behind by the necessary and welcome increase in payments for other benefits. • Increase Child Benefit, to £50 per child: the Covid-19 outbreak threatens to exacerbate child poverty, and is likely to increase costs for households. A temporary uplift is necessary to ensure children do not lose out. • Lift the ‘No Recourse to Public Funds’ condition: Excluding migrant women from support risks exposing them to the virus, which threatens the public health response; and fails to recognise the vital role many migrant workers are playing in combating the pandemic. • Introduce part-time furlough: The furlough scheme has been expanded to include parents and carers. This is a welcome step, but many could still be working part-time if the design allowed it. Failing to introduce this ,risks widening the gender pay gap, and diminishing economic output. 	<ul style="list-style-type: none"> • Recognise that the economic impact of Covid-19 will last far longer than the impact on public health. • Take action to protect women who have taken furlough because of caring responsibilities or pregnancy are not unfairly targeted for redundancy once the furlough payments stop. • Prepare for widespread economic hardship, debt and redundancy which will impact the worst off most. Design a genuine safety net to help people cope with increases in debt once repayment freezes are lifted. • Extend protections against evictions. • Do not repeal these changes to the Covid-19 outbreak in recognition that the economic impact will last far longer than the impact on public health.

<p>Housing</p>	<ul style="list-style-type: none"> • Evictions should be suspended for as long as the social isolation measures are in place. • Local housing allowance rates should be up-rated to reflect the median (50th percentile) local private rents. • Keep women-only buildings/areas when allocating rooms to rough-sleepers to ensure women's safety. Increase level of housing benefit and provide other support so families can move from temporary accommodation. 	<ul style="list-style-type: none"> • A package of support should be put in place so that when the outbreak subsides people, including refugee and asylum seekers, will not have to return to the streets.
<p>VAWG</p>	<ul style="list-style-type: none"> • Funding: an immediate cash injection is needed to enable services to cope with additional pressures, including re-purposing the £15 million Tampon Tax funding as unrestricted grants to specialist women's services. • The Government should set up a UK-wide emergency fund to support voluntary organisations providing essential frontline services, following the London Mayor's creation of a £1 million Emergency Support Fund for voluntary organisations in London. • The Tampon Tax fund should be re-purposed to provide emergency core funding for specialist women's organisations facing increasing pressures as a result of Covid-19 • Provision needs to be made for an increase in demand for specialist women's services once social distancing provisions are lifted. • Equal support: an end to hostile environment policies, 'no recourse to public funds' conditions, and immigration detention to prevent the spread of the virus and ensure • migrant women experiencing VAWG can access free healthcare at the point of need and other forms of statutory support. Local authorities must work to identify all women and children made homeless and destitute due to VAWG and support them to self-isolate as required. • Contingency planning: life-saving VAWG professionals must be specified as key workers. There should be immediate investment in technology to ensure survivors can access support. Refuge services must be supported to test for Coronavirus and deliver self-contained provision where needed. • Guidance: Government guidance on social distancing and self-isolation must include safeguarding advice for those who experience harm at home, the steps survivors, their family and friends, and professionals can take to protect their safety, the support that's available and how to access it. This should be developed in partnership with specialist VAWG services and relevant public sector agencies. 	<ul style="list-style-type: none"> • Prepare for significant increase in demand for women's sector services after lockdown lifts and women are able to access support again. • Increase funding to women's sector organisations in order to cope with this increase and repair damage done by nearly a decade of cuts to the sector. • Amend the Domestic Abuse Bill so that it provides support for all women including migrants.

	<ul style="list-style-type: none"> • Awareness: the Government should deliver clear public communications on why forms of VAWG are crimes and that the additional pressure families and individuals will be facing at this time is no excuse to commit them. It should also highlight the full range of support that is currently available. • Equal representation, monitoring and action: Women should be fully represented in national and global responses to COVID-19, including the UK's C-19 ministerial group which should be cross-party, and include all devolved nations.¹⁹ 	
Justice, Human Rights and Democracy	<ul style="list-style-type: none"> • There must be an immediate reduction in the number of women in custody, detention centres and young offender units to avoid spread of the virus. • The six-month review built into the Coronavirus Act 2020 is welcome but extended police powers must be kept under review and used vigilantly. • Parliament must be taken online to allow for safe scrutiny. • The Brexit transition period will clearly need to be extended to allow time for scrutiny. • Women's representation in the response to Covid-19 needs desperate attention. 	<ul style="list-style-type: none"> • Take action to increase women's representation in parliament, including by enacting Section 106 of the Equalities Act. • Provide meaningful and comprehensive gender equality impact assessments of all future legislation including all future trade deals. • Repeal extended police powers as soon as possible as well as continuing to monitor their impact scrupulously.

This submission now takes a closer look at some of these key problems:

Women and healthcare

23. The NHS is at the forefront of the fight against the Coronavirus pandemic and that means women, as the majority (77%) of healthcare staff, are too. In England, 43% of doctors are women and 89% of nurses and midwives are women. Many women working in the health sector can be found in often invisible, but essential, hospital work like cleaning and catering.

24. Healthcare workers continue to raise serious concerns about shortages of personal protective equipment (PPE), exposing them to high risks of infection.²⁰ NHS staff who have raised concerns on social media have been threatened with disciplinary action.²¹ Doctors have reported being 'bullied and shamed' into working without

¹⁹ For the recommendations in full see EVAW et al (2020) Statement on Covid-19 (<https://bit.ly/2R98B4W>) and EVAW, (8 April 2020) Initial Briefing on the COVID-19 Pandemic and the Duty to Prevent Violence Against Women & Girls, (<https://bit.ly/2Xnd9Zs>)

²⁰ NHS Providers (23 March 2020) Health and Social Care Select Committee evidence session: Preparations for Coronavirus (<https://bit.ly/2X0leCV>)p1

²¹ The Guardian (31 March 2020) NHS staff 'gagged' over Coronavirus shortages, (<https://bit.ly/2RdOrqz>)

the necessary protective equipment.²² For female staff, who too often have to contend with ill-fitting personal protective equipment,²³ the risk could be exacerbated.

- 25.** As part of its efforts to enlarge and secure the healthcare workforce, the Government has announced an extension for a year of visas to all migrant doctors, nurses and paramedics free of charge, an extension that will also cover their family members.²⁴ However this does not cover other migrants working in the healthcare system. Nor is it clear if those who benefit will still be liable for the NHS surcharge, which is usually paid when applying for a visa. These efforts should include allowing refugees and asylum seekers with full medical qualifications in their countries to work. Many of them will have experience of working in war-time emergency settings with scarce resources, invaluable skills during a pandemic outbreak.²⁵
- 26.** The Government has pledged to provide whatever the NHS might need to fight the pandemic, including money and extra resources like new make-shift hospitals, beds, ventilators and PPE. This is very welcome.
- 27.** Disabled people's organisations have expressed serious concerns that disabled people and people with serious health conditions are being or may be denied treatment for Covid-19, even where these conditions have no impact on their chance of benefiting from such treatment.²⁶ Age UK has described pressure on some older people to sign 'do not resuscitate' forms as 'morally repugnant' following reports that GPs and in one case an entire care home have been asked to get some patients to agree to 'do not attempt CPR' (DNACPR) forms.²⁷ Age UK argues that while 'thinking ahead about what kind of treatment you would prefer to have, or not have, if you become seriously ill is a thoroughly sensible thing to do,' the topic should be approached with great sensitivity, factoring in the wishes of the individual, and based on the principle that no one should be pressured to refuse treatment or forced to have conversations in an undignified way.
- 28.** With a healthcare system working at overcapacity to address the Covid-19 pandemic, other essential health services have been cut back. Routine surgery has been suspended and decisions about chemotherapy for cancer patients have become much more complex.²⁸ Counselling and other mental health support has been moved to telephone and online. This will have a negative impact on women with ongoing physical or mental health conditions.
- 29.** Reproductive and sexual health is an area of concern that has been repeatedly side-lined in past epidemics. The Department for Health and Social Care has now released new guidance on early abortion for women in England.²⁹ This allows women to take abortion pills at home, which will result in thousands of women not having to travel to a clinic, meaning they can keep control of their reproductive rights while observing social distancing rules. This is welcomed in a context where a spike in unplanned pregnancies is expected.³⁰ However, women in other parts of the UK will still be at risk. Although the ban on abortion in Northern Ireland has now been lifted, there are no abortion providers in NI, meaning that women still have to travel to access abortion. The change in regulations for England is

²² DAUK (6 April 2020) Doctors bullied and shamed into not wearing appropriate PPE, (<https://bit.ly/2Rkako9>)

²³ Caroline Criado-Perez (2019) Invisible Women: Exposing Data Bias in a World Designed for Men. Chatto and Windus

²⁴ Gov.uk (31 March 2020) NHS frontline workers visas extended so they can focus on fighting Coronavirus (<https://bit.ly/2wlybXz>)

²⁵ The Financial Times (26 March 2020) Refugee doctors plead for fast-track to practise in UK (<https://on.ft.com/2UGjXja>)

²⁶ Disability Rights UK et al (April 2020) Covid-19 and the rights of disabled people (<https://bit.ly/34j8h8R>)

²⁷ Huffington Post (3 April 2020) Age UK Calls Pushing People To Sign 'Do Not Resuscitate' Forms 'Morally Repugnant' (<https://bit.ly/3aPVzky>)

²⁸ The Guardian (25 March 2020) As the NHS pivots to Coronavirus, what about its other patients? (<https://bit.ly/34ja1yK>)

²⁹ DCMS (30 March 2020) Temporary approval of home use for both stages of early medical abortion (<https://bit.ly/2X9Ypgo>)

³⁰ The Telegraph (29 March 2020) Coronavirus pandemic may see 'spike' in unplanned pregnancies, experts claim (<https://bit.ly/2wbEBOt>)

temporary but BPAS's guidance shows that it does not need to be; medication for early abortion can be safely taken at home and this could become established practice and offered as a choice to women.³¹ Access to contraception is likely to be affected by the disruption in global supply chains and because measures imposed to slow the spread of the disease will make it harder to get it.³²

- 30.** Pregnant women who are undocumented have to pay for essential ante-natal and maternity care. This saddles women who are often the least able to pay with thousands of pounds of debt.³³ This is a reversal of the NHS's principle of collective responsibility for health.

Women and social care

- 31.** Covid-19 has exposed and exacerbated pre-existing crises within an underfunded and precarious social care sector with chronic underfunding, low paid and often poorly trained staff, many of whom are agency workers, and often on zero-hour contracts. The Covid-19 care crisis has foregrounded the vulnerability of the care workforce of whom the vast majority – 84%³⁴ of those working in residential and domiciliary care – are women, and BAME and migrant groups are overrepresented.
- 32.** The number of cases and deaths in care homes and amongst domiciliary carers is expected to be much higher than current estimates. In France almost a third of all coronavirus deaths have been of residents in care homes³⁵. Care homes have been reported as sites of virus clusters in Italy, Spain, Germany and Ireland. Similar concerns have been expressed in Canada and the US³⁶. This reveals the limitations of charting the progress of the pandemic solely on the numbers dying each day in hospital.

What is happening to the care system and the people in it?

- 33. Shortage of PPE:** A major threat to the health and safety of social care workers, their families and those for whom they are caring, is the shortage of PPE. Many residents in care homes are, by age or health status, especially vulnerable to Covid-19 but are in contact with several care workers per day. 70%³⁷ have dementia to some degree and may therefore be hard to keep in isolation. Despite repeated promises to meet demand by the Health Secretary, care homes report that their supplies of PPE are still inadequate. Domiciliary workers and their employers are also experiencing shortages of PPE. This matters as every day they visit several clients in their own homes and cannot maintain a safe distance either from them or from a fellow carer. They too may carry the virus back to their own families. Each week those receiving care are visited by several different carers and there has been very little publicity given to the risks and difficulties they face.
- 34. Lack of testing:** With at least half of care homes reporting Coronavirus cases, residential and domiciliary carers are being exposed to some of the same threats to their health and well-being as health workers. However, testing for residents and care home staff has not routinely been taking place, despite at least half of all care

³¹ British Pregnancy Advisory Service (25 March 2020) Healthcare professionals call on Boris Johnson to intervene to protect women's health - reckless failure to listen to scientific advice is putting vulnerable women at severe risk (<https://bit.ly/3465Jv1>)

³² United Nations Foundation (23 March 2020) Addressing sexual and reproductive health and rights in the Covid-19 pandemic (<https://bit.ly/3aHP2s5>)

³³ Maternity Action (2019) What Price Safe Motherhood? Charging for NHS Maternity Care in England and its Impact on Migrant Women (<http://bit.ly/2QyIQd4>)

³⁴ <https://www.bbc.co.uk/news/uk-34103302>

³⁵ ibid

³⁶ ibid

³⁷ <https://www.alzheimers.org.uk/about-us/news-and-media/facts-media>

homes now reporting coronavirus cases.³⁸ The Government's promise to rectify this situation, if fulfilled, will be a great relief for staff and residents in care homes, though it may well be too late to stem the rapid growth of the infection in the care sector.³⁹ The lack of testing of domiciliary care works compounds the risks they and their clients face through lack of PPE.

- 35. Delivering additional healthcare:** The relationship between social and hospital health care services has abruptly changed. Until the Covid-19 crisis, residential care home providers could ensure that residents with problems about their medication as well as more serious illnesses could be treated in hospital. The heavy demand for hospital beds has significantly curtailed this practice, making the lack of social care staff trained in handling medication, let alone serious illness, a more pressing issue.
- 36. Underestimating deaths:** GPs can now register causes of a death in a care home on the basis of a staff description without ever having visited the resident. Crematoria now require only one doctor's signature, not two, on the death certificate. There is a risk therefore that the number of deaths attributable to the coronavirus may be an underestimate.
- 37. Lessening of standards:** The Coronavirus Act included some easements of the Care Act 2014. Local authorities still have the *power* to meet eligible care and support needs, including those of a carer, but no longer have the *duty* to do so. Local authorities will still be expected to take all reasonable steps to continue to meet needs but can now prioritise the most pressing needs and temporarily delay or reduce other care provision⁴⁰. Cuts to local authorities' budgets have meant only those with severe needs are currently being supported by their Local authorities. With the addition of those requiring social care because of Covid-19, prioritisation can only mean leaving some severe needs unmet; AgeUK estimated there were 1.5 million older people living with an unmet need even before this crisis⁴¹.
- 38. End-of-life concerns:** There have been reports that, as a result of Covid-19, some care homes are precipitously asking residents for their wishes concerning end-of-life care and instructions relating to resuscitation, having been told they will not be admitted to hospital. Others are being discharged from hospitals to care homes without being tested. This is making some residents and their families very fearful and causes additional stress to care workers⁴².
- 39. Precarious working arrangements:** In the face of staff shortages, the quarter of the care workforce who are on zero hours contracts⁴³ are particularly vulnerable to pressure to work in unsafe conditions or when they should be self-isolating for fear they will not be offered work in future.
- 40. Staff shortages exacerbated by migration restrictions:** Both the health and social care sector is dependent on migrant workers. As a result of Brexit, the futures of those from the EU are still unclear but the points-based immigration system proposed by the Government earlier this year, would disqualify many people currently providing lifesaving care. Many migrants from outside the EU have no access to public funds or free health care, so will also be under great pressure to continue working even when at risk to their own health. The Government announced on March 31 that for doctors, nurses and paramedics, visas due to expire before

³⁸ <https://www.politicshome.com/members/article/alzheimers-society-fears-hundreds-of-thousands-of-people-with-dementia-in-care-homes-being-abandoned-during-coronavirus-crisis>

³⁹ <https://www.gov.uk/Government/news/Government-to-offer-testing-for-everyone-who-needs-one-in-social-care-settings>

⁴⁰ <https://www.gov.uk/Government/publications/coronavirus-covid-19-changes-to-the-care-act-2014/care-act-easements-guidance-for-local-authorities>

⁴¹ <https://www.ageuk.org.uk/latest-press/articles/2019/november/the-number-of-older-people-with-some-unmet-need-for-care-now-stands-at-1.5-million/>

⁴² <https://www.politicshome.com/members/article/alzheimers-society-fears-hundreds-of-thousands-of-people-with-dementia-in-care-homes-being-abandoned-during-coronavirus-crisis>

⁴³ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/879639/covid-19-adult-social-care-action-plan.pdf Published 15 April 2020

October 1st 2020 will be automatically extended a year without attracting fees or an immigrant health surcharge, but this will not apply to social care workers or nurses in nursing homes⁴⁴.

- 41. Insufficient carers allowance:** The health and well-being of the estimated 8 million unpaid adult carers and the effects of Covid-19 on them has attracted minimal attention. Some minor changes have been made to the Care Allowance, so it is not withdrawn if either the carer or the person being cared for goes into hospital with Covid-19. The Care Allowance remains one of the lowest in the benefit system, worth two-thirds of Statutory Sick Pay, which can now be claimed from the first day of illness.
- 42. Confusion about self-isolation:** Nearly three-fifths of unpaid carers are women⁴⁵ and they are more likely than men to be caring for someone living in another household. Among those caring for less than 20 hours a week, 76% are⁴⁶ looking after someone in another household. The rules concerning self-isolation, especially if the carer or the person being cared for is over 70 years old, are confusing.
- 43. Lack of central planning:** There has been no planning or any central co-ordination of care services or of the protection of the care workforce during the Covid-19 pandemic.

Women and the economy

- 44.** Women and men occupy different positions in the economy: they tend to be concentrated in different sectors, in different hierarchical positions and have different career patterns. The economic crisis created by the Covid-19 pandemic will have different impacts on women and men and different groups of women as a result of these disparities. On average, women are more vulnerable to debt, income-loss and poverty as a result of their pre-existing unequal standing in the economy:
- 45.** Women are the majority of low paid earners (69%⁴⁷) and the majority of people living in poverty, including 90% of lone parents – 45% of whom are living in poverty.⁴⁸ Many of these women are also disabled or suffer from race and ethnicity-based inequalities.
- 46.** Women's position in the labour market tends to be more precarious than that of men, making them vulnerable to redundancy and low pay. Prior to Covid-19, 87% of men in paid work were full-time workers, compared to only 59% of women.
- 47.** According to ONS data, pre-Covid-19, women were consistently more likely to struggle to keep up with bills, run out of money by the end of the month or struggle to cope if they lost their main source of income.⁴⁹ 39% of women and 34% of men reported it was a struggle to keep up with bills, some or most of the time, 26% of women and 23% of men said they ran out of money by the end of the month, and 29% of women and 23% of men said they would not be able to make ends meet for a month or less if they lost their main source of income.

⁴⁴ Commons Library Brief, CBP 8887, 9 April 2020

⁴⁵ <https://www.carersuk.org/news-and-campaigns/news/state-of-caring-report-2019>

⁴⁶ Ibid

⁴⁷ WBG (2020) Women, employment and earnings (<https://bit.ly/2R4d4pi>)

⁴⁸ WBG (29 March 2019) DWP data reveals: women and children continue to be worst affected by poverty (<https://bit.ly/2xHdxHj>)

⁴⁹ ONS (2 April 2020) Early indicator estimates from the Wealth and Assets Survey: April 2018 to September 2019 (<https://bit.ly/34fc1bK>)

48. Women have more difficulty affording suitable homes for themselves and their families. This is particularly an issue for single mothers, who have to rely on a single income, and BAME women who are more likely to have larger families and to be poor. Disabled women also face specific difficulties in finding adapted homes and they will also often struggle with lower incomes. Women are the majority (67%) of people living in homelessness, with single parents making up two-thirds of homeless families with children.⁵⁰

Covid-19 and Women's Paid Work

49. Women are disproportionately likely to work in the sectors that have been hit hardest by the lock-down. Analysis by IFS shows that 36% of young women and 25% of young men worked in sectors that have been closed down including restaurants, shops, leisure facilities and travel and tourism. Overall, 17% of women and 13% of men work in these sectors.

50. Low-paid workers are seven times as likely to work in a sector that has shut down (69% of low earners are women): one third of employees in the bottom tenth of the earnings distribution work in shut down sectors versus just 5% of those in the top 10%.⁵¹

51. Women are also overrepresented in the informal economy, including the sex industry, where workers are at particular risk of income-loss and resultant poverty. This is especially because of the overrepresentation of migrant women in the sex industry (see 'no recourse' and VAWG sections below.)

52. The number of self-employed women has risen sharply since 2008 and their share of the self-employed is now 33% (from just over a quarter before the 2008 crisis). Earnings for self-employed women are markedly lower than for self-employed men: in 2016, full-time self-employed women earned £243/week, compared to £363 for their male counterparts. This is a gender earnings gap of 32%, which is 12 percentage points higher than for full-time employees.⁵² Women are also the majority (59%) of workers in part-time self-employment.

53. Many jobs need to be kept going even in a lockdown situation. Most of these occupations, deemed 'key worker' occupations, have a very high risk of contagion, determined by their frequency of human contact. Care workers, nurses, medical practitioners, paramedics, pharmacists, and midwives are some of the professions with the highest exposure risk but indispensable on the fight against this pandemic. Of the 3,200,000 workers in 'high risk' roles, 77% are women.⁵³

54. Shockingly in the current circumstances, the average pay for workers in these high-risk occupations is below the median weekly UK wage.⁵⁴ These workers are indispensable and most at risk of exposure to Covid-19 but they are also some of the worst paid. They are also overwhelmingly women: 98% of workers in high-risk jobs that are being paid below 60% of median wages are women.⁵⁵

⁵⁰ WBG (2019) A Home of Her Own: Housing and Women (<http://bit.ly/2L9c9Ts>)

⁵¹ IFS (6 April 2020) Sector shutdowns during the Coronavirus crisis: which workers are most exposed? (<https://bit.ly/2XgDc4w>)

⁵² ONS (2018) Trends in Self-Employment (<https://bit.ly/2G0JUUM>)

⁵³ Autonomy (24 March 2020) The Jobs at Risk Index (JARI) (<https://bit.ly/2wVsCVH>)

⁵⁴ Ibid.

⁵⁵ Ibid.

Covid-19 and Women's Unpaid Work

55. . With schools and nurseries closed it will be impossible for millions of parents to work. This will be a particular problem for lower-paid workers (who are less likely to be able to work from home) and parents of younger children who need care and supervision. In addition to care work, having children at home all day increases the burden of domestic work, particularly cooking meals and cleaning.
56. Working Families has reported that some parents are being refused permission to work from home and told that they must take unpaid leave.⁵⁶ In some cases, mothers have been refused permission to work from home which has been granted to other employees, reflecting gendered assumptions about caring responsibilities.
57. On 4 April 2020, the Government extended its furlough scheme to cover employees who cannot work because they are caring for children. This is very welcome. However, some employers have chosen to make staff redundant rather than put them on furlough.⁵⁷ Employees can only be furloughed on a full-time basis, making it hard for couples to share childcare and paid work. This is likely to increase unpaid care work for many women, while reducing their income.
58. Prior to this crisis, women took on more responsibility for unpaid care work, including childcare, than men which impacts their ability to earn, save and work from home. This crisis may offer an opportunity to change that pattern. However, WBG has already received reports from women who are working from home while also dealing with home educating and the demands of children while their partners are able to get on with work in another part of the house. It is more probable that the crisis will increase women's responsibilities for unpaid care.

Impact of nursery and school closures

59. The Government announced that nurseries and childminders should close from 23 March apart from those that are providing care for 'critical workers' and vulnerable children. Many childcare settings have closed, either because staff are classed as vulnerable or are in self-isolation or because of fears that remaining open will risk the health of their employees.⁵⁸
60. These closures have had a severe impact on both childcare providers and on parents. Even prior to this crisis, there were serious problems with the supply, access and affordability of childcare.⁵⁹ The funding provided to nurseries and childminders to deliver free childcare places did not cover their costs, leading to an increase in additional charges to parents and fees paid for care outside the free hours.⁶⁰
61. The Government has agreed to continue to pay for the 'free hours' for children who are registered with a nursery or childminder for the next three months, even if they are unable to attend. Since this funding was already insufficient, many have continued to charge full or partial fees to parents who are not key workers. This

⁵⁶ Working Families (2020) Weathering the Storm: the COVID-19 pandemic and working parents, (<https://bit.ly/2V0v45n>)

⁵⁷ Ibid.

⁵⁸ Nursery World, (26 March 2020), Coronavirus: More childcare settings closing their doors, (<https://bit.ly/2XmSggO>)

⁵⁹ WBG, (2020), Childcare: Key policy issues, (<https://bit.ly/34nxXkQ>)

⁶⁰ Early Years Alliance, (2019), Election research: Childcare fees will increase after next election thanks to parties' funding shortfall, (<https://bit.ly/3e9qrhR>)

causes particular difficulties to parents who have lost their job, had their hours reduced or been put on furlough on reduced pay.⁶¹ Self-employed parents who have lost work are likely to find it impossible to continue to pay childcare costs while waiting for the Government support grant in June.

- 62.** The vast majority (around 98%) of childcare workers are women⁶² and average wages in the sector are very low. In 2018, the Low Pay Commission highlighted concerns about low pay in the childcare sector, in particular that 40% of childcare workers on the National Minimum Wage were underpaid.⁶³ This means that many childcare workers furloughed on 80% of their previous wage are likely to be pushed into poverty. It is likely that some childcare providers will not survive this crisis, further reducing the already limited supply of childcare when many parents are trying to return to work.
- 63.** The move to remote and online learning is disproportionately impacting children from the poorest families who are already twice as likely to leave school without GCSEs in English and maths.⁶⁴ A prolonged period away from school is likely to exacerbate this situation and increase the attainment gap which usually widens in the summer holidays.⁶⁵ Children from poor families are less likely to have access to the internet or a computer/tablet at home. IPPR has pointed out that only 2 per cent of teachers working in the most disadvantaged schools believe their pupils have adequate access to online learning.⁶⁶ Even where a family has a computer this may be needed by a parent who is working from home. Sutton Trust polling has shown that that 34% of parents with children aged 5-16 say that their child does not have their own computer, laptop or tablet at home.⁶⁷
- 64.** Awarding qualifications on the basis of predicted grades based on teacher assessments, mock examinations and course work will further disadvantage poorer students. High-attaining disadvantaged students are more likely to have their grades under-predicted than their richer counterparts.⁶⁸ The Runnymede Trust has highlighted that this will disproportionately affect BAME students as “teachers’ expectations of black students and their working-class peers tend to be systematically lower than warranted by their performance in class.”⁶⁹ They call on the Government to provide teachers with guidance and support to ensure more accurate predictions and on how to carry out equality impact assessments. They also call on Universities to use contextual data in making offers to ensure that students from lower socio-economic backgrounds do not lose out.

Social security

- 65.** It has rarely been more important that there is a social security safety net for all people, not least women. Yet the gaps in the current system will be felt most acutely by women because they earn less, own less and consequently rely on social security for larger parts of their income.

⁶¹ Mumsnet.com (13 March 2020), COVID-19 nursery closure and refund, (<https://bit.ly/34ml3DL>)

⁶² Fatherhood Institute, (2015), Men in Childcare, how can we achieve a more gender-balanced early years and childcare workforce? (<https://bit.ly/3c3gbG7>)

⁶³ Low Pay Commission, (2018) National Minimum Wage, Low Pay Commission Report 2018, (<https://bit.ly/2JSWPra>)

⁶⁴ Sutton Trust (19 March 2020) School Closures and Disadvantaged Students, (<https://bit.ly/2x7B5Fd>)

⁶⁵ H Stewart, N Watson & M Campbell (2018) ‘The cost of school holidays for children from low income families’, *Childhood*, 25:4 (<https://bit.ly/2V4abpT>)

⁶⁶ IPPR (2020) Children of the Pandemic (<https://bit.ly/3aFMHOM>)

⁶⁷ Sutton Trust (19 March 2020) School Closures and Disadvantaged Students (<https://bit.ly/2x7B5Fd>)

⁶⁸ Sutton Trust (2017) Rules of the game (<https://bit.ly/2VbUAoq>)

⁶⁹ Runnymede trust et al (2 April 2020) Letter to Gavin Williamson Re: Covid-19 Cancellation of GCSEs, AS and A levels in 2020 (<https://bit.ly/39NLjbl>)

66. It is likely that a higher proportion of women will have to take unpaid leave (if their employer permits this) or leave work altogether to care for children off school or sick relatives.
67. Widespread job losses could see millions more women pushed into poverty and reliant on the social security system. This is of particular concern in the medium-long term when the Government stops paying ‘furlough’ but the economic impact continues to bite.
68. Inequalities of ethnicity, ability and income are also exposed and exacerbated by economic downturn with BAME and migrant women significantly overrepresented in precarious work⁷⁰ and disabled women relying on social security more than ever.
69. Over the last decade, reforms have been made to the social security system which sought to incentivise benefit claimants to find work, move into cheaper or smaller rented accommodation, or have no more than two children. Due to Covid-19, seeking work and moving home are against the Government’s lockdown policy. Millions of families who have already made decisions about their family size are now making new Universal Credit claims and finding that their support is capped.
70. In normal times, these policies – the benefit cap, under-occupancy penalty, Local Housing Allowance limits, and two-child limit – were contentious and created significant hardship. In the current scenario, they are untenable. They offer families, many of whom are not adjusted to the benefit system’s limitations, an impossible choice between ignoring public health advice, and severe financial hardship.

The Government’s response

71. The Government has demonstrated unprecedented agility within the social security system in responding to the economic impact of the Covid-19 outbreak. This demonstrates that change is both desirable and possible.
72. Despite these welcome measures, there remain some serious gaps in the response with regard to social security, which must be addressed to stop a significant proportion of the population, many of them women, falling through the net and into poverty.

The table below sets out the key gaps which need attention, especially for women:

Government’s action	Remaining gaps	Recommendation
73. ‘Furlough’ Salary Retention Scheme:		
Recognising widespread loss of earnings and employment, the Government has announced two salary retention schemes	The significant increase in Universal Credit claims indicates that many employers are choosing to make people redundant rather than furlough them.	There should be a ‘right to request’ furlough.

⁷⁰ TUC (2017) BAME workers over a third more likely to be in precarious work, finds TUC (<https://bit.ly/2UX6LW0>)

<p>designed to limit widespread redundancy, employment and poverty.</p> <p>On 11 March 2020, the Government announced that it will pay wages of workers who are not needed during the pandemic at 80% of their earnings up to £2500 per month. This includes foreign national staff who have no recourse to public funds.</p> <p>On 4 April this scheme was extended to employees who are unable to work because they have caring responsibilities resulting from Covid-19, including parents whose children are no longer at school. It also covers employees in high risk categories who are shielding in line with public health guidance.⁷¹</p>	<p>There is no right to be furloughed, both employer and employee have to agree.</p> <p>Although employees on zero hours and other casual contracts are covered by the furlough scheme, employers may be more likely to simply not offer shifts rather than furlough them. Women are more likely than men to be on zero hours contracts.</p> <p>The Government decision to extend the furlough scheme to employees who cannot work because of care responsibilities as a result of Covid-19 or who are shielding because they are in a vulnerable group is very welcome. However, this has not been widely publicised, meaning that employers may not be aware of the new groups that are covered by the scheme.</p> <p>To qualify for the furlough scheme, employees have to have been included on the PAYE payroll on or before 28 February 2020. Anyone who started work after that date is not eligible.</p> <p>The furlough scheme does not make provision for people whose hours have been reduced rather than cut altogether. For parents with small children, this means that it is not possible for both to be furloughed part time to meet caring responsibility while continuing to work part time. It is likely that the lower earner in a couple (usually a woman) will therefore be more likely to request to be furloughed, while the higher earner continues on full earnings. This will increase women’s unpaid work while lowering their income.</p>	<p>The Government should publicise the extension of the furlough scheme to new groups of employees.</p> <p>The furlough scheme should allow for part-time furlough, particularly for those who have caring responsibilities.</p> <p>It is vital that everyone who needs support can access information about what schemes are available. The Government should ensure that all information materials are available in multiple formats, including different languages, and avoid images of text to convey information as they cannot be read by screen readers.⁷²</p> <p>Thought must be given to what companies do when the Government stops paying furlough to avoid gender inequalities relating to pregnancy and caring responsibilities disproportionately costing women’s jobs.</p>
<p>74. Self-employment payments:</p>		

⁷¹ HMRC (4 April 2020) Claim for your employees' wages through the Coronavirus Job Retention Scheme, (<https://bit.ly/3dVwEOx>)

⁷² RNIB website, (2020) Coronavirus and accessible online information, (<https://bit.ly/2UUbcbY>)

<p>On 26 March, the Government announced it will also pay a taxable grant of 80% of average annual earnings for the previous three years to self-employed people earning less than £50,000</p>	<p>The Institute for Fiscal Studies has highlighted⁷³ that approximately 2 million people with some self-employment income will not be eligible for the Government's self-employment payments. Around 1.3 million people receive less than half of their income from self-employment because they combine self-employment with a part-time job. A further 650,000 people started self-employment after April 2019. Around 225,000 people earn more than £50,000 a year from self-employment.</p> <p>It is likely that the majority of these people will be men yet self-employed women are more vulnerable to poverty given the self-employed earnings gap: women are 33% of self-employed people. In 2016, full-time self-employed women earned £243/week, compared to £363 for their male counterparts. This is a gender earnings gap of 32%, which is 12 percentage points higher than for full-time employees.⁷⁴ Women are also the majority (59%) of workers in part-time self-employment.</p> <p>Those who do qualify will have to wait until June for a lump sum payment. If they have low household income, they can claim Universal Credit in the meantime and wait 5 weeks for their first payment. However, when they receive the lump sum, this may take them over the savings threshold after which Universal Credit is reduced.</p> <p>The calculation of income from self-employment is based on earnings over the last three years. This means that those who have taken time off for caring responsibilities will lose out. This will disproportionately affect women, who are more likely to have caring responsibilities, and in particular mothers who have taken maternity leave.⁷⁵</p>	<p>The three year period over which average earnings are calculated for the Self-employment Income Support Scheme should exclude any period of maternity, parental, or paternity leave.</p>
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⁷³ IFS (2020) Income protection for the self-employed and employees during the Coronavirus crisis (<https://bit.ly/2wamY1u>)

⁷⁴ ONS (2018) Trends in Self-Employment (<https://bit.ly/2G0JUUM>)

⁷⁵ Maternity Action (2020) Covid-19 FAQs: Maternity pay and benefits for self-employed women (<https://bit.ly/2x2qA65>)

75. Universal Credit:		
<p>These schemes will significantly reduce the number of people requiring social security payments. However, there are still millions who will fall through the net and, with self-employment payments not promised till June, many will need to claim UC in the meantime.</p> <p>The Government has increased the standard allowance in Universal Credit and the basic element in Working Tax Credit by £20 a week on top of planned annual uprating.⁷⁶</p> <p>Face-to-face assessments have been replaced with telephone assessments. There has also been an increase in local housing allowance (see below). The Department for Work and Pensions has seen a ten-fold increase in applications for UC in the two weeks since people were asked to stay at home, demonstrating the unprecedented demand the system is facing.⁷⁷</p>	<p>Many of the problems with the design of UC⁷⁸ will now be experienced by increasing numbers of households and individuals. Most immediately, people will feel the impact of the five-week wait to receive their first payment.</p> <p>The two- child limit means that families with third or subsequent children born after April 2017 will not receive support for those children.</p> <p>Payment into a single bank account will exacerbate the risk of financial abuse in households⁷⁹.</p> <p>The level of Universal Credit is too low.</p>	<p>Advance payments under Universal Credit should be widely promoted and converted from a loan into a grant. The five-week wait as it stands will cause unnecessary hardship.</p> <p>The two-child limit and overall benefit cap should be abolished.</p> <p>The Government should allow separate payments of Universal Credit by default.</p> <p>The individual element of UC should be further increased.</p> <p>Local housing allowance rates should be up-rated to reflect the median (50th percentile) local private rents.</p> <p>Existing sanctions and deductions from Universal Credit and Jobseekers Allowance should be removed, and consistency should be applied in automatically halting conditionality and administrative benefit withdrawal across all benefit payments.</p> <p>The Government should help medium-income households by scrapping rules that lower the level of support for those with savings over £6,000 and rule out people with savings over £16,000.</p>

⁷⁶ DWP (2020) Coronavirus and claiming benefits, (<https://bit.ly/3aKaTPJ>)

⁷⁷ BBC News (2 April 2020) Coronavirus: Nearly a million universal credit claims in past two weeks (<https://bbc.in/2X5WlQZ>)

⁷⁸ WBG (2017), Universal Credit: A 2017 briefing from the UK Women’s Budget Group, (<https://bit.ly/2JC3tll>)

⁷⁹ WBG, SEA and EVAW (2019) Benefits or barriers? Making social security work for survivors of violence and abuse across the UK’s four nations (<https://bit.ly/39Chevj>)

76. Employment Support Allowance (ESA):		
<p>There are specific parts of the social security system to support disabled people, and disabled women⁸⁰ have been disproportionately affected by cuts and changes since 2010. This includes Employment Support Allowance (ESA) which can be claimed by employees or self-employed people unable to work due to disability or chronic illness.</p> <p>The Chancellor has announced that contributory ESA (for those who have enough National Insurance Contributions) can be paid from day one rather than day 7, without a fit note if they have Covid-19. Whilst welcome, this will not cover women who do not have enough National Insurance Contributions to claim contributory ESA.</p> <p>The Government has also said that people will not have to attend face-to-face assessments for ESA or Personal Independence Payment (PIP) for 3 months.</p>	<p>Disabled people claiming ESA do not benefit from the increase in rates to Universal Credit. In the latest DWP data, for August 2019 last year, there were 1.98m legacy ESA claimants, compared with 2.35m Universal Credits in total.⁸¹ This picture will have shifted since then but nevertheless a large number of disabled people are missing out on additional support.</p>	<p>The increase to Universal Credit should be applied to all legacy benefits.</p>
77. Statutory Sick Pay (SSP):		
<p>Workers needing time off sick, or to self-isolate if a family member is ill who qualify for Statutory Sick Pay (SSP) can now claim from day 1. SSP has been increased from £94.25 a week to £95.85 a week.</p>	<p>SSP is still just £95.85 per week and 1 in 5 workers are not eligible. This is an unliveable amount of money for people trying to self-isolate and contain the spread of Covid-19. Low levels of statutory sick pay, and restricted eligibility increase the risk that people who are ill, or who have been in contact with someone who is ill, will continue to work, risking the spread of the virus.</p>	<p>The earnings threshold and employee status for Statutory Sick Pay should be abolished.</p> <p>The rate of SSP should be raised to at least that paid to a full-time worker on the National Living Wage (£322.64 per week).</p>

⁸⁰ WBG (2018) Disabled women and austerity (<http://bit.ly/2lfsOSS>)

⁸¹ DWP (2020), 'DWP benefits statistical summary, February 2020, accessed at <https://www.gov.uk/government/publications/dwp-benefits-statistics-february-2020/dwp-benefits-statistical-summary-february-2020>

	<p>Women are less likely to qualify for SSP (and other contributory benefits) because of low or intermittent pay, zero-hours contracts and not enough regular hours / earnings due to caring responsibilities: women make up 70%⁸² of those on jobs not eligible for SSP. They also make up 77% of workers in ‘high risk’ jobs, so may be more likely to need to claim SSP⁸³.</p>	<p>The Government needs to take urgent action to extend sick pay to the self-employed.</p>
<p>78. Child benefit:</p>		
<p>The Government has not yet acted to support parents with children out of school and nursery, although carers can now claim furlough.</p>	<p>Families with children at home as a result of schools, nurseries and other childcare facilities being closed will face increased food and utility costs. This will be particularly hard for low income families who are entitled to free school meals. The National Voucher Scheme is a positive step but risks families falling through the cracks, and will not cover all costs of the outbreak.</p> <p>At the same time, many will be waiting for the first Universal Credit payment or payment for the self-employed so without any source of income. Those who have been furloughed will be on reduced incomes. Child benefit is one of the best targeted and efficient ways of providing support to these families.</p>	<p>Child benefit should be increased to £50 per child per week to cover gaps in free school meals and cover some costs of children being at home full time⁸⁴.</p>
<p>79. Carer’s Allowance:</p>		
<p>Workers with caring responsibilities as a result of Covid-19 can now be furloughed if this means they are unable to work.</p>	<p>However, those who are already full time caring, or those who have to take on new full time care responsibilities that are not related to Covid-19 are only entitled to Carer’s Allowance, currently £67 a week, even less than SSP.</p>	<p>Carer’s allowance should be increased in recognition of increased demand and the importance of providing this care in taking the non-urgent strain off the NHS.</p>
<p>80. Migrant workers and ‘No Recourse to Public Funds’:</p>		
<p>The Government’s furlough rules allow migrant workers to be furloughed.</p>	<p>Many migrant women have No Recourse to Public Funds (NRPF). Migrants face particular challenges in being away</p>	<p>NRPF must be suspended immediately.</p>

⁸² BBC News (31 March 2020) Coronavirus: Wages, sick pay and time off explained (<https://bbc.in/3aHccPg>)

⁸³ WBG (2020) Low paid women at highest risk of exposure to Covid-19 (<https://bit.ly/3dRI1a2>)

⁸⁴ LSE (2020) Letter to the Chancellor: Raising Child Benefit to £50 to Help Families through the COVID-19 Pandemic (<https://bit.ly/2UYNBPh>)

	<p>from their loved ones and without socio-economic support compounded by the NRPF policy.</p> <p>If migrant workers lose their job or hours, they cannot claim Universal Credit, Child Benefit or Housing Benefit. If a migrant woman is experiencing abuse in isolation, she may find it difficult to find a refuge that can take her. The Government's current Covid-19 response ignores the large proportion of the UK population who are born abroad but significantly contribute to society and the economy.</p>	<p>The UK Government should follow the example of other European countries and extend residence and support rights to all.</p> <p>Across many European countries, steps are being taken to mitigate the precarity of migrants: Ireland is extending all immigration visas due to expire in the coming weeks for two months to ensure no one becomes 'illegal' through no fault of their own.⁸⁵ Portugal is giving an automatic right of residence to everyone who has an application pending with the Portuguese Home Office equivalent until July.⁸⁶ This is to ensure that everyone currently living in the country has access to public services and support during the Coronavirus outbreak, but could also change the way we think about and regulate migration in the future.</p>
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Housing

- 81.** The economic impact of Covid-19 will also exacerbate a pre-existing gender crisis in the housing market. Women's Budget Group research finds huge disparities between mortgage and rent affordability between women and men due to the gender pay gap⁸⁷. With many people set to lose income and earnings in coming months, many groups could struggle to keep a roof over their heads, whilst those already homeless are extremely vulnerable to contracting the virus.
- 82.** In recognition of the economic effects of the crisis, the Government introduced a three-month moratorium for homeowners who are struggling to pay their mortgages as a consequence of having lost their earnings due to the economic impact of the Covid-19 outbreak. Measures were also introduced, in agreement with the industries, to make sure clients facing financial difficulties will not see their energy, water and other utilities cut, with suppliers instructed to reduce or pause bill payments or have them reassessed.

⁸⁵ The Irish Times (20 March 2020) Coronavirus: Immigration permits to be extended temporarily (<https://bit.ly/2ypwy1c>)

⁸⁶ Reuters (28 March 2020) Portugal to treat migrants as residents during Coronavirus crisis (<https://reut.rs/2X7NWBW>)

⁸⁷ WBG (2019) A Home of Her Own: Housing and Women (<https://bit.ly/2y0k3Jc>)

- 83.** The Government has not announced measures to support renters. Private renters are in a particularly precarious financial situation. 63% reported having no savings at all, which means their home is at risk if they lose their jobs.⁸⁸ Meanwhile, the housing affordability gender gap in the UK is a clear example of pre-existing inequalities: on average in England: average rents take 43% of women's median earnings but just 28% of men's⁸⁹.
- 84.** Local housing allowance rates have been updated to reflect the 30th percentile of local private rents. This is a welcome uprating considering that the vast majority of claimants in the private-rented sector were facing large shortfalls between their housing benefit and rent.⁹⁰ However, it will still leave many tenants with average or below average household costs with a shortfall. Women make up 60% of those in households claiming housing benefit,⁹¹ reflecting their higher likelihood of living in poverty.
- 85.** When poverty increases in times of economic crisis, there is a risk of increased homelessness. Already, 67% of statutory homeless people are women and housing unaffordability is also closely linked with violence and abuse (see VAWG section.) Rough sleeping is the visible face of homelessness but just the tip of the iceberg. For every person sleeping rough on the streets, there are 12 households that are homeless. They are usually in temporary accommodation provided by the council, staying temporarily with friends and family or sofa-surfing. Women are the majority of those in these circumstances and single mothers are overrepresented in homeless families.⁹²
- 86.** According to Shelter, 5,400 families are currently living in B&Bs and hostels, sharing kitchens and bathrooms and often crammed in one room.⁹³ Living in temporary accommodation is difficult in the best of times; complying with the Government's lockdown measures is challenging in such circumstances; no privacy takes a toll on people's mental health, and no space to store food or to cook makes it difficult to limit trips to the shops.
- 87.** Refugees and asylum seekers are some of the UK's most vulnerable and marginalised people, often living in gender-specific destitution⁹⁴. They are at increased risk of poverty, homelessness and therefore exposure to Covid-19. The Home Office announced that asylum seekers who see their application refused or people granted refugee status will be allowed to stay in their current state accommodation for the next three months.⁹⁵ This is a very welcome measure that will spare 50,000 people from becoming homeless during this health crisis, yet there will be thousands of refugees and asylum seekers without access to employment on social security who remain vulnerable to poverty and exposure.

Violence Against Women and Girls (VAWG)

- 88.** Home is not always a place of safety. As the World Health Organisation points out, violence against women tends to increase during every type of emergency, including epidemics⁹⁶, and this is supported by growing evidence of increases in demand for VAWG services around the world during Covid-19 'lockdowns in Italy'⁹⁷,

⁸⁸ MHCLG (2019) English Housing Survey: Headline Report 2018-2019 (<https://bit.ly/39EM4mX>)

⁸⁹ WBG (2019) A Home of Her Own: Housing and Women (<https://bit.ly/2y0k31c>)

⁹⁰ Shelter (2017) Briefing: Local Housing Allowance Freeze (<http://bit.ly/2Wq2A4p>)

⁹¹ Assuming couple household claimants include an equal total number of men and women. DWP (2018) Housing Benefit Caseload Statistics: Data to May 2018

⁹² WBG (2019) A Home of Her Own: Housing and Women (<http://bit.ly/2L9c9Ts>)

⁹³ Shelter (20 March 2020) Self-isolation? Try it as a homeless family living in one room (<https://bit.ly/2JSBXAh>)

⁹⁴ Women for Refugee Women (2020) Will I ever be safe? Asylum seeking women made destitute in the UK (<https://bit.ly/3aUAqWm>)

⁹⁵ The Guardian (28 March 2020) Home Office to hold on evicting asylum seekers during lockdown (<https://bit.ly/2xNttro>)

⁹⁶ WHO (23 March 2020) COVID-19 and violence against women What the health sector/system can do (<https://bit.ly/2x2lEx5>)

⁹⁷ The Guardian (28 March 2020) Lockdowns around the world bring rise in domestic violence (<https://bit.ly/3aBiRum>)

China⁹⁸ and France⁹⁹. Organisations in the UK working on violence against women and girls (VAWG), have highlighted the impact that self-isolation measures are having on levels of violence and abuse.¹⁰⁰ The National Domestic Abuse Helpline reported a 25% increase in calls and online requests for help since the lockdown.¹⁰¹

- 89.** The Women’s Budget Group (WBG) is not an organisation providing frontline services therefore this submission does not contain detail on VAWG, instead endorsing submissions by those organisations providing those services.
- 90.** Nonetheless, it is crucial that there is an understanding that poverty is both cause and consequence of domestic abuse¹⁰². Therefore, the social security system has a key role to play in keeping women safe during this crisis.
- 91.** As documented in the Women’s Budget Group 2019 report [‘Benefits or Barriers’](#) the social security system must be designed with survivors/victims at its centre, especially now. Yet there are several policies which increase the likelihood of women’s economic dependence on their partners including the single payment of Universal Credit, NRPF and limitations on spousal visas.

Prisons and detention centres

- 92.** Women in detention in prisons, young offender units or immigration detention centres are some of the most vulnerable to contracting the virus without adequate healthcare, given the lack of space, PPE, staff and healthcare.¹⁰³ Women in Prison and other prison reform organisations are calling for early release of people in custody and an immediate reduction in the number of people in prison, young offender institutions, secure training centres and immigration detention settings.¹⁰⁴ With women most likely to be in prison on short sentences (77% for 12 months or less)¹⁰⁵ and for non-violent crimes (82%)¹⁰⁶, action is needed to avoid additional deaths in custody.

Human rights and democracy

- 93.** There is concern from human rights organisations¹⁰⁷ that the powers given to police, immigration and public health officials to detain or forcibly isolate people could be particularly dangerous for some communities for whom the police do not necessarily represent safety including: victims/survivors of domestic abuse, BAME groups, homeless people, sex-workers/women in prostitution and undocumented migrants.

⁹⁸ BBC News (8 March 2020) Coronavirus: Five ways virus upheaval is hitting women in Asia (<https://bbc.in/2ywsTyR>)

⁹⁹ France 24 (25 March 2020) Trapped at home: Domestic violence victims at high risk in Coronavirus confinement (<https://bit.ly/2yr1UEF>)

¹⁰⁰ EVAW et al (2020) Statement on Covid-19, (<https://bit.ly/2R98B4W>), EVAW, (8 April 2020) Initial Briefing on the COVID-19 Pandemic and the Duty to Prevent Violence Against Women & Girls, (<https://bit.ly/2Xnd9Zs>)

¹⁰¹ BBC News (6 April 2020) Coronavirus: Domestic abuse calls up 25% since lockdown, charity says (<https://bbc.in/2JLHN6P>)

¹⁰² WBG (2019) Benefits or Barriers: (<https://bit.ly/2XCkIkq>)

¹⁰³ The Guardian (19 March 2020) Fears over Coronavirus risk in prisons as first UK inmate case confirmed (<https://bit.ly/2JGSBD3>)

¹⁰⁴ Inquest (2020) NEWS: Over 100 signatories call on Government to immediately reduce number of people in detention settings (<https://bit.ly/2w9TQaD>)

¹⁰⁵ Women in Prison (2019) Key statistics (<https://bit.ly/2yxo9ci>)

¹⁰⁶ Ibid.

¹⁰⁷ E.g. Liberty (2020) New law is biggest restriction on our freedom in a generation (<https://bit.ly/2wOMTMJ>); Amnesty International UK (2020) Coronavirus Bill must human rights at the centre of response (<https://bit.ly/2UGUWUE>)

94. There is also concern¹⁰⁸ that the extended Easter recess could see parliament close temporarily, therefore limiting the scope for democratic scrutiny of Covid-19 measures as well as the post-Brexit trade deals, Domestic Abuse Bill and other key pieces of legislation set to appear before both Houses. Now more than ever, cross-party parliamentary scrutiny is crucial, especially given the dismal representation of women in the cabinet (27%) and Covid-19 response.
95. All Government departments and UK business are focussed on dealing with the impact of Covid-19 and the lock down. This leaves little time to prepare for changing trade arrangements with the EU from the end of 2020. The negotiation period should be extended so that the UK can properly prepare.

Additional problems as the lock down eases

96. **Increased risk of redundancy among women:** As the lock down eases and the furlough scheme ends many companies are likely to make redundancies. There are concerns that women who have requested furlough or taken unpaid leave because of childcare responsibilities may be more likely to be selected for redundancy. Many companies that are large employers of women may not recover from the crisis, particularly in sectors such as hospitality, retail, childcare and tourism.
97. **Increased debt as postponed bills become due:** Many credit card and utility companies are offering payment holidays during the immediate crisis, but the debts will remain, and interest will be due on them. This will create additional pressures on women who are made redundant when the furlough scheme ends.
98. **Increased evictions:** Once the three-month period is over many private tenants may face eviction, particularly if they have been unable to pay their rent.
99. **Insufficient childcare:** Although some childcare providers have remained open to provide care for key workers' children others have closed. Many of those who remain open are running at a loss. It is likely that many childcare providers will close as a result of the crisis, reducing the already insufficient level of childcare and making it harder for women to return to work.
100. Many parents rely on grandparents to provide childcare. This is particularly true of single parents. It is likely that the lock down will be lifted in stages meaning that working age people will be expected to return to work while older people are still self-isolating and therefore unable to provide childcare.
101. **Increased pressure on health services:** The NHS has had to cancel or postpone non urgent treatment in order to increase capacity to deal with Covid-19. This includes treatment for people with life limiting and life-threatening conditions. Mental health problems are expected to increase as a result of the lock down. The backlog in cases once the immediate Covid 19 crisis is over will lead to increased waiting lists unless there is significant additional funding.
102. Poor health, including poor mental health, is a significant barrier to economic wellbeing, particularly for poorer women. If waiting lists for people with long term conditions increase this is likely to increase the amount of unpaid care work done by women.

¹⁰⁸ The Guardian (25 March 2020) UK parliament to close early for Easter amid Coronavirus fears (<https://bit.ly/2UDjA8W>)

103. Increased pressure on VAWG and other women's services: Large numbers of women in abusive relationships will not be able to access support at the moment. Once the lock down ends VAWG organisations are expecting a surge in demand for their services. Other women's services are also likely to see an increase in demand.

***ANNEX 1: Key challenges for different groups of women**:**

***These are only a few of examples of groups of women at risk and there are overlaps, omissions, exceptions and intersections between them.*

104. Key challenges for low-paid women

- a) Failure to qualify for Statutory Sick Pay, furlough or self-employment payments and/or high risk of job loss.
- b) Challenges in keeping themselves and their families fed and housed in the face of supermarket shortages or income loss. In low-income households, women are most likely to 'go without' to feed or clothe their family.
- c) The cruelty of Universal Credit, Carer's Allowance, SSP and other social security transfers. Low paid women are less likely to have savings to fall back on and are more reliant on the state's safety net which has been reduced in recent years.
- d) Likelihood of living in overcrowded accommodation without outdoor space and feeling the mental health effects of quarantine.

105. Key challenges for pregnant women

- a) Pregnant women are amongst those with pre-existing health conditions who need to work from home, yet the Government has not extended necessary furlough to those who cannot. There is no clear guidance about what pregnant key workers are supposed to do or furlough guidance.
- b) Self-employed parents who have taken Maternity or Parental Leave over the last 3 years will have a higher risk of their average 3-year income being reduced because they have taken periods of leave in the last 3 years.
- c) Mothers who are furloughed during the period used to calculate Maternity/Paternity pay will only receive 80% of their Maternity Pay.

106. Key challenges for disabled women

- a) Standards of care were lowered by the Coronavirus Act 2020, leaving many disabled people fearful for their care in addition to concerns they will be denied care.
- b) If carers need to self-isolate, disabled people will be left without vital support.
- c) Contributory Employment and Support Allowance is still unavailable to disabled people without enough National Insurance Contributions.
- d) Disabled women claiming legacy benefits rather than Universal Credit will not benefit from the increase in UC rates.
- e) Disabled women are twice as likely as non-disabled women to experience domestic abuse and face more barriers seeking support, so challenges for victims/survivors apply.
- f) Disabled women already face lower earnings but higher costs of living, including care. Loss of earnings could be detrimental to their wellbeing and quality of life.

107. Key challenges for Black, Asian and Ethnic Minority Women

- a) Black, Asian and Ethnic Minority women are three times more likely to be in precarious work, so they are less likely to qualify for furlough or Statutory Sick Pay.
- b) They are also more likely to be low paid and already living in poverty. They also have lower levels of savings to cope with a fall in earnings.
- c) BAME women are overrepresented in the health service where they face increased exposure and shortages of or unsuitable PPE.
- d) BAME families are statistically more likely to have more than 3 children, which means they face additional costs of school closure and struggle with the two-child limit on benefits within Universal Credit
- e) VAWG services led 'by and for' BAME women already face funding difficulties, and a fall in donations will be disproportionately felt by these services.
- f) Fake news about the inception of Covid-19 has seen incidents of racist hate crime and xenophobia.

108. Key challenges for victims/survivors of abuse

- a) Being enclosed with an abusive partner in self-isolation without support networks confronts victims/survivors with an impossible challenge.
- b) Increased demand for online services and helplines meaning additional funding is required to meet need
- c) Specialist VAWG services are struggling to access the technology they need and cover the costs of backfilling staff
- d) Decreased funding for services as a result of cancellation of sponsored events and donations, and the risk of lost rental income in refuges
- e) Financial abuse, heightened in times of economic downturn, could see women more likely to go hungry during isolation or facing further barriers to leaving.
- f) Enforcing self-isolation and social distancing in refuges and shelters is challenging and government commitment to PPE and testing is urgently required
- g) For survivors of trauma, self-isolation can cause serious mental health problems.

109. Key challenges for migrant women

- a) Migrant women still have no recourse to public funds, meaning that if they lose their jobs, hours or home they cannot claim social security.
- b) Migrant women victims/survivors of abuse with no recourse cannot access women's refuges.
- c) Despite being overrepresented in frontline work like care, migrants are paying for the NHS twice through the Immigration Health Surcharge and their taxes.
- d) Undocumented migrants may fear seeking treatment from the NHS due to connections with immigration enforcement and fear of charging.
- e) Women in detention centres are at high risk of contracting the virus without adequate staff, space or healthcare.

110. Key challenges for older women

- a) Older women (particularly over the age of 65) are at higher risk of experiencing complications if they contract Covid-19, especially if they have underlying health conditions.
- b) Gender pension inequality also means that women pensioners are significantly more likely to be living in poverty than men. On average, men have 11 times the private pension wealth of women and 23% of single woman pensioners are living in poverty.
- c) Accessing necessities is complicated for older people if they cannot leave the home, especially given the lack of availability of online deliveries.
- d) The Coronavirus Act 2020 'relaxes' hard-won standards in the Care Act 2004, to the detriment of many older people receiving social care.

- e) Care homes present serious risk of exposure and deaths especially given staff shortages. Social care staff are underpaid, working precarious contracts without the necessary PPE to keep themselves and older people safe.

111. Key challenges for lone parents

- a) Women are the majority of single parents (90%) and nearly half are living in poverty (45%). Lone parents are more likely to rely on social security and struggle with housing costs.
- b) For lone parents, having children at home whilst also trying to go to work or work from home presents an impossible challenge. Lone parents are reliant on formal and informal childcare, which has been made impossible by social distancing.
- c) If lone parents lose earnings or jobs or need to claim SSP, they may struggle to feed and house their children, as they are often dependent on one income.
- d) If lone parents become unwell, they risk infecting their children for lack of other support networks.

20 April 2020

Please note that this submission was up to date at the time of writing, but the situation is changing constantly and may not reflect recent policy amendments. It builds on the Women's Budget Group full report: ['Crises Collide: Women and Covid-19.'](#)

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 Women's Budget Group