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COVID-19 Lockdown and a Surge in Women Unpaid Care Work in Nigeria: Corollary for Sustainable Development Goals

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Abstract

The actualization of gender equality is central to the attainment of the Sustainable Development Goals (SDGs). This will be unachievable if no proactive measures are taken on the extent of women and girls' involvement in unpaid care and domestic chores. Target 5.4 of the SDG delineated the need to recognize and value unpaid care and domestic work through the provision of public services, infrastructures and social protection policies as well as the promotion of shared responsibility within the household and the family as nationally appropriate. An online google questionnaire was used to collect data on the enormity of unpaid care work particularly during the COVID-19 lockdown among women of reproductive age (15-49 years). Data were analysed using univariate and bivariate analytical methods. The results revealed that almost all women of reproductive age (97.6%) in Nigeria are engaged in the enormous task of unpaid care which they reported increased during the COVID-19 lockdown (93.8%) without any form of commensurate remuneration by the government. Cultural norms remained the most significant reason (93.8%) why women and girls are main players in unpaid care and domestic work. Policy to address unpaid care work and women and girls' representation in decision-making processes is recommended.

Keywords: Gender equality, unpaid care-work, COVID-19 lockdown, Nigeria, SDGs

Introduction

Care, as defined by Maestre & Thorpe (2016), refers to activities that serve people in their well-being, provided by households, communities, the market and government through a combination of paid and unpaid activities. Unpaid care work, on the other hand, is defined as work provided without a monetary

reward to unpaid carers (International Labour Organization [ILO], 2018). It is a non-market, unpaid work carried out in households primarily by women but also to varying degrees by girls, men and boys which includes both direct (care of persons) and indirect care such as cooking, cleaning, fetching water and fuel (Organization for Economic Cooperation and Development [OECD] (2020). These activities are recognised as work but typically not included in the system of national accounts and not captured by the Gross Domestic Product (GDP) (ILO, 2009). Unpaid care work contributes substantially to countries' economies as well as individual and social wellbeing but has not been accorded the desired importance to be recognized in decision-making processes especially in the low-and-middle-income countries including Nigeria (ILO, 2019). The Institute of Development Studies, ActionAids & OXFAM (2015) described unpaid work as an important aspect of the economy because it sustains the smooth running of all human activities, primarily provided by women and paramount to good and healthy living especially for children and has long-term positive effect on well-being and development.

Ahairwe & Bilal (2020) related that though countries of the world have recorded great improvement to different levels in the achievement of gender equality drives after the declaration of Beijing of 1995, no country, however, has been able to achieve gender equality absolutely. A major setback in achieving gender equality is the overarching burden on women through unpaid care work (ActionAids, 2013). Reporting in 2019, the ILO explained that there is no country where women and men share equally the task of unpaid care work and this has often resulted in constant time poverty which constrains their participation in the labour market. Thus, women performed 76.2% of the total amount of unpaid care work, which is 3.2 times more than men (ILO, 2019); and this has increased geometrically due to COVID-19 lockdown (The World Bank, 2020).

According to the Organization for Economic Cooperation and Development (2020), even though women are not a homogenous group, they face intersecting inequalities that may restrict their ability to benefit from certain policy programme interventions. In the same vein, Engender (2020) enunciated that unpaid care and reproductive labour are often marginal within policy making processes. For instance, across all income groups, unpaid care work is the most widely reported reason given for women's inactivity in middle-income countries with 46.7% of women citing it relative to only 6.3% of men (ILO, 2018). In 2018, 606 million women of working age declared themselves as unavailable for employment or not seeking a job due to their involvement in unpaid care, while only 41 million men were inactive for the same purpose (ILO, 2018). Ferrant, Pesando & Nowacka (2014) relayed that unpaid care work is usually not accounted for because of a common misconception that unlike standard market measures, it is rather difficult to measure correctly the economic value of unpaid care work. Neglecting unpaid care work leads to incorrect inferences about levels and changes in individual well-being and the value of time, which in turn limits policy effectiveness

The practice of unpaid care work has maintained statuesque especially in Africa and particularly in Nigeria because it is supported by cultural norms of the society (Gender & Development Network, 2017). For instance, the PrincewaterhouseCoopers (2020) reported that Nigeria has maintained the 100th-130th position out of 153 countries in gender equality for more than a decade. Gender social norms view unpaid care works as a female perquisite; women across different regions, socio-economic classes and cultures spend an important part of their day on meeting the expectations of their domestic and reproductive roles, in addition to their paid activities, thus, creating the double burden of work for women (Ferrant, Pesando & Nowacka, 2014). Abdourahman (2010) reported that women's time does not belong to them particularly in Africa where patriarchal practices are still very prevalent. This practice has continued to allow men to control women's time and labour. Holmes (2007) maintained that women unpaid care work is structured around profit-making pursuit in capitalism and is therefore a kind of oppression of the woman fold.

The lockdown as an aftermath of COVID-19 ensued severe consequences on family life and particularly affected women as care givers more intensely. The burden of the pandemic on women and girls is manifested in various forms particularly in the area of unpaid care work (United Nations IANWGE, 2020). The United Nations (2020) reported that the pandemic excavated pre-existing inequalities, exposing vulnerabilities in social, political and economic systems which in turn intensified the impacts of the pandemic. The report also added that across everywhere, from health to the economy, security to social protection the impact of COVID-19 is exacerbated for women and girls simply by virtue of sex. The United Nation Development Programme [UNDP] (2020) reported that during the COVID-19 lockdown, even though fathers were also readily at home and some assisted in care work, the burden of unpaid care work, doubled for women regardless of employment and working conditions. Unpaid care work increased with children out-of-school, heightened care needs of older persons and overwhelmed health services. Briggs, Haberland, Desai, De Hoop & Ngo (2020) enunciated that COVID-19 disrupted lives, networks and institutions across social, economic and health dimensions around the whole world. Their study revealed that women and girls in Bangladesh and Kenya have unequal and increased household responsibilities during the COVID-19 pandemic lockdown. The World Bank Group (2020) reported that the disruption of services with school closures increased the burden of care related tasks which directly impacted women and the girl child more.

Engender (2020) attested that though the displacement of children from school was burdensome to all household members, women were however more significantly affected as they are the original care giver, a role assigned by the society. The United Nations Women and UNDP (2020) asserted that in a study across the SSA region, in response to COVID-19 measures, 29 out of 46 countries and territories have taken a total of 113 gender-sensitive measures, much more attention was however given to violence against women, followed

by women's economic security while the lowest attention was given to unpaid care work. The report also added that measures to support unpaid care work in the COVID-19 response included the provision of paid family leaves, cash-for-care-programmes, flexible and work-time arrangements or continued provision of childcare services including for essential workers which were extremely scarce in SSA accounting for only about 2% of the total 189 social protection and labour markets measures in the region. Out of the 42 countries and territories analysed, Nigeria and five other countries have not taken any measure at all to address unpaid care work. The World Bank (2020) opined that the disruption and closure of schools during the COVID-19 lockdown resulted in permanent loss of jobs for some women because of their multiple care roles.

The literature reviewed, does not only reiterate the massiveness of unpaid care work but also confirmed that unpaid care activities increased during the COVID-19 lockdown. This is a direct affront to the achievement of SGD 5, particularly Target 4, which accentuated the need to recognize and value unpaid care and domestic work through the provision of public services, infrastructures and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate. Undermining the grave consequences of unpaid care work that limits women who are as many as men in Nigeria population will continue to devalue the contribution of women to economic productivity in the country. This research work is therefore seeking to validate the massiveness of unpaid care work among women in Nigeria and also to determine the extent to which it affected them particularly during the COVID-19 lockdown in order to proffer usable and practicable solution to the situation.

Theoretical framework

Karl Marx Conflict theory and Radical Feminism were adopted as an underlining bedrock on which unpaid care and domestic work flourishes in the society. It is purely a case of gender inequality as exemplified in sociology. Societies are patterned and structured mostly after a given order which presupposes an individual position in such society. Karl Marx (1818-1883) explains that the society is a stage on which struggle for power and dominance thrives in the custody of a few men of ruling class. Armstrong (2020) describes Marx's capitalism as a situation where one class wields wealth and authority because they own the means of production. Friedrich Engels (1820-1895) who was Marx's collaborator, applied Marx's theoretical assumption extensively on relationship patterns in the family including gender roles and socialization. He proposed that the master-slave or exploiter-exploited relationship occurring in broader society between the bourgeoisie and the proletariat are translated into the household. With the emergence of private property and the beginning of capitalistic institutions, Engels argued that a woman's domestic labour is not counted beside her being acquired as one of the necessities meeting the needs

of men (Holmes, 2007). The household is therefore an autocratic entity where the supremacy of male dominance is not questioned.

Furthermore, the theory of radical feminism, uses conflict approach to describe the maintenance of gender roles and inequalities. It emphasizes the role of the family in sustaining the domination of men over women in patriarchal societies. Explaining the theory, Sanday (2004) emphasized that “the key to patriarchy is the dominant gender ideology” which assumes sex differences between males and females according to their character, behaviour and ability; which in turn justifies the basis for division of social roles and access to rewards, position and privileges. Besides, men’s contributions were regarded as more valuable than those of women. Similarly, Vukoičić (2017) stressed that, gender roles were based on a system of rules and values which makes the subordinate populations (women) to believe in the ‘naturalness’ and ‘natural tradition’ of their subordinate position and traditional roles. In the lens of this theory, women’s unpaid care work could be attributed to the patriarchal nature of some societies.

Incumbent in the norms and cultural values exhibited in patriarchal societies including Nigeria, is the sustenance of structures patterned through gender socialization whereby women and girls are saddled with the responsibility of unpaid care and domestic work (Adebola, 2021). Factors responsible for this order are presented as unquestionable since they are seen as keeping the society running. As such, unpaid care and domestic work has not been recognized as a major aspect of the economy that needs attention. The Marxist theory and Radical feminism, therefore, provide a foundation on which such enormous task is premised.

Data and methods

Study design

The study used quantitative research techniques to inquire about the level of unpaid care and domestic work among women of reproductive age (15-49 years). This age group is imperative to this study because women in this age-group are at the prime of unpaid care and domestic work which is mostly being attached to reproductive activities. Studies have also revealed that women in this age brackets are the most affected by the tasking unpaid care works. An online google questionnaire form was designed and shared on the internet through WhatsApp, Facebook and Telegram. The questionnaire forms were however restricted to respondents who reside in Nigeria only.

Study respondents and data collection

The study respondents comprised women of reproductive age (15-49 years) who willingly responded to an online structured questionnaire that was developed after reviewing related studies. The questionnaire was made available through some social media platforms including WhatsApp, Facebook and Telegram for three months (November, 2020 - January, 2021). Questions were asked on the general knowledge respondents have on unpaid care and

domestic works and their level of involvement especially during the COVID-19 lockdown in Nigeria. The questionnaire was sectionalized into 5 different segments to make the research more encompassing and robust. Reminders were sent weekly to all the platforms for more respondents to attend to it and at collation, a total of 249 completed questionnaires were retrieved online from respondents.

Limitations of the study

In the course of the study, we encountered some challenges and limitation particularly with the remoteness of the subject being investigated. The obvious was that respondents were not familiar with the subject matter; we have to keep writing messages to enlighten them so as to enable them fill the questionnaires. This was a major reason we have low response despite the elongated period the questionnaire forms were online. Another major limitation of the study is the non-capturing of a large chunk of potential respondents caused by the social media platform of data collection. These platforms even though universal may not be accessible to poor, illiterate and rural women among which this problem of unpaid care and domestic work is more prevalent.

Data analysis

The data for this study were analysed at two levels, namely; univariate and bivariate. At the univariate level, distribution of the demographic factors, rate of unpaid work and health implications on the respondents is shown using descriptive statistics such as frequencies, percentages and charts. At the bivariate level, the Pearson Chi-square test is used to measure the association between variables, using p-value <0.05 as the criterion for significance. All data processing and analysis were carried out using the IBM Statistical Package for Service Solutions (SPSS) version 25.

Ethical considerations

Ethical consideration was considered and built into the instrument. Being an online form, and the respondents were assured of utmost confidentiality and the purpose for the study well explained. Transparency was ensured while recruiting respondents and participants' rights to willingly respond or otherwise was allowed. The questionnaire was strategically prepared to maintain anonymity, confidentiality, and data protection tactics were carefully considered. The research also honoured participants' request to delete their records, use password protected computer directory to store the data, removed all identifiers before data analysis, as well as ensuring that no unauthorized person is able to access the data.

Results

The result indicated that almost all (97.6%) respondents were engaged in unpaid care and domestic work in the past six month. While few of the respondents attested to have received assistance in their chores by more than

one in five (22.2%) house helps, more than 80% however, indicated that while their spouses have been of immense help at different levels. The distribution of those involved in unpaid work by age group revealed that women aged 35-39 years had the highest percentage (34.6%) while women age 40-44 years have the least percentage of 8.6% (See Table 1). Most of the respondents (97.5%) have tertiary education and more than two-thirds (67.9%) of them are gainfully employed. Among the States of the Federation, the highest response rate was recorded from Lagos State followed by Ondo State; it is instructive that many states are not represented in the sample. Most of the respondents (93.8%) are married with more than two-fifths (40.7%) entering into marriage within the last five years, and almost three-fifths (59.3%) having one to two children.

Table 1: Percentage distribution of socio-demographic characteristics of respondents

	Frequency	Percent
Age Group		
25-29 years	33	13.6
30-34 years	57	23.5
35-39 years	84	34.6
40-44 years	21	8.6
45-49 years	48	19.8
Level of education		
Primary education	3	1.2
Secondary education	3	1.2
Tertiary education	237	97.5
Employment Status		
Unemployed	78	32.1
Employed	165	67.9
State of residence		
Abia	3	1.2
Akwa Ibom	6	2.5
Cross River	6	2.5
Ekiti	6	2.5
FCT	15	6.2
Kaduna	6	2.5
Katsina	3	1.2
Kogi	18	7.4
Kwara	9	3.7
Lagos	99	40.7
Ogun	3	1.2
Ondo	54	22.2
Osun	3	1.2
Oyo	12	4.9
Marital Status		
Single Parent	15	6.2
Married	228	93.8
Years of Marriage		
1-5 years	99	40.7
6-10 years	51	21.0
11-15 years	51	21.0
16-20 years	33	13.6
21 years and above	9	3.7
Number of children		
no child	21	8.6
1-2 children	144	59.3
3-5 children	78	32.1
Age of last child		
< 1-5 years	138	62.2
6-10 years	63	28.4
11-15 years	15	6.8
16-20 years	6	2.7

The average hours spent by the women on unpaid care services are presented in Figure 1. More than one-third (34.6%) of the women spent an average of 3-4 hours on daily basis, 30.9% expended an average of 5-6 hours daily, while 11.1% spent average of 7-8 hours. This indicates an enormous time use on a daily basis by these women which reduces or totally prohibits them from engaging in economic productive activities and leisure thereby increasing their time-poverty and fatigue.

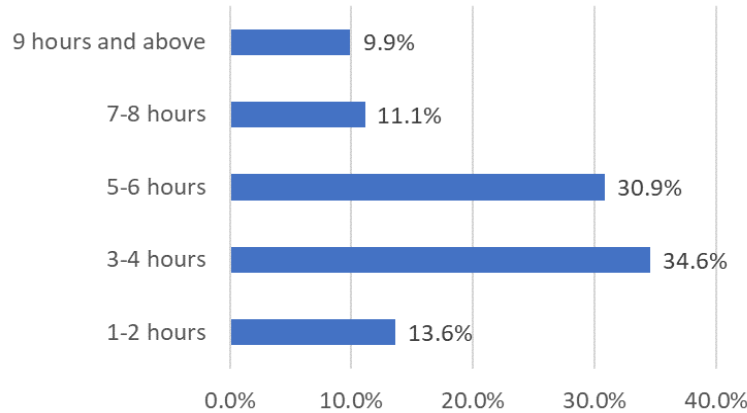


Figure 2: Hours spent on paid work

Table 2 shows the cross-tabulation of employment status against out of job/business during COVID-19 lockdown. This reflects a significant relationship between the employment status and out of job during COVID using 5% level of significance. More than one-third (36.4%) of the women who were gainfully employed before COVID lost their job during the lockdown. This situation is crucial to their overall well-being because being out of job leads to poverty, redundancy which has implication for their mental health and much more an increase in unpaid care activities. Opinion was also sampled on government intervention on palliative or remuneration of any kind. Only 18% women avowed to any form of palliative during the COVID-19 lockdown but no respondents got any form of remuneration.

Table 2: Distribution of women by employment status and being out of job/business during COVID lockdown

		Were you out of job/business during the COVID-19 lockdown?			
		No	Yes	Total	p-value
Employment Status	Unemployed	24 (30.8%)	54 (69.2%)	78 (32.1%)	<.001
	Employed	105 (63.6%)	60 (36.4%)	165 (67.9%)	
	Total	129 (53.1%)	114 (46.9%)	243 (100.0%)	

Respondents were asked if there is any significant increase in their engagement in unpaid care work and domestic chores during the COVID-19 lockdown, and 93.8% of the women answered in the affirmative. More so, opinions were sought to know if they have grown-up children too that can help with some of the works, but their answers indicated that less than quarter of them did (34.6%). When their opinions were sought on gender difference in unpaid care work involvement, the results revealed that women/girls are most likely to be involved than men/boys. The reasons advanced for high women/girls involvement in unpaid work are; “cultural norms” (77.5%), “socialisation” (13.8%) and “men are providers while women should work are expected to work and take care of the home front.

The research also sought to know possible health implications of unpaid care and domestic work, more than 80% of the women reported that they suffer from stress and fatigue, while well above 70% suffer from general body pains, and almost half of the respondents admitted to feeling constant headaches. Meanwhile, less than one-quarter of them as well indicated a feeling of depression. The results as identified here points to the fact that many health complications reported among women originates from burden of combined assignments of everyday unavoidable domestic chores and reproductive roles.

Discussion

The lockdown and school closures consequent upon the COVID-19 outbreak notably increased the workload of childcare, and general household chores on women in Nigeria. The findings from this study revealed that unpaid care work is generally seen as women’s duty; almost all the respondents assented to have been involved in household chores and family care with or without help. Respondents agreed that cultural norms prescribed women’s involvement in unpaid care work. This finding corroborates earlier research confirming the practice as more of a norm in the society (Ferrant, Pesando & Nowacka, 2014, Adebola, 2021). The Nigerian culture of patriarchy and masculinity coupled with the stereotype that household chores are women’s responsibility, with men as bread winners, may have exacerbated this situation (Graham, Hirai & Kim, 2016).

The increase in the activities of women’s unpaid work during the lockdown and the report of job/business losses indicated lack of economic empowerment and increased vulnerability. This consequently may increase women’s economic insecurity and domestic or care burden across their lives. The majority of the women reported health challenges such as stress, body pains and depression, among others, which may be attributed to long hours of labour without assistance. This finding gives credence to a report by Amnesty International (2020). The report indicated that during the 2014-16 Ebola outbreak, the 2002-03 SARS epidemic, and Nipah virus in Kerala (India), large numbers of girls and women faced critical health challenges including infection due to care roles; while women in Liberia experienced high psychological trauma as sole care givers. Furthermore, the finding also

revealed that the Nigeria government is yet to come to term with the crucial implication of unpaid care work because no woman was rewarded and those who got any form of palliative were very few.

This highlights a fundamental contradiction in the political economy and socio-economic development as the least value is placed on work that is most critical for the survival of the economy of the country. Admittedly, unpaid labour, often limits women's ability to pursue economic goals outside of the home and this has grave consequences on the economy and socio-economic development. This is substantiated by the findings of Atim & Awodola (2020) who reported the multi-faceted negative consequences of women unpaid care work as an aftermath of policy ineffectiveness.

Conclusion and Policy Implication

Nigeria, even though blessed with human resources, has not been able to harness and utilise such because women and girls have not been given their rightful place in economic productive activities and inequalities have continued to stare the female folk in the face. It is important to note that women family roles and responsibilities are major clogs in the wheel of progress in their attainment of education, getting quality health and wellbeing, empowerment for jobs and decision making. The care for the household, which is time consuming also saps their physical and mental energy, and women remain burdened with underutilised potentials. The unpaid activities, as we have seen in this research, increased during the COVID-19 lockdown without due access to any form of remunerations and only a handful of the women got some palliatives. All these put together will hinder the attainment of the SDGs in Nigeria by 2030. There is, therefore, the need for the government to be more proactive in her approach to ameliorate gender inequality in unpaid care and domestic work through programmes and policies. The best approach proffered is as indicated in the SDG, which emphasizes the recognition and value of unpaid care and domestic chores. This can only be attained through public services and infrastructural development that is gender equality sensitive. It is also recommended that social protection policies be vigorously pursued in order to ensure that the right of women to work is not jeopardised. Household responsibilities should be shared more evenly among family members and decision-making powers should be considered imperative for women as well. When all of these recommendations are effected, it becomes a lot easier for women and girls to improve themselves and this will contribute to national economic growth and general wellbeing. The political will is most essential if any sustainable change is expected in the status quo of unpaid care and domestic work among women because it is thriving on the norms of the society.

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