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Protecting Women's Livelihoods in Times of Pandemic: Temporary Basic Income and the Road to Gender Equality

by María Montoya-Aguirre, Eduardo Ortiz-Juarez and Aroa Santiago¹

Women face persistent structural challenges to decent jobs and economic independence; their livelihoods are even more vulnerable under the economic impacts of the COVID-19 pandemic. This vulnerability is due in part to a system of gender inequality that imposes unpaid care and domestic work on women through socially constructed gender norms, and that deprives them of effective universal protection systems. How to cushion the adverse effects during the emergency while paving the way for structural transformation? This brief examines the most at-risk elements of women's income-generation capacity, presents the possibilities and estimated costs of a Temporary Basic Income (TBI) for women's economic security across the developing world, and discusses some routes towards long-term commitments of economic protection and gender equality.

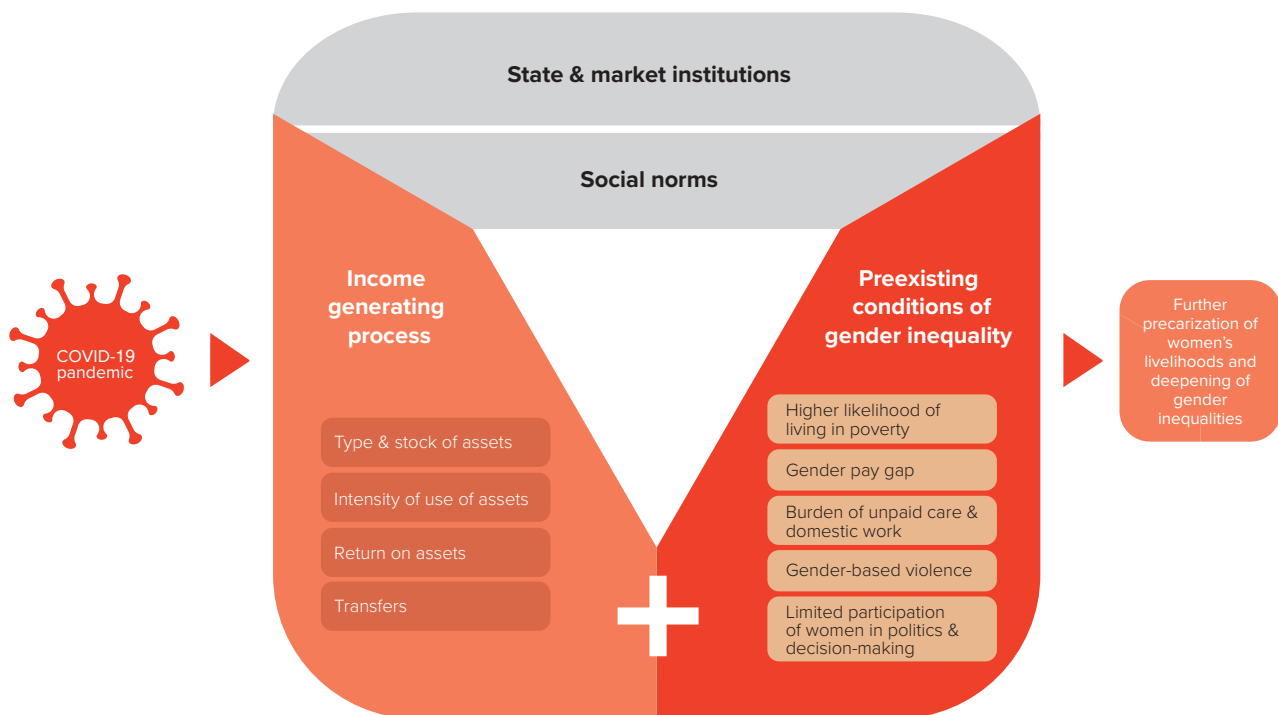
Women's capacity to generate income can be understood as the result of the type and stock of income-producing assets they own (e.g., human capital as a set encompassing education, skills acquired, and experience), the intensity of use of those assets to generate income (e.g., work for profit in the labour market), and the returns on those assets (e.g., earnings)² (Figure 1). This income-generating process may be complemented by transfers received, both private (e.g., remittances or gifts) or public (e.g., cash assistance), and can be affected by at least three non-mutually exclusive factors: state and market

institutions; social norms, particularly responsive to individual circumstances (e.g., sex) and that might translate into exclusion (e.g., barriers to labour participation due to gender discrimination); and the realization of shocks (e.g., loss of employment).

Let's consider human capital as the relevant asset at play in the income-generating function.

Before the pandemic, at the global level the first two factors (institutions and social norms) were persistently putting women at a disadvantage with respect to men, especially in the intensity of the use of human capital through paid employment.

Figure 1: A representation of women's capacity to generate income in the context of COVID-19



The pandemic has hit women's livelihoods especially hard

Women's earnings have been persistently lagging behind men's despite a narrowing of human capital gaps over the recent years.³ Globally, the median share of women aged 25 or older with at least a completed short-cycle tertiary education is higher (21.2 percent) than the corresponding share of men (19.5 percent), whereas the weighted average gross enrollment ratio in tertiary education is 41.7 percent among women and 36.2 percent among men.⁴ Yet, the gender wage gap reached 22 percent on average before the pandemic, ranging from 21-25 percent in middle- and high-income countries.⁵

Critical drivers of this unequal outcome are pervasive social norms that place a disproportionate burden of unpaid work on women, the lack of opportunities for them to reconcile unpaid work with paid work, the vertical and horizontal gender segregation in the labour market where women are overly represented in low-paid occupations, and power imbalances within the household.

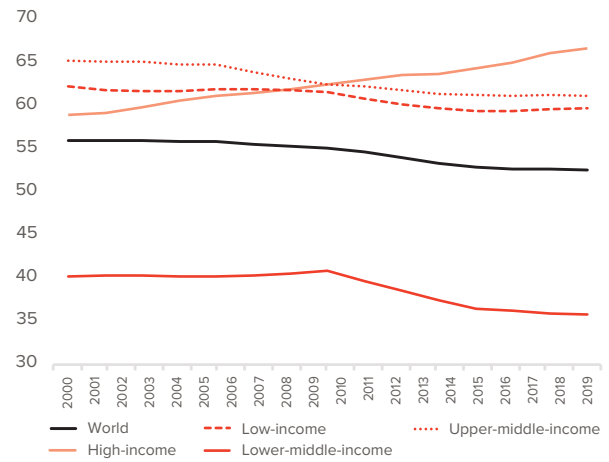
While care and domestic work are essential activities for both human subsistence and human capital accumulation, their neglect as critical contributors to the economy and their unequal

distribution between women and men largely explains women's unfavorable position in the workforce. Worldwide, women do about 12.5 billion hours of unpaid work every day,⁶ which amounts to almost US\$11 trillion a year.⁷ On average women spend 2.4 more hours per day than men on unpaid care and domestic work; among people who participate in the paid economy, women spend an average of 4 hours more per day than men on paid and unpaid work combined.⁸

For women engaged in the labour market, an increase in care responsibilities such as tending to children or sick relatives is likely to weaken their capacity to generate income, because they have fewer hours for paid work. Indeed, women's participation in the labour force had already been on the decline in developing countries (Figure 2), with unpaid care work being the main reason given by women for moving out of the labour force, even though the majority would prefer to work for pay.⁹ Women thus persistently face a potential loss of earnings¹⁰ — of up to 51 percent, according to some estimates¹¹ — because they have or care for children for no pay. Intrahousehold power imbalances and the prevalence of certain social norms limit women's livelihood capacities and decision-making.

Beyond complex gendered norms, some of the economic vulnerability imposed on women also comes from policy and political decisions that have persistently deprived them of compensation in the form of equal pay, paid maternity leave, universal health, unemployment, and care benefits. The latter are critical as about seven in ten female workers worldwide are in the informal economy with little or none of these benefits,¹² and those with care responsibilities in particular are more likely to engage in self-employment, domestic work, and occupations that often expose them to health hazards, precarious working conditions, and exploitation.¹³ Given this precarization of female empowerment and labour opportunities, it is not surprising that women are 25 percent more likely than men to live in extreme poverty.¹⁴

Figure 2: Female labour force participation rate, 1991-2019 (% of women aged 15-64)



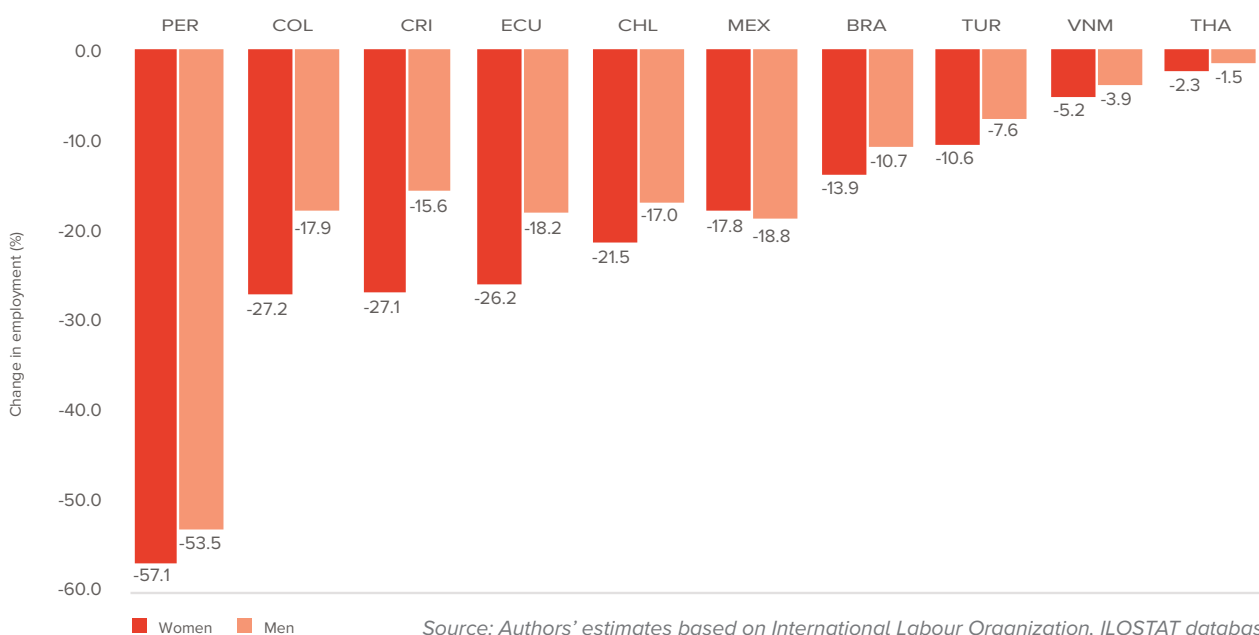
Source: International Labour Organization, ILOSTAT database.

Women have been left in a precarious position

The advent of the shock of COVID-19, the third factor affecting women’s income generation, has had disproportionate economic impacts on women that have only intensified the preexisting disadvantages —and could likely reverse more than 20 years of efforts in support of gender equality.¹⁵ In the short term, those impacts have landed

particularly hard on paid employment and earnings. Available data for some Latin American countries reveals that women’s employment in the second quarter of 2020 dropped by more than 13 percent in comparison to the same period in 2019, and that the effect has been between 10 and 70 percent higher in comparison to the corresponding decline among male workers¹⁶ (Figure 3).

Figure 3: Change in employment in selected countries between the second quarters of 2019 and 2020



Source: Authors’ estimates based on International Labour Organization, ILOSTAT database.

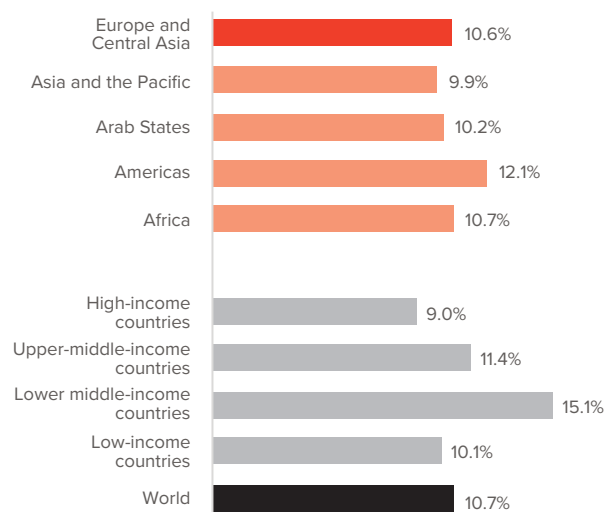
This disproportionate result is related partly to the closure of some non-essential sectors of the economy to contain the spread of the virus, namely hospitality, wholesale and retail, administrative activities, and paid domestic work. These sectors include a significant share of female employment: about 40 percent at the global level, ranging from 45-49 percent in South and East Asia and South America to 59 percent in Central America. Just in paid domestic work, where eight in ten workers are women, around 70 percent globally were at high risk of losing their jobs at the beginning of June 2020.¹⁷

The immediate consequence of lowered employment is the total or partial loss of earnings. Total labour incomes are estimated to have decreased by 10.7 percent on average during the first three quarters of 2020, relative to the same period in 2019, and this loss is expected to be 11-15 percent higher among middle-income countries (Figure 4).¹⁸ Although gender-disaggregated data are not yet available, these figures provide a lower bound of the potential effects on women's livelihoods. These effects can be expected to be both drastic (as women's incomes were already lower than men's, and safety nets were absent) and prolonged (as the sudden drop of incomes often persists with a low recovery well beyond the end of the crisis).¹⁹ Recent estimates by UNDP and UN Women suggest that the interplay of these factors could push nearly 50 million women into extreme poverty, thus widening the gap between men and women who live in poverty, while further impoverishing those already living in those conditions.²⁰

Another part of the story behind the disproportionate employment effects on women is that the pandemic and the responses to it are substantially driving up the demand for care. The closure of daycare centers and schools and the need to care for household members with preexisting health risk factors is likely shifting work from the paid economy not only to unemployment, but also to the unpaid economy — thus driving female workers completely out of the labour force and placing them in the most difficult circumstances.²¹ This is especially concerning among single mothers who cannot work from home.

In developing countries, women face a triple threat: a digital divide, oppressive gender norms, and a lack of protection systems. In most developing countries, the gender digital divide makes it harder for self-employed and entrepreneur women to adapt to the new circumstances. Also in such

Figure 4: Share of labour income lost due to working-hour losses; first three quarters of 2020



Source: International Labour Organization Nowcasting model.

countries, childcare systems are not universally accessible, and gender norms assigning women the role of the main caregiver prevail even if they have not been pushed to involuntary unemployment. UNDP's social norms report shows that half of men globally consider that in times of crisis and scarcity jobs should be prioritized for men over women,²² whereas evidence from previous epidemics like Ebola and Zika suggests that women and girls take the bulk of unpaid care work when formal protection systems are lacking.²³

Looking at the longer term, the crisis is likely to also hit hard on the first element of women's capacity to generate income: the accumulation of human capital. There is reason to expect persisting effects in the next generation of women due to the unprecedented disruption of girls' education. Moreover, the loss of household income could have long-lasting consequences for children's health and cognitive development through at least two channels: poor nutrition as a result of lowered quantity and quality of food, and increased stress levels within the household as a result of worries about livelihoods and the increasing burden of care.²⁴ This debilitation of human-capital accumulation could put tomorrow's women at greater risk of limited economic opportunities, thus prolonging some of the most pernicious outcomes, including adolescent pregnancy and a deteriorated bargaining power within the household, which can also be associated with domestic violence.

How to mitigate the immediate adverse effects on women's livelihoods?

The crisis is bringing to the fore the urgency of a committed discussion on social, institutional, and labour market reforms for the unambiguous and permanent improvement of women's income-generating capacity in the long term. Yet, mitigating the immediate economic effects of the pandemic on women's livelihoods requires a decisive response.

A recent UNDP report proposed the roll-out of a shock-resistant, unconditional Temporary Basic Income (TBI) to benefit up to 2.8 billion economically vulnerable people across developing countries.²⁵ As these countries are likely operating under limited fiscal capacity and prioritization, a special TBI for women may emerge as a paramount policy instrument that recognizes the disproportionate effect of the crisis on a group that faces persistent and cumulative vulnerabilities across several dimensions. Beyond supporting women in securing their basic needs and compensating for their job and income losses, such an instrument might help boost women's freedom of spending and economic independence, as well as balance the control of economic resources within the household. Hence, **a TBI for women is an emergency measure of affirmative action** that could start paving the road towards a public good that the whole society can benefit from: gender equality.

Crucially, a TBI for women is not a substitute but an urgent complement to the response policies already in place. This is critical as **most of the response to the crisis has not been designed to be gender-sensitive**. According to the COVID-19 Global Gender Response Tracker by UNDP and UN Women, only one in ten countries and territories have policies addressing women's economic security needs, just 8 percent of the social protection and labour market responses address unpaid care, and only 10 percent of the fiscal measures are channeling resources to female-dominated sectors³⁰ — and the type of policy responses and priorities may be **driven by preexisting patterns of exclusion of women in decision-making**.

The proposed TBI focuses on working-age women, aged 15-64, in the developing world and considers a monthly transfer that is homogeneous within a given country but varies across countries according to the cost of living. The amount of the TBI is equivalent to 50 percent of the income of the typical citizen in each country and would ideally reflect a minimum standard of needs that is relative to each country's stage of development. Whatever the case, the TBI is set so that it cannot go lower than the absolute global standard of extreme poverty of \$1.90 a day.³¹

Box 1: Would a Temporary Basic Income (TBI) reach the intended recipients?

Critical conditions for TBI to contribute to women's economic security and independence is that the scheme is **provided at the individual level** and not be subject to behavior and spending conditions. While specific fiscal and political implementation challenges are discussed at some length in UNDP's TBI report and need to be addressed on a country-by-country basis,²⁶ for women to receive the transfer, they also **need to have bank or mobile money accounts**, which is still not a reality for 35 percent of women worldwide.²⁷ Hence, a TBI may need to be tied to initiatives to improve financial inclusion to work.

What to do if public authorities cannot reach some women or do not even have them in their records as existing? In some cases, alternative solutions such as **partnering with local social networks** that have greater proximity to women in remote areas or informal settlements may be necessary to fill in for an absent state.²⁸ Additional efforts for establishing **functioning civil registration systems**, especially birth registration, would be critical for women to access TBI benefits — and for citizens in general to exert their rights and have access to social protection services, among other services.²⁹ Once registered, **transparent administration with accountability mechanisms** is essential.

All these elements may facilitate transfer payments sent directly to women, thus ideally providing them with economic support and independence. The question of whether they would control their own bank or mobile accounts remains open. Depending on household dynamics and power relations, some women may not have full control over their own resources if **pervasive gender norms** are not **disrupted**.

The overall cost of the TBI for working-age women is assessed under three scenarios of coverage depending on the typical thresholds used to assess each country's living standard:

1. Those living on less than the daily poverty line: \$1.90 among low-income countries, and \$3.20 and \$5.50 among lower-middle- and upper-middle-income countries, respectively.³²
2. Those living on less than the daily vulnerability line: estimated at \$5.50³³ and \$13³⁴ in middle-income countries where poverty is assessed, respectively, at \$3.20 and \$5.50 a day, and assumed at \$3.20 for low-income countries where no estimates of a vulnerability line are known.
3. Universal coverage.

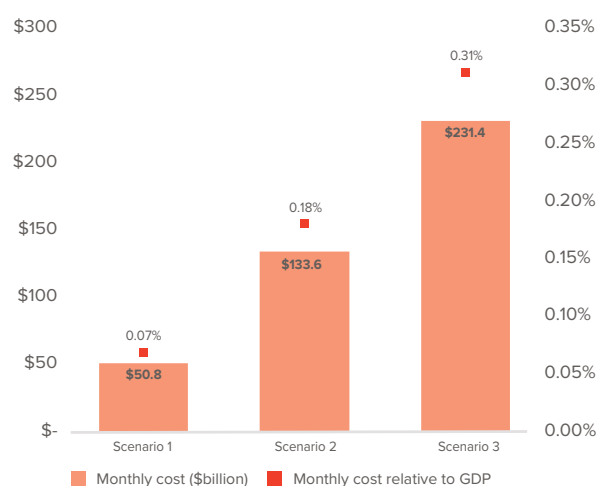
Using pre-crisis data for 132 developing countries,³⁵ the total coverage for working-age women and monthly cost (Figure 5 and Table 1) of the TBI for each scenario is as follows:

- For 613.2 million working-age women with incomes below the poverty lines, the TBI amounts to PPP\$51 billion a month, or 0.07 percent of developing countries' GDP.
- For 1.32 billion working-age women living under the vulnerability lines, the monthly cost of the TBI reaches almost PPP\$134 billion, or 0.18 percent of the GDP.
- For all 2.03 billion working-age women across the developing world, the TBI costs around PPP\$231 billion a month, or 0.31 percent of the GDP.

In East Asia and the Pacific, Europe and Central Asia, Latin America and the Caribbean, and the Middle East and North Africa, the monthly cost as a share of each region's GDP could amount to less than 0.07 percent for the first coverage scenario and it could range from 0.10 to 0.20 percent for

the second scenario. Naturally, the costs tend to be particularly large for populous low-income countries, such as those concentrated in South Asia and sub-Saharan Africa, where the monthly cost could reach 0.14 to 0.21 percent in the first scenario, and 0.25 to 0.31 percent in the second. As for the scenario of universal coverage of working-age women, the monthly cost could range from 0.30 to 0.40 percent of the GDP across the six regions. Considering a time frame of six months of benefits, given the magnitude and duration of the shock on women's livelihoods, the total cost of a TBI under the two largest coverage scenarios could amount, respectively, to PPP\$802 billion and PPP\$1.39 trillion, or 1.1 to 1.9 percent of the developing world's GDP.

Figure 5: Monthly costs of a TBI for working-age women



Source: Authors' estimates based on World Bank's PovcalNet and IMF's World Economic Outlook Database for 132 developing countries' GDP.
Notes: Monthly amounts are expressed in international dollars at 2011 PPP exchange rates.

Table 1: Monthly costs of a TBI for working age women, by regions and income groups

	Scenario 1			Scenario 2			Scenario 3		
	\$billion	% GDP	Coverage	\$billion	% GDP	Coverage	\$billion	% GDP	Coverage
Developing countries (132)	\$ 50.8	0.07%	613.2	\$ 133.6	0.18%	1322.4	\$ 231.4	0.31%	2029.7
Regions									
East Asia and Pacific	\$ 15.9	0.05%	122.3	\$ 56.7	0.17%	409.4	\$ 97.6	0.29%	699.8
Europe and Central Asia	\$ 1.8	0.02%	12.7	\$ 11.2	0.10%	58.3	\$ 35.2	0.32%	159.4
Latin America and the Caribbean	\$ 6.9	0.07%	47.0	\$ 19.1	0.19%	122.1	\$ 35.2	0.35%	212.8
Middle East and North Africa	\$ 2.6	0.05%	28.8	\$ 7.9	0.16%	76.3	\$ 13.5	0.28%	118.9
South Asia	\$ 14.4	0.14%	246.2	\$ 25.4	0.25%	430.6	\$ 32.6	0.32%	548.0
Sub-Saharan Africa	\$ 9.2	0.21%	156.2	\$ 13.3	0.31%	225.6	\$ 17.3	0.40%	290.7
Income groups									
Low-income	\$ 4.6	0.34%	79.0	\$ 7.4	0.55%	127.3	\$ 10.6	0.79%	181.4
Lower-middle income	\$ 22.7	0.11%	372.5	\$ 41.2	0.19%	656.9	\$ 63.5	0.30%	926.7
Upper-middle income	\$ 23.5	0.05%	161.7	\$ 85.0	0.16%	538.2	\$ 157.2	0.30%	921.6

Source: Authors' estimates based on World Bank's PovcalNet and IMF's World Economic Outlook Database for 132 developing countries' GDP.
Notes: Monthly amounts are expressed in international dollars at 2011 PPP exchange rates.

Paving the way to gender equality

A TBI for women is urgent and only fair on its own terms and could prove to be a critical vehicle for gender equality, though certainly not the only one. Long-term, sustainable gender equality is a multidimensional challenge that requires a number of structural interventions: changes in complex and rigid social norms, legislation on several fronts, institutional and fiscal reform, coordinated responses both across sectors and across different levels of government, and a clear visualization of the contribution of unpaid care and domestic work to national accounting. Some interventions would demand significant resources and coalitions that seem difficult to achieve in the current context. Nevertheless, some policies capable of yielding

significant returns along and beyond monetary emergency responses, and at a relatively low cost, seem attainable as the first building blocks of more equitable societies.

A set of policies should be aimed at recognizing the needs of all workers, men and women, to reconcile their household obligations with paid work and allow for a more even distribution of care and domestic work by institutionally acknowledging it as a shared responsibility. Such policies include guaranteed paid maternity leave, extended paternity leave and the enforcement of its take-up, and establishing flexible arrangements — such as part-time work or the provision of breastfeeding

Box 2: The long-term counterpart of TBI: The Universal Basic Income (UBI).³⁶

TBI and UBI schemes share the aim to provide a basic level of economic security on an individual and unconditional basis, though they differ in their essence. While TBI is designed to protect or compensate for some of the loss of livelihoods in times of negative shocks and crises, the UBI has the founding principles of social justice, freedom, human rights, and human dignity. That is, UBI is a cash entitlement, with an amount ideally above the poverty line set in place, and whose delivery is regular, predictable and non-withdrawable. As such, UBI intends to ensure a minimum standard of living for all human beings, thereby contributing to the reduction of poverty and to the decommodification of labour.

Both TBI and UBI may have the potential to ensure women's economic security and expand women's access to an independent source of income — though, in the case of UBI, in a more structured and stable fashion over the long run. This potential, in turn, could strengthen women's agency and economic independence, increasing the possibilities for women to escape from abusive relationships. However, while a long-term UBI might compensate for the disproportionate burden of care that falls on women, thus socializing the economic costs of this activity, the UBI could at the same time reinforce preexisting gender roles within the household if the benefits are seen as a payment for women's care provision. While UBI by itself will likely not radically transform gender norms, it can be a powerful instrument to improve the living conditions of women.

The potential roll-out of a UBI should not come at the expense of sensible and committed discussions to build comprehensive social protection systems and implement interventions to achieve gender equality. This includes policies for women's financial inclusion, closing the digital divide, the elimination of employment discrimination and other barriers that prevent women from participating in the labour market in equal conditions (including vertical/horizontal labour segregation, glass ceilings, pay gaps, and hazardous and precarious jobs), as well as deliberate efforts to disrupt gender social norms in order to redistribute care responsibilities and eliminate gender-based violence.

Combining UBI-like benefits and comprehensive social protection across developing countries should be accompanied by a serious deliberation on how such a combination can best be achieved, how much it costs, whether it is intertemporally affordable, whether the affordability issue is political, and where the economic resources should come from — e.g., transformative fiscal reforms for reducing tax avoidance and evasion.; introducing taxes on carbon and wealth, inheritance, and financial transactions; repurposing wasteful expenditures; cutting regressive subsidies; selective tax exemptions; and so on.

facilities in the workplace — that allow parents to return to the workforce shortly after having a child. Some countries have taken steps in this direction, such as the Philippines with the passing of the Expanded Breastfeeding Promotion Act in 2009, or more recently Mexico with the reform to its Social Security Law allowing men to access childcare services. In the context of the COVID-19 response, some countries have recognized the need for better work arrangements to reconcile paid work and care responsibilities by installing policies that signal a long-term commitment. For instance, Bosnia and Herzegovina and Bolivia have allowed parents to reduce work hours for COVID-19-related family care; Cape Verde, North Macedonia and Trinidad and Tobago have enabled employees with care responsibilities to perform their work remotely; and Montenegro and Cuba have set up innovative wage subsidies for carers.³⁷

Beyond reconciling paid work and family responsibilities, governments must address other sources of the gender pay gap such as horizontal and vertical segregation in the labour market. The response should include anti-discrimination laws and affirmative action initiatives. An example of a far-reaching intervention in this regard is the Equal Pay Amendment Act in New Zealand, which is designed to consider claims of systemic sex-based pay undervaluation in female-dominated occupations and is seeking to address wage gaps born out of historical pay discrimination. Moreover, this policy allows workers and unions to make discrimination claims directly to their employers, significantly lowering the obstacles to raise pay-equity allegations. These examples make clear that with the political will for appropriate gendered policy responses to some of the persistent disparities, a fairer future post-pandemic is within reach.

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34. This value was estimated for countries in Europe and Central Asia by Bussolo, M., Dávalos, M.E., Peragine, V., and Sundaram, R. (2018). *Toward a New Social Contract: Taking on Distributional Tensions in Europe and Central Asia*. Europe and Central Asia Studies. Washington, DC: World Bank. Such amount is the updated value (in 2011 PPP) of the cut-off of \$10 a day (in 2005 PPP) proposed as the dividing line between vulnerability and economic security in the context of Latin American countries by Lopez-Calva, L.F. and Ortiz-Juarez, E. (2014). "A Vulnerability Approach to the Definition of the Middle Class." *The Journal of Economic Inequality*, 12(1): 23-47.
35. The data come from the World Bank's PovcalNet tool on household surveys with extrapolations to 2018. The sample of 132 developing countries covers around 83 percent of the world's population and excludes 33 high-income, developed economies accounting for 14 percent of the world's population and 30 countries (concentrating 3 percent of the global population) for which there is no available data. The estimates are intended to provide a potential order of magnitude of the cost of a TBI for working age women. The computations use (a) the share of women with respect to each country's total population and (b) the share of working age women aged 15-64 with respect to each country's total women, both retrieved from the World Bank's World Development Indicators. The country-wide shares in (a) are assumed to replicate among the population with incomes below each poverty and vulnerability line, whereas the country-wide shares in (b) are assumed to replicate among women living below such thresholds.
36. Based on Cantillon, S. and J. Heintz (2020). "Universal Basic Income and Gender Equality: Possibilities, Pitfalls and Policy Design." Transition Series, UNDP Global Policy Network; Standing, G. (2017). *Basic Income: And How We Can Make It Happen*. London: Penguin Random House; Gray Molina and Ortiz-Juarez (2020). *Op. cit.* and UNDP and UN Women (2020) *Op. cit.*
37. See UNDP and UN Women (2020). *Op. cit.* for further examples of gender-sensitive policy responses to the pandemic.