women must be at the heart of the recovery
The coronavirus pandemic has caused widespread suffering for too many individuals and communities across the UK. We have the worst of both worlds: in addition, having the highest number of excess Covid-19 deaths, we are facing our worst ever recession, which is nearly twice the severity of comparable European nations.

We face a monumental task to rebuild our society and economy. Yet it is not enough for us to defeat this virus and to return to ‘business as usual’. When we rebuild, it must be towards a society that works for all of us, and which is free of gendered, racial and class inequalities.

It is the women of this country, and particularly women of colour, who have been disproportionately affected by 10 years of austerity. The Women’s Budget Group found that we have shouldered a shocking 86% of the burden of Tory cuts. Women are detrimentally impacted by a ‘triple whammy’ of increased reliance upon welfare benefits, our ‘traditional’ role as unpaid carers and the fact we make up most public sector workers – who have particularly suffered under Tory austerity. With cuts to spending on social security totalling £37bn a year over the last decade, we must alleviate the sharp impact of these cuts upon women and never again return to the destructive, needless logic of austerity.

Women make up 69% of low earners, a figure that has shockingly not changed since 2011. A quarter of social care work-
The coronavirus pandemic has shone a stark light on the deep and persistent structural inequalities which cut across our country. Black workers, women and disabled people have all been disproportionately affected by the health and economic crises Covid-19 has created.

Even before the Covid-19 crisis, benefit cuts and austerity had hit women the hardest. Changes to the welfare system over the past 10 years have left disabled women and women from BAME communities the worst off. And as the economic fallout of the pandemic hits, women look set to face some of the highest rates of unemployment with many being unlawfully targeted for redundancy or forced out of the workplace due to caring commitments.

Women are more likely to be feeling the economic impacts of the crisis most acutely. Younger women in particular were more likely to work in hardest hit sectors such as leisure and hospitality. Many were on low paid, zero-hours or temporary contracts, without the same rights and protections securely employed workers get. Protections such as the right to paid time off and protection from unfair dismissal. Vital during a crisis like this.

Of the UK’s 9.8 million key workers, who kept the health care system and our country moving as the pandemic hit its peak, nearly two-thirds are women. And 2.6 million of these women key workers earn less than £10 an hour. The pandemic has highlighted the endemic low pay and occupational segregation faced by many women workers, particularly those in vital front-line jobs in sectors including social care and retail.

Discrimination has left many female key workers at disproportionately high risk of exposure to Covid-19, working without properly fitting personal protective equipment (PPE) or access to PPE at all. New research by the TUC has shown one in four pregnant women have faced escalated workplace discrimination over this period, losing pay or work, with their health and safety poorly protected. There has been a particularly devastating impact on some pregnant BME women’s health. While the UK’s BME population is around 13%, BME women make up 55% of those hospitalised while pregnant with coronavirus.

Women have also faced a disproportionate burden of unpaid care during the crisis. Necessary measures to contain the spread of the coronavirus, such as the closure of schools and childcare settings to all but children of key workers meant working parents were left to juggle paid and unpaid work, with mums providing around two-thirds more childcare a day than dads. When social care services were closed, and millions were asked to shield at home, it was women who were left to fill the unpaid care gap. For too many women the impacts have been paid job loss and pay cuts.

Britain faces a looming unemployment crisis, one that trade unions saw coming. As the UK locked down, we worked closely with the government on the job retention scheme, which has propped up family livelihoods, rescued companies and saved millions of jobs.

The job retention scheme is currently due to end in October but the crisis won’t stop there for millions of working women. New research shows two in five working mums do not have the childcare they need to enable them to work. Ministers have failed action to prevent a crisis in childcare. Without sufficient childcare, the government’s drive to get everyone ‘back to the office’ will cost many women their jobs, setting gender equality back decades.

If the government wants to build back better, it must start with a care-led recovery. Investing in care has the potential to mitigate the worst impacts of this crisis, creating jobs in a vital growth area and driving up poverty pay for millions of frontline workers. There are hundreds of thousands of vacancies in health and social care which could be unlocked by a government commitment to fund providers to fill them all.

Equality must be at the core of any post-pandemic strategy to protect and create jobs. If the Prime Minister and his government continue to fail to do that, the burden will fall on working class communities, women and minoritised groups.

The country is watching: will it stand by working families, or will it walk away?
The celebrations we created each week to honour and support key workers from our doorsteps with cheers, whistles and percussive pots and pans, were both deserved and cathartic.

Now, we are continuing that campaigning spirit, ensuring that the economy and our social lives return safely, but do not return unthinkingly to the status quo ante. The pandemic has demonstrated that workers now recognised as are ‘essential’ were and are paid and respected as if they were simply disposable. That is no longer acceptable. Collective action, social solidarity and shared responsibility saw most of us through the pandemic. Those same virtues should be our guide to the world to come.

In June, Congress and our affiliated unions on both sides of the border debated and produced a new and clear alternative vision for an economy which serves society, and not the other way around. ‘No Going Back’ outlined a critique of policies pursued by administrations in Dublin, Stormont and Westminster, and made serious policy proposals for a ‘New Deal towards a Safe and Secure Future for All’, starting with addressing the fact that employers in Ireland and the UK pay less than half of their wealthy EU counterparts when it comes to taxes on social contributions. The UK’s gap is approximately £121bn each year. In a Northern Ireland context this equates to £3.5bn. The state needs to be resourced and we believe bringing employers’ contributions on labour tax up to the EU norm is not a radical idea but fair, just and timely.

We should recognise the vital role that workers in essential services played during this crisis by ending the scourge of low pay and precarious work that pervades these sectors in particular. We should no longer tolerate bogus self-employment and precarious work practices. We need to think of a welfare system which provides social security, and not punishment for being poor or sick. There should be an automatic presumption of employee status. All households should have a minimum and sufficient level of income that enables full participation in society, while all workers should be paid at least a living wage.

All business support measures should be linked to trade union access and recognition and full and active participation in national industrial relations machinery in both jurisdictions. We must vindicate the rights of workers across the island of Ireland by ensuring their voice is heard through access to collective bargaining.

Our society and community has come together during this Covid-19 crisis. We need to harness that resilience and kindness and humanity as building blocks for progress.
women and the virus in Wales

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HE health, social and economic impacts of Covid-19 are highly gendered. Key workers and those employed on insecure contracts are more likely to be women, low paid, working class and from BME backgrounds.

**covid-19’s impact on women**

Statistics from Public Health Wales show that women are more likely to contract coronavirus than men. Women are more likely to work on the frontline – 40% of women workers are key workers, compared to 28% of men – and are more likely to have caring responsibilities which put them at risk of contracting the virus. Within some ethnic groups the proportion of women workers in key roles is even higher.

At the beginning of the crisis Wales TUC heard from a great number of women in the health and social care sectors who did not have access to PPE. When protective gear arrived, it was often not available in women’s sizes and not fit for purpose. In workplaces where we have collective bargaining, like our NHS and local authority care services, we were able to work swiftly with Welsh Government to address this.

But the majority of care workers in Wales are employed outside the public sector. With no formal structure to engage these workers and their employers at a national level, it was much harder to address issues like access to PPE and topping up sick pay so that no care worker suffered a pay cut because they needed to self-isolate.

When hearing about the deaths of women, BME, pregnant and disabled workers in Wales we knew we urgently needed to address the disproportionate impact the crisis was having. Wales TUC – led by our health unions – worked with Welsh Government to develop an individual Covid risk assessment tool. This enabled workers to talk with their employers about suitable adjustments and protection measures. And we continue to campaign to ensure that, if workers have to be removed from frontline duties for health and safety reasons, Welsh Government protects their income, job security and career progression.

As we all know, this is not just a health crisis. We’re yet to see the full impact on the economy but recession, redundancies and austerity never treat women fairly.

Too often, the work that women do is chronically undervalued and underpaid. Women dominate low-paid, part-time, and fixed-term contracts. These are the jobs most likely to disappear during a recession. And unfair treatment at work persists. One in four pregnant women surveyed by the TUC reported experiencing unfair treatment or discrimination at work during the crisis, including being singled out for redundancies or furlough.

Women still take on the majority of childcare duties (around two thirds), including in households with two working parents. With most professional childcare provision closed or limited and grandparents unable to assist, many mums’ careers have suffered. One in six working mothers – mostly those in low-paid jobs – had to reduce their working hours during the pandemic. 30% reported regularly working early in the morning or late at night to balance work and childcare.

**how do we build back fairer?**

The first step to making sure that our post-Covid lives are more equal is informing and empowering ourselves as women workers.

Trade unions must prioritise organising in workplaces and training more activists and leaders who are women, young, BME, disabled and LGBTQ+. Together we will fight back against structural and systemic inequalities, violence and injustice. This must be done through the lens of intergenerational, global solidarity. We must be prepared to work across our movement, with third sector and grassroots organisations who share our vision for freedom, justice, and equality. The fight for gendered liberation can change the world for everybody when we refuse to think of it solely as women’s work.

Employers have a big role to play in workplace equality. They have a legal obligation to protect your health and safety at work. This includes protecting you from the risk of contracting coronavirus, and keeping you safe if you’re working from home. If you’re pregnant your employer should assess your workplace for risks to you and your unborn child. They should make it possible for you to work from home, give you suitable alternative work at the same rate of pay, or suspend you from work on full pay for as long as necessary to protect you.

From now on, we want all employers to offer flexible working from day one. This will not only help women with childcare or caring responsibilities, but will make roles more appealing to a range of candidates. We want politicians to step up and tackle the deep-seated gender inequalities that this crisis has intensified. Our childcare sector needs to be supported to survive this crisis, and the furlough scheme should be extended for parents who are unable to return to work because of a lack of childcare.

We are working with Welsh Government to investigate the gender, race and disability pay gaps and how we can work together to eliminate this disparity. We’re calling for all public sector contracted-out services to conduct regular equality impact assessments before making any decisions on restructuring or redundancies. Opportunities for workers to retrain and reskill must be easily accessible and should include adequate state financial support and childcare.

Now, more than ever, we need to work together to build back better for women workers and reconstruct our economy so that it’s based on fairness and equality.
Covid and discrimination

The coronavirus pandemic has been catastrophic for women and equality. But gender inequality was baked into the system long before the virus came around. The invisible coronavirus has made visible the many already existing fault lines in our largely corporate-driven and hyper-globalised world with its persistent gender inequality, sexism, racism, and oppression on the most vulnerable perpetuated by the political and financial elite.

The very same people who have borne the brunt of the UK’s austerity agenda and have faced decades of economic and social injustice are the very same people who face the harshest immediate and long-term impacts of Covid-19.

Coronavirus has shown just how broken our economy and society is and has reiterated that it works for the few. It has highlighted that in spite of legislative advances for women and our most marginalised – we have a very big fight on our hands to achieve a safer, fairer, and more equal Scotland and UK.

And that is why, now more than ever, we need an organised, united, and relevant Trade Union Movement that places Equality and Women at its core, to combat rising injustices and to build an economy that works for all.

Women’s voices must be front and center of the Trade Union Movement and in decision making. As the first female leader of the Scottish TUC in over 125 years, it is my absolute mission to ensure our movement reflects the very people we seek to represent, and that women, in particular, feel empowered, supported, and energised to utilise their voices and skills to help strengthen our movement and create a real force for change.

You cannot be what you cannot see, and it is time to reflect on our past and the barriers women have overcome, whilst inspiring a generation of women activists in a post-Covid world to: create a storm by challenging the status quo and fighting back against austerity-driven agendas, and crucially joining a trade union to ensure that equality and fair work in all its forms is enshrined once and for all.
remembering sheila abdullah

Abdullah was a particularly important figure in my life – not just a sympathetic and highly competent GP, but a key sister and friend in the formative years of the women’s movement on Merseyside. We worked closely together on many campaigns, mainly focused on women’s health issues.” Julia South, an activist in the Merseyside Abortion Campaign recalled: “Sheila would speak out at public meetings about the women who had died before the 1967 Abortion Act from back street abortions. She was both passionate and eloquent in her insistence that women be granted the respect – and the legal right – to make their own decisions about abortion. She inspired me and many others.”

Sheila and I worked voluntarily in the Brook Advisory Centre in our spare time, for several years holding clinics in a cold basement, with a one bar electric fire and a concrete floor. The local Family Planning Association donated contraception supplies and many women came to us requesting abortion, fearing that their GPs would be unsympathetic. We lobbied, eventually successfully, for funding for a fully funded Brook Advisory service for young people in Liverpool.

Sheila had joined Princes Park health centre in Liverpool 8, set up in 1977 by Dr Cyril Taylor. She was already a member of the Community Health Council, one of the most radical in the UK thanks to its secretary, Jane Leighton, and had met Cyril through the Socialist Medical Association. Sheila’s energy was boundless and she put 100% into her work as a GP, as she did when campaigning. She always had time to listen. Cathy Hogan recalled: “Her devotion to patients led to her working long hours with morning surgeries often still going at 2pm. A home visit regularly meant Sheila making a cup of tea for the patients whilst she consulted at their home.” Linda Pepper, feminist, local activist and one of Sheila’s patients remembered: “She was not just a doctor but an advocate. I had to have an amniocentesis and the hospital doctor said I could not be told the sex of the baby, as in their experience the husband could

1st met Sheila when I came to Liverpool to work at Alder Hey hospital in 1976. Sheila, a feminist and socialist, along with her friend, Jane Leighton, secretary of South-Central Community Health Council, were very supportive to me then, and also later when I started work in Princes Park Health Centre, Liverpool 8 in 1978. I was new to Liverpool, but they made me feel at home straight away. I was a member of Doctors for a Women’s Choice on Abortion in which Sheila was already involved. We campaigned successfully against various anti-Abortion bills including Corrie and Alton and, as part of the Merseyside Abortion Campaign, to set up a free NHS Day Care Abortion Service in Liverpool, which opened in 1982. Sheila had long campaigned for this service, after having to beg the very few willing consultant gynaecologists to perform abortions on local women for whom, too often, there were unnecessary delays.

During the 1980s Sheila and I were involved in campaigning for women’s health services in Liverpool and took part in the successful campaign to save Duchess Ward at the Women’s Hospital. The campaign organised a ‘Women in White’ march from the Women’s Hospital to the community health council. 400 women, dressed in white, marched to represent all women on the gynaecology waiting list at the Women’s. Sheila also supported the launch of the Women’s Health Information and Support Centre (WHISC), which is still operating today. Marge Ben-Tovim, friend, activist and also patient, remembered: “Sheila Abdullah was a particularly important figure in my life – not just a sympathetic and
I would like to join the NAW. Here is £20 for the annual subscription (£10 unwaged) which includes my subscription to *sisters*, the journal of the NAW.

Our organisation would like to affiliate to the NAW. Enclosed is: £20 (local organisation/NAW branch), £45 (regional organisation), £60 (national)

Name

Address

postcode

Organisation

phone email

Send to: NAW, c/o C Simpson, Unite, 33-37 Moreland Street, London EC1V 8BB

**what’s on...**

**NAW Executive Committee**

meetings are open to all members. The next will be a “virtual” meeting on Saturday 3 October. If you would like to attend please contact the Secretary on naw@sisters.org.uk or at NAW, Bridge House, Newport Street, Hay on Wye, Powys HR3 5BG

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**National Assembly of Women residential weekend conference**

**how did we get here?**

HOW DID WE GET HERE? – an analysis of the economic and social landscape

**how do we move forward?**

HOW DO WE MOVE FORWARD? – social and economic challenges

**Saturday 7 to Sunday 8 November 2020**

Starting 1.45pm Saturday, concluding 1.30pm Sunday, at the NASUWT’s conference centre in Rednal, Birmingham

Speakers include:

Laura Pidcock, Peoples Assembly General Secretary; Marion Sharples, Project Manager/Researcher at the Women’s Budget Group; Caroline Underhill, Thompsons Solicitors; Coral Jones, NHS frontline worker

Conference costs: single ensuite room **£60** includes Saturday lunch, Saturday dinner, B&B and tea and coffee throughout the conference

The conference will take place only if it is safe to do so.

**Registration and pre-payment are essential**

For further information and to reserve a place, email megan@gn.apc.org

Please send your cheque, payable to “NAW”, to Bridge House, Newport Street, Hay on Wye, Powys HR3 5BG

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**National Assembly of Women Annual General Meeting**

Our AGM was due to take place in April but was postponed because of Covid-19. The re-scheduled Annual General Meeting for NAW members and delegates from affiliated organisations is free to attend and will be on **Saturday 7 November**

11.30am to 1pm

The annual report and other documents are being circulated to members and affiliates along with this issue of *sisters*

It will be helpful if you let us know if you are planning to attend the AGM.

For further information email naw@sisters.org.uk or write to NAW, Bridge House, Newport Street, Hay on Wye, Powys HR3 5BG

The AGM will take place only if it is safe to do so and will be held at the NASUWT’s Hillscourt Education Centre, Rose Hill, Rednal, Birmingham B45 8RS