

# Gender Disparities in Post-COVID-19 Economic Recovery: A Case Study of Working Women in Northern Bangladesh

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**Abstract:** This paper examines the changing perceptions of work-life balance among working women during the COVID-19 lockdown in Chapainawabgonj and Rajshahi City Corporation, Bangladesh. The disruptions in the labor market have undermined the strides made in women's empowerment over the past century. Women are experiencing exacerbated inequalities in accessing resources, services, and safety. A notable surge in undervalued and underpaid domestic work has restricted their performance to levels below reasonable expectations. Alongside concerns about the future, existing workloads, and frustrations, these factors have heightened mental stress and exacerbated health issues. Consequently, our study aimed to explore the working conditions and work-life balance of women, focusing on gendered perspectives while considering demographic variables such as age, marital status, educational attainment, salary, and incentives within their respective sectors. Employing a mixed-methods research approach, we collected data from a sample of 58 respondents in Chapai Nawabgonj and Rajshahi. Data collection involved purposive snowball sampling and netnography (utilizing Google Forms and Messenger), with in-depth interviews as the primary instrument. The findings indicate a predominant age group of 26-35 years (60.34%) among the respondents, with 62.06% being married, and approximately 73% holding postgraduate qualifications. The study concludes that the work capacity of women is significantly influenced by age, marital status, educational level, and job security. The paper emphasizes the pressing need for intervention, advocating for tailored packages and incentives to support the affected female labor force.

**Keywords:** Covid-19, Lockdown, Gender lens, Working Women.

## INTRODUCTION

COVID-19 and the subsequent shutdowns have caused unprecedented disruptions to livelihoods worldwide, including in Bangladesh. Consequently, many vulnerable individuals face exploitation, poverty, discrimination, and inequalities (Parvin and Kotagar, 2020). The pandemic has particularly affected girls, young women, and working women, exacerbating their already limited access to resources, services, and safety. In Bangladesh, where only 15% of the population earns above \$6 per day (Hua and Shaw, 2020), the pandemic has significantly impacted the biological, socio-economic, and socio-psychological well-being of millions, further exacerbated by underpayment, undervaluation, and pervasive future anxiety (Li *et al.*, 2020).

According to a survey by the Bangladesh Institute of Development Studies (BIDS), about 13% of individuals in

Bangladesh lost their jobs due to the COVID-19 shutdown, disproportionately affecting low-income groups, leading to substantial declines in employment and income (The Daily Star, 2020). Feminist economists Pozzan and Cattaneo (2020) have highlighted the emergence of a "third shift," describing the role conflict stemming from transitioning to home-based work. This shift disproportionately burdens women, who find themselves overwhelmed with devalued and underpaid emotional labor.

Amidst these challenges, Bangladesh's societal structure, described by Kabeer (1988) as "classist patriarchy," dictates an unequal distribution of care and domestic responsibilities to women, further limiting their economic participation. The closure of schools due to the pandemic has forced parents, especially working mothers, to balance professional responsibilities with increased caregiving duties. This additional burden has led to furloughs, missed promotion opportunities, and potential future impacts on pensions, as noted by Lewis (2020). Working moms faced additional caregiving duties, furloughs, or were overlooked for promotion, negatively impacting their pensions. Women have borne the dual bur-

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den of the "care economy" and the "paid economy" due not only to physical barriers to working but also because families required support in raising and educating their children without institutional aid, impacting their paid working hours (Power, 2020).

Despite prevailing challenges, globalization has provided increased educational opportunities and formal sector employment for Bangladeshi women. However, cultural norms and gender roles persist, demanding women to assume a subordinate role, expecting more from them while offering less in return. The COVID-19 crisis has intensified these expectations, placing immense pressure on working women to fulfill both professional and familial obligations.

The pandemic has severely impacted employment, resulting in a significant number of women, particularly in the female-dominated garment industry and other sectors, losing their jobs. A study by the BRAC Institute of Governance and Development (BIGD) in January 2021 revealed that one-third of employed young women lost their jobs during the pandemic, a rate almost three times higher than that of young men. Moreover, the income recovery rate for female youth (21%) is two times lower than that for their male counterparts (10%) (Das, 2022). Representing 91.8% of the informal sector (UN Women, 2020b), women in Bangladesh encounter additional challenges due to inadequate social security programs and a lack of digital literacy, hindering their ability to seek alternative employment. COVID-19 made it difficult for women to balance work and personal domains, leading to mental stress and exacerbating their health issues (Sarker *et al.*, 2023; Houlden & Veletsianos, 2020).

Despite the increasing female labor force participation (FLFP), Bangladesh has witnessed a stagnant percentage of women working (36%) for at least a decade (UNU-WIDER, 2020), reflecting persistent gender inequality due to patriarchal values and structures.

Numerous studies have explored challenges within the Bangladeshi labor force, contributing significantly to understanding the impact and potential solutions for the labor market. However, a detailed field study focusing on working women's experiences based on demographic profile features and their psychosocial effects within their work environments during the COVID-19 epidemic remains lacking. There is a clear necessity for a gender-specific approach in policy initiatives. While the existing body of research on the Bangladeshi labor force is substantial, it lacks an in-depth field study on the psychosocial effects of the working environment on women during the COVID-19 pandemic. This study aims to bridge this gap by systematically investigating the gendered effects of the pandemic on the psycho-social stability of working women.

## REVIEW OF LITERATURE

Lazquez *et al.* (2022) conducted a study analyzing the impact of COVID-19 on the gender gap in paid work hours within heterosexual couples in Spain. Using data from the Spanish Labor Force Survey (2019-2020) and employing the difference-in-differences method, they discovered that traditional gender roles remained entrenched during the strict lockdown (Chowdhury, Dhar & Satsi, 2022), especially for women employed in non-essential sectors.

Mutang *et al.* (2022) surveyed 334 adult Malaysian couples through an online platform and identified three predominant stressors: financial difficulties, restricted movement, and concerns regarding COVID-19 infection. Their findings indicate that these stressors, compounded by social isolation, limited physical activity, and adjustments to remote work, significantly influenced mental health and the quality of couples' relationships (Dhar, 2020; Dhar, Ayitney & Sarkar, 2020).

A gender gap report by the World Economic Forum (2022) highlights Bangladesh's struggles with gender equality, particularly in terms of remuneration. The country ranks 71st out of 146 nations, with a score of 0.714 in an index measuring workforce participation, pay, and advancement. This marks a decrease from its 91st position in 2006. Bangladesh faces significant challenges in three critical areas: economic involvement and opportunity for women, education, and health and survival, with the gender gap widening over the past 14 years (Chowdhury *et al.*, 2022; Jahan, 2020;).

The pandemic has exacerbated issues related to domestic violence and mental health, particularly affecting women and transgender individuals. Data from the Bangladesh Nari Sramik Kendra (BNSK) reveals that nearly 94% of female workers in Dhaka have experienced domestic violence during the pandemic, primarily due to financial strain caused by income loss. Furthermore, 88% of internal women migrant workers, predominantly employed in the informal sector, have faced similar challenges (Ara, 2020).

The gendered impacts of the pandemic intersect with other entrenched inequalities. In the United States, women of color are disproportionately employed in precarious jobs, lacking job security. Over a third of women have experienced job loss, furlough, or pay cuts due to the pandemic, with 54% of black women reporting living paycheck-to-paycheck or having lost their job or income, compared to 27% of white men. Women in East Asian communities, often employed in hospitality, retail, and social care, have also faced significant job insecurity and layoffs (Gazi *et al.*, 2022, Gazi *et al.*, 2023; Porter *et al.*, 2023).

The primary objectives of this study are twofold: firstly, to explore working women's experiences during the COVID-19 pandemic, particularly in relation to their demographic profiles; and secondly, to investigate the psychosocial conditions of women's work during the pandemic. This research will significantly contribute to the developmental processes in Bangladesh, highlighting the indispensable role of working women. By reflecting on women's experiences in terms of working conditions, gender harassment, job security, and job satisfaction from the COVID-19 period to its aftermath, this study aims to elucidate their socio-psychological state, thereby informing policy recommendations.

## RESEARCH METHODOLOGY

The primary methodology utilized in this study was the survey method, supplemented by an interview schedule comprising both closed and open-ended questions. This combination facilitated the collection of diverse data types. Additionally, the case study method was employed to gather

information on the consequences of COVID-19 on Bangladeshi working women in a more informal manner, and informal observation was also utilized.

Netnography, a recent innovation in research methodology, was another approach adopted in this study. Employing two main data sources—news media, and blogs and social media—we aimed to glean insights from the abundance of data available on these platforms. Given the novelty of the data and the scarcity of existing data on our topic, we selected established news platforms such as BBC, The Daily Star, and The Financial Express for news media, and systematically gathered data from the websites of trustworthy organizations like BNSK, IEDCR, and various UN bodies. Table 1 below outlines the materials and methods applied in the study in relation to its objectives.

**Table 1. Materials and methods applied for the study as per its objective.**

| Objectives   | Methods                         | Sources used                   | Tool used          | Reporting Method             |
|--|---------------------------------|--------------------------------|--------------------|------------------------------|
| To understand the job experience & conditions of the working women during lockdown | Survey/ observation/Case study  | Primary sources: working women | Interview schedule | Qualitative and quantitative |
| To know the psycho-social condition of working women during lockdown               | Survey/ observation/ Case study | Primary sources: working women | Interview schedule | Qualitative and quantitative |

A total of 58 working women in Bangladesh were purposively selected as respondents for this study to understand their job experiences and psychosocial conditions during the Covid-19 pandemic lockdown. Additionally, in-depth interviews were conducted with 12 working women as case studies to fulfill the research objectives. Informal observation was also applied to substantiate the data in the analysis.

Mixed methods were employed for data collection. Initially, the researcher gathered primary data from respondents using a structured interview schedule that included both closed-ended and open-ended questions. This aimed to acquire necessary information about their job situation, working environment, and psychological condition during the lockdown caused by the coronavirus pandemic. Due to the pandemic situation, data collection methods varied: the researcher utilized Google Forms to send interview schedules to five respondents, conducted interviews with ten respondents over the phone, interviewed five respondents face-to-face while maintaining social distancing and hygiene, and contacted the remaining respondents (28) via messaging applications. Prior to the survey, detailed information was collected from four respondents using case study methods. Data were gathered by interviewing selected respondents using structured questionnaires and through close observation.

Both qualitative and quantitative analyses were employed in this study. The collected data from the respondents were tabulated and analyzed in alignment with the study's objectives. General statistical measures such as frequency and percentage (%) were utilized for quantitative analysis.

### Validity and Reliability

The interview schedule was initially prepared in English, but to ensure clarity and comprehension among respondents, explanations were provided in the local dialect to facilitate easy understanding of the queries. The researcher was directly involved in all stages of the research process, including data collection, cross-checking, data coding, and analysis. Additionally, after each interview, the interview schedule was re-checked. In cases where doubts arose, the researcher promptly contacted the respondents via mobile phone or online communication to clarify any uncertainties.

### Ethical Considerations

Considering the sensitive nature of discussing work conditions and psychosocial health during a pandemic, ethical considerations are paramount. The study acknowledges the importance of maintaining ethical standards throughout the research process. Prior to data collection, informed consent was obtained from all participants, ensuring their voluntary participation and the confidentiality of their information. Measures were taken to protect the privacy and anonymity of the respondents, and their identities were kept confidential in the reporting of findings. The study also ensured that no harm or discomfort was caused to the participants during the research process. Moreover, all research activities were conducted following ethical guidelines and standards in accordance with established research practices.

### DATA ANALYSIS AND INTERPRETATION

Data Analysis and Interpretation Respondents' demographic profile description Age.

**Table 2. Age Profile of Working.**

| Age      | Frequency | Percentage (%) |
|----------|-----------|----------------|
| 18-25    | 06        | 10.34%         |
| 26-35    | 35        | 60.34%         |
| 36-45    | 12        | 20.68%         |
| 46-60    | 04        | 06.89%         |
| Above 60 | 01        | 01.72%         |
| Total    | 58        | 100%           |

According to the Table 2 mentioned above, 10.34% of the women respondents were between the ages of 18-25, The majority of the respondents tended to be aged 26-35years (60.34%), others were between the ages of 26-35, 20.68%, were between the ages of 36-45, 06.89% were between ages of 46-60, and 01.72% were over 60.

### Education

As shown in Table 3, most respondents earned a Master's degree (72.41%), whereas 06.90% have an HSC level of

education and 18.97% have Bachelor's Degree/Honors. Only 01.72% of female respondents have a Ph.D.

**Table-3. Education level of Working Women.**

| Education Level         | Frequency | Percentage (%) |
|-------------------------|-----------|----------------|
| HSC                     | 04        | 06.90%         |
| Bachelor Degree/ Honors | 11        | 18.97%         |
| Masters Degree/ Masters | 42        | 72.41%         |
| PhD                     | 01        | 01.72%         |
| Total                   | 58        | 100%           |

### Occupation/profession

In above mentioned Table 4 stated that of the entire 58 respondents, The majority (58.62%) were teaching faculty members while 01.72% were Doctors, 01.72% were Engineer, 10.34% were NGO workers, 05.17% were self-employed, 01.72% were IT company staff, 01.72% sales executives, 03.44% Bankers, 03.44% Business persons, 01.72% online business persons, 01.72% police personnel, 01.72% military personnel, 03.44% mobile company staff, and 03.44% hold other professions.

**Table 4. Occupation/profession of the respondents.**

| Occupation/Profession  | Frequency | Percentage (%) |
|------------------------|-----------|----------------|
| Teaching faculty       | 34        | 58.62%         |
| Doctor                 | 01        | 01.72%         |
| Engineer               | 01        | 01.72%         |
| NGO worker             | 06        | 10.34%         |
| Self Employed          | 03        | 05.17%         |
| IT Company staff       | 01        | 01.72%         |
| Sales executive        | 01        | 01.72%         |
| Banker                 | 02        | 03.44%         |
| Business person        | 02        | 03.44%         |
| Online Business person | 01        | 01.72%         |
| Police member          | 01        | 01.72%         |
| Military personnel     | 01        | 01.72%         |
| Mobile Company staff   | 02        | 03.44%         |
| Others                 | 02        | 03.44%         |
| Total                  | 58        | 100%           |

### Workplace Before Lockdown

**Table 5. Distribution of the respondents as per their workplaces before lockdown.**

| Work area  | Frequency | Percentage (%) |
|------------|-----------|----------------|
| Urban area | 34        | 58.62%         |

|                 |    |        |
|-----------------|----|--------|
| Rural area      | 22 | 37.93% |
| Industrial area | 02 | 03.45% |
| Total           | 58 | 100%   |

As the results above are mentioned in the Table 5, more than half portion worked in the urban area amongst the study sample (58.62%), 37.93% worked in rural areas and 03.45% worked in industrial areas before the lockdown.

### Staying during lockdown

Above mentioned Table 6 stated that half of the respondents 55.17% stayed in urban areas, 41.38% stayed in rural areas and 03.45% stayed in industrial areas during the lockdown.

**Table-6. Distribution of the respondents according to their staying during lockdown.**

| Stayed Area     | Frequency | Percentage (%) |
|-----------------|-----------|----------------|
| Urban area      | 32        | 55.17%         |
| Rural area      | 24        | 41.38%         |
| Industrial area | 02        | 3.45%          |
| Total           | 58        | 100%           |

### Mode of Service

**Table 7. Mode of service of the respondents.**

| Categories         | Frequency | Percentage (%) |
|--------------------|-----------|----------------|
| Government service | 18        | 31.03%         |
| Private service    | 34        | 58.62%         |
| Self employed      | 03        | 05.17%         |
| Others             | 03        | 05.17%         |
| Total              | 58        | 100%           |

The result also showed that 31.03% were government service holders while 58.62% held private jobs, 05.17% self-employed and 05.17% were from other sectors. Government service was a boon to the working ladies.

Similarly, A 43-year-old primary school teacher in Chapainawabgonj noted:

*In the Covid-19 outbreak when the country is under lockdown, I don't need to go workplace. Even if went could maintain the health safety rules given by WHO. My salary is not reduced while the bank has exempted interest on my loan for the two months lockdown period. I had not to pay interest.*

On the reverse, the view of a 48-year-old kindergarten school teacher in Rajshahi Sadar was captured as follows:

*I am a widow for four years and living with my daughter and old parents. My family relies on me, and during the Covid-19 outbreak I am not getting any salary from the school, though the school reo-*

*pened, I lost my job because of old age. I am so helpless, even unable to buy the medicine for my parents. So I had to take loans from others and pass days with difficulty.*

## PSYCHOSOCIAL WORKING CONDITIONS DURING THE COVID-19 EPIDEMIC

### State of earning/salary During Lockdown

**Table 8. Distribution of the respondents as per their state of their salary or earning during lockdown.**

| Monthly Getting Salary | Frequency | Percentage (%) |
|------------------------|-----------|----------------|
| Full of salary         | 43        | 74.14%         |
| Half of salary         | 09        | 15.51%         |
| One third of salary    | 03        | 05.17%         |
| Not getting salary     | 03        | 05.17%         |
| Total                  | 58        | 100%           |

Though the majority of the respondents 74.14% got full of salary, 15.51% were getting half of the salary, 05.17% are getting one-third of the salary and 05.17% didn't get salary.

The response of a 30-year-old private Banker in Chapai Nawabganj was reflected in this quote:

*I am spending time with my family because the bank has announced one month's leave during the lockdown. I have to go to the bank once a month or sometimes three days a week, following the hygiene rules. But, got half of my full salary. However, in Corona's situation, I also feel depressed by fear of being affected.*

### Working Status during Lockdown

The abovementioned Table 9 stated that 65.52% of participants had jobs or could work, and 34.48% didn't work during the lockdown. A 32-year-old Chapai Nawabganj private school teacher explained:

**Table-9. Distribution of the respondents as per the working status during lockdown.**

| Working     | Frequency | Percentage (%) |
|-------------|-----------|----------------|
| Worked      | 38        | 65.52%         |
| Didn't work | 20        | 34.48%         |
| Total       | 58        | 100%           |

*I am a single mother with a daughter and elderly parents. I am responsible for all of my family's expenses, and even if lessons are conducted online during lockdown, I am obliged to attend school on occasion in accordance with the guidelines. I am being paid in full. But I'm constantly worried about what would happen to my family if I test positive for corona.*

### Purposes of Spending Salary

Above mentioned Table 10 stated that 08.62% spend their salary on themselves, 18.96% spend their salary for their family and a higher number of respondents spend their salary for their family and own (72.41%).

**Table-10. Distribution of respondents as per their purposes of spending salary.**

| Spend Salary   | Frequency | Percentage (%) |
|----------------|-----------|----------------|
| Own            | 05        | 08.62%         |
| Family         | 11        | 18.96%         |
| Own and family | 42        | 72.41%         |
| Total          | 58        | 100%           |

### Workplace during Lockdown

According to the above-mentioned Table 11, 48.27% of working women had to go to the workplace/office, while 51.72% remained at home during the lockdown.

**Table 11. Distribution of respondents whether they worked at workplace/office or not during lockdown.**

| Have to go Office | Frequency | Percentage (%) |
|-------------------|-----------|----------------|
| Went              | 28        | 48.27%         |
| Stayed at home    | 30        | 51.72%         |
| Total             | 58        | 100%           |

### Household work during lockdown

As shown in the Table 12, the bulk of respondents (70.69%) reported increased homework, with a minor number of respondents (03.45%) reporting reduced household work, and 25.86% reporting the same as before during the lockdown.

**Table 12. Household work during lockdown.**

| Household Work | Frequency | Percentage (%) |
|----------------|-----------|----------------|
| Increased      | 41        | 70.69%         |
| Decreased      | 02        | 03.45%         |
| As before      | 15        | 25.86%         |
| Total          | 58        | 100%           |

### Preferences to Male Staff

The respondents were asked whether their employers preferred sacking female staff over male colleagues. Table 13 shows that 25.86% of respondents indicated that their employers preferred sacking female staff over male staff, while 37.76% responded that they felt secured, and 15.52% felt this happened sometimes. Additionally, 25.86% did not respond to this question as it was not applicable to them.

**Table 13. Distribution of respondents whether their employers preferred to sack them than that of male colleagues.**

| Employers Preference to Sacking Female than Male | Frequency | Percentage (%) |
|--|-----------|----------------|
| Yes  | 15        | 25.86%         |
| No   | 19        | 32.76%         |
| Sometimes  | 09        | 15.52%         |
| Not applicable                                   | 15        | 25.86%         |
| Total  | 58        | 100%           |

Problems faced by working women at workplaces during lockdown

In the above-mentioned Table 14, a significant number of respondents (24.14%) reported experiencing depression, while 50.00% indicated they were under mental pressure. Additionally, during the lockdown period, 12.06% of respondents experienced gender discrimination, 06.89% reported instances of sexual harassment, and 06.89% encountered other workplace difficulties.

**Table 14. Distribution of the respondents as per the major problems faced by working women at workplaces during lockdown.**

| Majors Problem        | Frequency | Parentage (%) |
|-----------------------|-----------|---------------|
| Depression            | 14        | 24.14%        |
| Mental pressure       | 29        | 50.00%        |
| Gender discrimination | 07        | 12.06%        |
| Sexual harassment     | 04        | 06.89%        |
| Others                | 04        | 06.89%        |
| Total                 | 58        | 100%          |

### Health Incentives Facilities

Above mentioned Table 15 shows that half (55.17 %) of the respondents got health incentives, 06.89% did not say and 39.93% were not entitled to get health incentives from the office authority.

**Table 15. Distribution of respondents whether they offered health incentives given or announced from office authority.**

| Given Health Incentives | Frequency | Percentage (%) |
|-------------------------|-----------|----------------|
| Announced               | 32        | 55.17%         |
| Not announced           | 22        | 39.93%         |
| Can't say               | 04        | 06.89%         |
| Total                   | 58        | 100%           |

### DISCUSSION

In the context of COVID-19, the challenges faced by working women in balancing childcare and paid employment have significantly impacted gender equality and work-life

balance (Kundu, 2022). This issue is particularly pronounced among women with master's degrees aged 26 and above, as they often find themselves adhering to societal and familial norms that expect them to excel as homemakers and mothers, which became even more challenging during the lockdown period. Married women, in particular, bear the brunt of these expectations, as they typically shoulder more family duties than their single counterparts. The increased responsibilities translate to a greater investment of time, effort, and energy, which, in turn, can affect their professional work-life.

The respondents in our study were drawn from a diverse range of labor sectors, encompassing both essential and non-essential industries. Notably, government service emerged as a vital support system for working women during this period. This finding aligns with prior reports indicating that 92% of women are engaged in less secure informal employment, with 29% primarily occupied with unpaid family work (UNU-WIDER, 2020). It is worth noting that women's employment security and financial stability have been significantly affected by the pandemic, resulting in a net loss of 5.4 million jobs among women, surpassing the numbers for men (Boesch and Phadke, 2021).

The economic repercussions of the pandemic are evident in our survey results, with 34.48% of the participants reporting temporary job loss during the lockdown, while 48.27% had to continue working. Parallel to previous studies (Uddin, 2021), this finding underscores that women have had to leave their homes, exacerbating work-life imbalances and undermining their self-care routines, ultimately affecting their overall quality of life. Viertiö et al. (2021) found that women facing job insecurity while continuing to work experienced higher levels of anxiety compared to their male counterparts. Furthermore, women who took on additional domestic care duties reported more significant mental health issues than those who did not.

Amid these hardships, working women often redirected their earnings towards supporting their families, a situation exacerbated by the increased burden of household chores. The concept of the reproductive and care economy, often placed on women's shoulders, has been brought to the forefront. This unequal distribution of responsibilities places a considerable mental load on women, echoing sociologist Arlie Hochschild's "the second shift" (Hochschild and Machung, 2012). Silva (2019) underscores that women worldwide carry out 75% of unpaid care and domestic work in households and communities daily. In the context of Bangladesh, the pandemic has seen a 91% increase in women's domestic and care work compared to pre-pandemic levels, leaving 89% of women with no leisure time (Suraiya et al., 2020).

Evidence from the BBS Gender Statistics (2018) report further reinforces the pre-existing disparity in unpaid domestic care work, with women performing 3.43 times more of these tasks than men even before the pandemic (Relief Web, 2020). The World Economic Forum's Global Gender Gap Report 2021 highlighted an expansion of the gender gap in Bangladesh by 0.7 percent, partly attributed to the imbalanced work-family dynamics and role expectations (Tasneem, 2021; Qian & Fuller, 2020). These challenges

were compounded by job insecurity, with women facing a higher risk of job loss compared to their male colleagues, leading to depression, mental pressure, gender discrimination, and sexual harassment.

Notably, the mental health struggles of healthcare workers, predominantly women, have also surfaced during the pandemic. British research revealed that rates of depression and anxiety were significantly higher for women healthcare workers compared to their male counterparts (Pappa *et al.*, 2020). Surprisingly, despite overwhelming challenges, many women did not receive additional incentives or health support, contrasting calls for equitable distribution of health incentives during the pandemic (Gentilini *et al.*, 2022; Lv & Duckett, 2022).

## CONCLUSION

Women serve as caregivers and are central to any family structure. Our results highlight that gender inequalities worsened during the lockdown period, resulting in an equal number of work hours for working women. According to the study, 62.06% of working women are married, and all working women had to bear the dual burden of the "care economy" and the "paid economy."

The pandemic's gendered impacts are interlinked with other ingrained disparities, impacting various aspects of life, including mental, emotional, and physical well-being. The insights from this study could assist in developing specific policy measures to mitigate potential increases in the gender gap in labor market participation and to protect working women from disengagement. It is crucial for the government, multilateral organizations, and international financial institutions to offer support, both in financial terms and through subsidy measures, with a gender-inclusive approach to address the pandemic's fallout. Hence, a proactive and preventative strategy is imperative.

To prepare for future calamities, office setups should be conducive to working from home, with a well-maintained database. Those without personal devices such as computers or laptops should be supported, possibly through assistance with internet bills. Employers should facilitate arrangements enabling employees to work from home using their own devices. While most working women received full pay, there were instances where some received half or one-third of their regular earnings. It's essential for the government to formulate policies to safeguard their incomes.

This study found instances where some working women did not adhere to social distancing measures during office hours. Strict adherence to social distancing and hygiene protocols in offices and workplaces should be mandated by authorities.

Government bodies and employers should organize more online seminars, workshops, presentations, and counseling services to assist working women experiencing depression, stress, and related issues.

Despite its significance, this paper has a few limitations. Firstly, due to the lockdown period, it was challenging to obtain responses from available respondents, resulting in a limited sample size of only 58 working women as of July 20,

2020. Secondly, this research is solely based in Bangladesh. However, considering that COVID-19 affects 195 countries, obtaining global information would enhance the research's validity and reliability.

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