Wellness and Work: Redefining Strategies for Women as Workplaces and Economies Evolve

by

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Abstract

This report focuses on the importance of employees having a supportive environment to reduce any negative effects of work on their well-being, and minimize and adverse impacts for their full productivity and opportunities for economic success. The study scans the opportunities and risks for the future of work, especially for women's roles in the workplace post-COVID-19 pandemic. It investigates how to leverage the opportunities, while mitigating the risks by exploring emerging and re-imagined strategies to support women and their well-being in a new work milieu. The study makes the assumption that work environments can be created, reconfigured and designed to prevent and mitigate health issues at some significant level across employment sectors, but particularly in the corporate office environment.

Keywords: Wellness; Workplace, women and work; New paradigms in work; Post-pandemic work; Inclusion and equality in the workplace

Table of Contents

Chapter 1: Introduction 5
Chapter 2: Study Methodology 10
Chapter 3: Office Environments, Women in the Workplace, and the Changing Nature of Work 11

3.1 The History of Office Work Environments 12
3.2 A Brief History of Women in the Workplace 17
3.3 Change in Work Environments Before and After the COVID-19 Pandemic 17

Chapter 4: Women, Employment and Unpaid Care Work 19
4.1 Women at work prior to the COVID-19 Pandemic 19
4.2 Work/Life during the COVID-19 Pandemic 22
4.3 The Working Woman and her Childcare Dilemma 26
4.4 Social, Physical/Mental Health, and Domestic Issues related to Work and new realities of COVID-19 28
.1 Social Issues Caused by Work 28
.2 Physical Health Issues Caused by Work 30
.3 Mental Health Issues Caused by Work 32
.4 Domestic Issues Caused by Work and COVID-19 34

Chapter 5: Gaps in Knowledge 37
5.1 Gaps in Knowledge and Unconscious Bias 37
5.2 Traditional Mindsets Towards Women and Wealth 41
5.3 Lack Policy and Organization Accountability 42

Chapter 6: Reassessing the Nature 44
6.1 Complexities of Work Life During During the COVID-19 Pandemic 44
6.2 Diversity and Inclusion in the Workplace 46
6.3 Importance of Employee Well-Being for Health, Productivity and Success 48

Chapter 7: Guidelines for employee accessibility and well-being 50
7.1 Ontario Accessibility Guidelines (AODA) 50
7.2 Emergence of WELL and new Best Practices of Office Spaces 52

Chapter 8: Building Strategies and Recommendations for Wellness and Work 55
8.1 Addressing Mental Health with Education and Learning 55
8.2 Ensuring Diversity at Work 58
8.3 Creating Job Opportunities for Women to Return to Work 58

8.4 Address "Unpaid Care Work" with New Models of Economic Valuation 59
8.5 Provide More Affordable and Quality Childcare 60
8.6 Including Women, People of Colour, and Minorities in Decision Making and Governance 61
8.7 Fostering Large Organizations in Driving Change and Wellness Initiatives 62
8.8 Including Mental Health Services in Health Insurance Coverage 63
Chapter 9: Conclusion 64
Bibliography 66

Chapter 1: Introduction

> "Employees perform their best when they are part of a safe, growing community that values their whole being, and where individuality and creativity are nurtured. The goal is to create every workplace with people at the heart of the design process to design spaces which support people's physical, mental and social well-being, inspire creativity and in turn, directly increase business performance and profitability" (Bruckner, n.d.)

This chapter will frame the topic of this research paper to provide some context and propose why it is worth exploring in further detail.

The Workplace i.e., the place employees work in every day, can have a considerable impact on their physical, mental and social well-being. According to the World Health Organization's (WHO) global plan of action on worker's health, "the health of workers is an essential prerequisite for productivity and economic development" (WHO, 2007, p. 3). To give an example of how productivity and economic development are tied to the well-being of employees, a recent study done by

PricewaterhouseCoopers(PWC) using a cohort of Singaporean employees, found that high levels of chronic diseases including diabetes had increased over the last decade (Daruwalla, Zubin, et al, 2019). The study also reported that 1 in 3 employees are at risk of developing diabetes; 1 in 8 have a mental disorder, and over 50% of the working population have reported higher stress levels in the last six months of 2016 due to long working hours; and burnout (Daruwalla, Zubin, et al., 2018).

In general, the progressive deterioration of the global health status of populations, markedly seen in developed nations, affects productivity and performance at work negatively. A report published by WHO on healthy workplace models found that developed countries are becoming less physically active, more poorly nourished (in terms of quality, not the quantity of food), with rising rates of obesity, which increased the incidence and prevalence of chronic health conditions such as hypertension, cardiovascular disease, diabetes, and arthritis (Burton, 2010, 36). Although employers do not have legal obligations to the healthy management or promotion of wellness for employees, they are obliged by corporate social responsibility. This responsibility becomes more paramount if it is indeed possible to mitigate, prevent, or improve health conditions for employees through workplace-related interventions as this not only affects employee wellness, but also their overall health and workplace productivity, which in turn affect other systems, the whole organization and so forth. A higher standard of health significantly impacts worker productivity, allows organizations to perform better, meet their business goals and be more competitive.

> Shawn Achor, the CEO and co-founder of GoodThink, Ted Talk speaker, and happiness expert, states “The greatest competitive advantage in the modern economy is a positive and engaged brain. The human brain at positive has an unfair advantage over that same brain at negative or neutral. “When we are positive, we show a 31% increase in productivity” (Hansen, 2019).

Businesses that prosper and thrive in a community help contribute to economic development, the prosperity of the community and ultimately the country as a whole. “This economic prosperity filters down to the individual, creating social wellbeing and wealth for all individuals in the community; worker health, business prosperity and even national prosperity and development are inextricably intertwined” (Burton, 2010, pp.

40). Employee health ultimately affects many other interlinked cycles and how society functions as a whole.

The models governing how and where we work are constantly evolving. According to Martha A. O'Mara, a leader in corporate real estate planning, the rise in the number of single parents, the increase of ethnic and diverse backgrounds, and a broader range of employment skills are growing in the workforce. Furthermore, employee knowledge, culture, attitudes, and experiences constantly evolve and reshape the workplace (O'Mara, 1999). Previously, employees spent much of their careers at one company, and now employees switch jobs as well as career interests and pursuits several times in their life. As the workforce retires, there are increasing knowledge gaps and loss of institutional memory when companies attempt to continue business with higher rates of attrition and fewer new resources (O'Mara, 1999). An outcome of this phenomenon is that people are spending longer hours working, often taking on additional work-related responsibilities. According to Melissa Gilligan, Global News, businesses must account for their role in demanding more of their employees overtime. When an employee is in a role for ten years, they expect their job to get easier, not more physically demanding, however this is not the case (Gilligan, 2020). Knowledge workers (technologists, professionals, teachers) are becoming more in demand and are also more vocal about their needs and expectations of both work and the workplace. As a result, employees desire more flexible hours to achieve a better work-life balance and want to be able to work from home, or have greater on-site support for childcare, food and personal services, if there is going to be more demand on, and greater expectations of, their working hours (O'Mara, 1999). With the recent impacts of the COVID-19 pandemic, there is an entirely new scope of ways as to how the physical and virtual workplace environments may impact an employee's wellness, especially for women.

Studies identified that the work sectors most impacted by the COVID-19 pandemic were healthcare, childcare, retail, and hospitality, due to social distancing measures. Coincidentally, the workforce in these sectors was majorly comprised of women, leading to the workplace recessions caused by the COVID-19 pandemic to impact women more than men (Alon et al., 2020, 1). Even as the economy gradually reopened between April and August 2020, employment gains in Ontario were 200,200 for men and only 131,700 for women (Dessanti, 2020). A journal article from the National Bureau of Economic Research explored the role of women in the COVID-19

pandemic and identified two leading causes of the impact of the COVID-19 pandemic recession on the labour market: Social distancing and increased childcare demands.

> "The impact of the current recession has been greatest in high-contact service sectors such as restaurants, hospitality, and travel, which have been severely affected by social distancing. These are sectors where women represent a large share of the workforce, leading to high employment losses for this group during the crisis.
>
> The second cause of the large impact of the lockdown on working women relates to childcare. During the lockdown period, schools and daycare centers were closed and children were sent home. This massively increased families' childcare needs during working hours." (Alon et al., 2020, 1)

COVID-19 pandemic has amplified pre-existing inequalities and injustices experienced by vulnerable populations. In this case, the disproportionate impact on women will contribute to how the future of work evolves. A report published by IBM, which surveyed more than 2,600 executives, middle managers, professional women and men across the same ten industries and nine geographic regions, stated that when the global economy went into lockdowns, diversity and inclusion initiatives were among the first casualties (IBM, 2021). This encompasses initiatives towards the representation and the inclusion of women in the workforce, which is bound to leave long-term impacts on the wellness of women and their participation at work. In March 2020, women between the ages of 25 and 54 lost more than twice as many jobs as men in Ontario, Canada (Dessanti, 2020). Without effective and immediate interventions, the loss of female talent in the workplace will lead to long-term risks for organizations and the overall economy.

Representation in the office is also evolving. Women have been integrated into the corporate office environment for some time, but not without inherent challenges. Despite increased awareness of gender imbalances, women are not being represented in the corporate office any more than they were two years ago. In Canada, only 55.5% of women participated in Canada's labour force in April 2018, versus 61.2% in February 2020 (Catalyst, 2020). A report published by IBM found that in the span of one year of the current COVID-19 pandemic, five million women in the US lost or left their jobs (IBM, 2021). Boardrooms and executive positions look the same worldwide as they did two years ago, comprising a small percentage of women (8%) (IBM, 2021). Across senior

leadership positions, women of colour hold just 1 in 25 executive roles, while white women hold 1 in 5 (IBM, 2021). The disparity for diverse employees is as great, if not greater for women holding positions of corporate power and leadership. Globally, employers are trying to encourage inclusion and equality within the workplace, and to bridge the gender pay gap. When employers offer an inclusive, healthier and happier work environment, they end up having more productive employees as well as better employee retention.

Many employers and governing bodies, however, are strategically planning and applying policies as well as various wellness initiatives aimed at employee health and engagement. These measures are being applied to continue building a productive workforce as employees retire or change jobs and organizations lose resources and cut costs. Gilligan states that surveys indicate Canadians would rather earn less money at a different job where they have better support for mental health and wellness at work (Gilligan, 2020). Organizations that can prevent negative health impacts towards employees caused by excessive workloads are attempting to do so by providing and encouraging better environments, initiatives and behaviours that have healthier impacts. Employees could potentially live longer, which would allow older populations to be capable of remaining employed longer; potentially experience happier and more productive states of being; if these initiatives can be implemented (Amador, 2018). In her article for Allwork.Space, author Cecillia Amador explores the impacts of a healthier aging workforce. Amador states: “The prospect of older generations working for longer periods as their physical capability to remain employed improves, could affect the pace at which younger talent and ideas renew organizations” (2018). When workers are physically and mentally burdened by their jobs, whether they are in the workplace physically or virtually, they ultimately end up relying on some sort of external support system including healthcare, health insurance, financial support, and social services to be able to continue to work.

Greater awareness of mental health issues linked to stress in the workplace is also being recognized (Daruwalla, Zubin, et al., 2018). In addition to family support at home, workplaces responded to the rise of health-related work issues by increasing available human resources and employee wellness programs among other in-situ initiatives. Mental illness costs Canada fifty-one billion dollars annually and has become an economic and social burden (Kiladzel, 2020). Companies pay much of that amount through sick leave and disability expenses (Kiladzel, 2020). Despite employer and

government attempts to improve workplaces, support employee wellbeing and build strategies for women employees, there is no clear solution defined to date that ensures employees' continued health or protects employees from the negative impacts experienced in the workplace environment, including constantly changing workload, job security, economic changes and other emerging factors that can potentially impact the workplace, more so in the times of the COVID-19 pandemic.

Chapter 2: Study Methodology

Due to the limitations of time and resources for this paper, a narrower set of boundaries has been established for the project's scope. The project aims to explore workplace environments as they relate to health and wellness of employees, primarily for women working in a corporate office situation for both in-person and remote work settings. Office employees are a priority for mass public health initiatives as they may represent up to 70% of the United States workforce population (Largo-Wight et al., 2011). This segment of the workforce population is expected to represent the growing demographic of remote work employees within the next few years, making up to 40% of the American workforce (Sosa, 2018). In Canada, prior to the COVID-19 pandemic, 82% of employees worked at an external workplace (PricewaterhouseCoopers LLP, 2020). However, since then, 59% of those employees are now working remotely and 78% of this group expect a full or partial return back to the office as things start to return to normal (PricewaterhouseCoopers LLP, 2020).

This study explored literature and resources for a North American population, aged between early twenties up to mid-forties, with a focus on young women who are mothers or in childbearing years. The rationale is that they are a vulnerable population within the corporate office structure and workforce, especially - during and post - COVID-19 Pandemic. The study will not consider the effects that COVID-19 may have on non-binary individuals or transgender individuals due to a lack of data and time to respectfully and thoroughly review; however, the study will use cisgender data samples. This report attempts to understand how might we prevent health risks towards female employees, especially those working in corporate offices, while supporting their overall well-being and economic success.

This report is meant to be a status on women in the workplace, in reflection of

COVID-19 and its effects on their well-being and participation in the workplace. The report will provide an overview and scan of the topic as it relates to the well-being of corporate women employees and provide some recommendations based on the challenges and findings. A literature review of journal articles, reports, books, blogs and social media articles was undertaken and due to the recent events and impacts of COVID-19, new data and findings have been readily available, updated, and published by various online resources. The study, a timely endeavour, analyzes this secondary research data to better understand the issues and current discourse. Due to time and resource limitations, there has been limited time to undertake focus groups or participant surveys. Ultimately, however, the study aims to advocate for healthier employees, particularly for vulnerable members of the workforce and to promote diversity and equality in the workplace, be it physical or remote work. With COVID-19 severely impacting what a healthy workplace looks like, this research will explore this topic in further detail considering all these factors.

The COVID-19 pandemic has been a devastating experience for many. During the start of this research paper, the intent was to focus on employees' health and wellness issues working at an office. However, while undertaking research, the COVID-19 pandmeic hit, and the various effects of the crisis are ongoing. Data for the pandemic is still being collected and it is abundantly clear that the future of work for women in the workplace has taken a setback during lockdowns.

Chapter 3: Office Environments, Women in the Workplace, and the Changing Nature of Work

This chapter will explore the history of the initial designs of the open plan office, pioneered by Frank Lloyd Wright at the SC Johnson Company, and how it impacted women once they began to join the workforce. Additionally, it will briefly scan over the history of women and work, as well as focus on the evolving nature of work and the workplace and expand on how it has been impacted by the COVID-19 pandemic.

3.1 The History of Office Work Environments

Office workplaces are continuously evolving, and so do their impacts on women. The history behind the office workplace is attributed to renowned architect and design pioneer, Frank Lloyd Wright. In 1939, Wright designed what has been considered the first open office plan, the headquarters of S.C Johnson corporation (Edwards, 2017). At first glance, there are minimal differences between what Wright created then and the trendy contemporary, modernist open floor plan offices we might see today. The offices that Wright proposed included elegant dendriform tree-like columns, emerging up to the main ceiling of the open office floors (Edwards, 2017). The concept attempted to bring natural light through innovative glass piping, giving the impression of what visitors compared to a 'cathedral' (Edwards, 2017). The design introduced new office elements such as bright lights, warm spaces and cork ceilings to absorb noise from office acoustics (K2 Space, 2017). Wright also designed oval desks and chairs for the employees, keeping with the flowing concept of the structure (Edwards, 2017). The open floor plan also had ample space between each desk, or "workstation" (Edwards, 2017). The offices for managers on the floors above were spacious and befitting what the corporation imagined for its directors (Kalish, n.d.).

Additionally, there were some drawbacks to the design by Wright. The original furniture designed by Wright, namely a three-legged wheeling chair, was meant to promote good posture, however, they ended up being unstable and tipping over when not sitting with the correct posture, resulting in injured employees (Frank Lloyd Wright Sites, n.d.). As women made up a large portion of the workforce in the lower-paying jobs, they were subsequently located in the central hall, while men - predominantly managers, directors and executives - were exalted at the upper floor/mezzanine and could easily monitor the workers (often Secretaries) below (Holstein, 2020). It was a perfect office design for a male-dominated, hierarchica,l and parochial culture, and demonstrated the "conflict between abstract architectural principles and the actual human beings who make up the American workforce" (Holstein, 2020).

This seminal work, that inspired companies towards offices that reflected a corporate image, mostly perceived to be centered around 'strength' and 'masculinity', that simultaneously supported the worker, came at a time of post-war economic recovery; it led to the rebuilding and repositioning of the corporate "headquarter" for

giants of industry (K2 Space, 2017). Other companies have tried to copy Wright's design, but many were not able to execute it as effectively (Edwards, 2017). Wright may have imagined a more holistic and organic corporate office with his open office plan for SC Johnson, though its implementation in today's workplace, there remain issues related to noise, lighting, distractions, lack of variety and personal spaces, and cramming of workstations to maximize real estate value (Edwards, 2017). The corporate workplace culture, access, inclusion, equity and now, post-pandemic office planning are now the driving issues in considering the well-designed workplace.

The impetus for innovation after a crisis, such as war and economic downturn is apropos for today's situation with the COVID-19 pandemic. Pre-COVID-19 pandemic, the open office plan, a much-diminished variation of Wright's original concept, was designed to ensure the maximum number of workstations per floor to make the most on expensive real estate costs (Edwards, 2017). This model could be seen across corporate offices globally as open office spaces gained popularity, but it may need to evolve to fit a post-COVID-19 pandemic world to include social distancing measures. The original design transformed the workplace into "a great workroom", and public space, where lower-level employees could be seen, monitored, and watched for their productivity, while still attempting a sense of community for employees by having the whole workforce in view.

In 1950 Germany started a movement called *Burolandschaft*, meaning office landscape, and by the 1960's made its way to America (Edwards, 2017). Before Burolandschaft, offices were planned as boxy and rigid entities, but as the new movement took hold, they ended up with a fluid and organic layout, and this layout was meant to be open and flexible (Edwards, 2017). In 1960, the Herman Miller Corporation launched the *Action Office* to help provide a variety of alternate work settings for employees through modular furniture and walls, which added privacy and flexibility (K2 Space, 2017). It was at this time that Miller created the first known work 'cubicle', a three-sided vertical division that defined their individual space (K2 Space, 2017). Miller's goal was to keep offices open and flexible while providing some organization similar to the fluid and organic layouts found in Germany while still using customized furnishings (Kalish, n.d.). However, the number of female employees joining a male dominant office workplace also led to some changes to accommodate women (K2 Space, 2017). In 1968, The Observer ran a feature called "Would you let your daughter work in an open-plan

office?", because female employees were unable to wear trousers given that they were openly exposed to everyone in the workroom while working in a male-dominated workplace (K2 Space, 2017). To remedy this, the solution implemented was a "modesty board", a section of plywood attached to the front of desks as an attempt to offer more privacy and hide their legs (K2 Space, 2017). The office plan was initially designed for men, by men, without initial considerations of how they would affect women working in the contemporary office.

Akin to what happened to the adaptation of Wright's design, Miller's design was also copied unsuccessfully; both designs were taken to the extreme and implemented ineffectively by other organizations and for other typologies of the workplace (Edwards, 2017). The cubicle became a sea of grey that came with its own issues, by providing too much privacy and separation between employees (Kalish, n.d.). The ideas that Wright and Miller proposed had meant for office spaces to have both divided and open space, but the adaptations and recreations resulted in an extreme version of one or the other. As workplaces evolved, different strategies and methods were attempted and implemented by organizations to capitalize on their real estate and tools to ensure efficiency and productivity. Every organization is different but most need to account for a few scenarios within the workplace, such as the physical workplace, the virtual workplace and the mental workplace. Today, there are a lot of changes occurring to the office spaces that affect employee productivity, organizational strategies, office culture, values and budgets. However they evolve, they still hold elements from the previous office space designs by Wright or Miller.

Businesses are constantly adapting and evolving their business or economic models, adjusting their workforce as they make changes, so it only makes sense for the workplace to evolve as well. Francis Duffy states "just as business must flex and change to survive, the most vital function of an office building is to facilitate and accommodate change" (Duffy, 2002, 9). He explains how poor office design can affect business life in a variety of ways that can cripple daily functions and contribute to an environment that poisons and pollutes (Duffy, 2002). Even if employees are performing their work in subpar environments and getting it done, it likely is not their best work. Despite more office employees performing their work in remote environments due to COVID-19, it does not mean office spaces do not need to continue to evolve and provide a safe, comfortable place for employees to work. Especially now that there are fewer women

than before in the physical workplace, representation in the office is bound to change. This can ultimately affect employee satisfaction and workplace culture.

3.2 A Brief History of Women in the Workplace

Women had faced a long, hard struggle for decades before they got to where they are today in the workplace. Initially, men were considered the breadwinner and women the homemaker; if women did choose to work, it was also expected that after they married, that they would quit the workforce and focus on their domestic responsibilities of being a mother and wife (Connelly, 2006). The idea and expectation that women belong in the home has had a significant effect on their participation and treatment in the workplace. This included segregation, low pay, gender bias and discrimination, sexism, along with limited access and diminished opportunities for advancement in the workplace. “Employers and moral reformers were concerned that work would impair the femininity and high moral standards of women and distract them from their true calling as wives and mothers” (Connelly, 2006).

In the early days of women entering the labour market, they were considered a source of cheap and expendable labour (Connelly, 2006). Historically, in Canada, women earned 52.8% of what men earned by 1911, 58% in 1971 and 66% as of 1996 (Connelly, 2006). In 1901, women comprised a mere 13% of the labour force. In the 19th century, when women began to join factory work, young girls worked 60 hours a week for 80 cents (Connelly, 2006). Women's jobs were segregated to “female occupations”, where they had domestic roles and extensions of what they were already considered to be doing in the home (Connelly, 2006). The majority of the occupations that women were employed at included work as servants, dressmakers, teachers, seamstresses, tailors, housekeepers, launderers, milliners, factory workers and saleswomen (Connelly, 2006).

During the first World War, women were able to take over several jobs that males performed prior to their absence, but once men started to return, women were highly encouraged to leave work (Connelly, 2006). Married women were actually legislated out of keeping their jobs by the government, all the while not earning the same wages as men for. By 1921, 65% of all women workers were in clerical, domestic services and professional roles (primarily teaching and nursing) (Connelly, 2006).

Further, women were not recognized as “persons” until 1929 in Canada and not all women were able to vote until 1940 (Connelly, 2006). During WWII and the Great Depression, women were needed once again to perform men’s jobs, and during this time they were incentivized through free government nurseries or childcare and income tax concessions (Connelly, 2006). Women were still expected to undertake this work for lower wages than men, and when the war came to an end, these incentives were withdrawn; many women were discouraged from entering the workforce again (Connelly, 2006). Nonetheless, the number of female occupations and jobs were expanding, and many women found employment or continued to work. By 1951, women comprised 22% of the labour force (Connelly, 2006). During this time the economy boomed, productivity increased, consumer goods became cheaper in price and more accessible; by 1994, women comprised 43% of the total labour force, doubling that of 45 years prior; the pay gap between men and women narrowed at 74% (Connelly, 2006). While women were still primarily employed in the same so-called “female occupations”, women started the feminist movement. In Canada, during the 1960’s and onwards, organizing groups and fighting for equality in education, employment, birth control, and to end violence against women (Connelly, 2006). “Feminist work during this time challenged misogyny and inspired activism” (Strong-Boag, 2016).

Fast forward to the twentieth century, the cost of living continued to increase significantly. In Canada, few families can house, clothe, feed and educate their children with only one income. Canadian women are more educated than men according to Stats Canada and, despite more women having tertiary degrees, highly educated Canadian women still earn 73% of what their male counterparts earned in 2016 (Catalyst, 2020). On a U.S. perspective, The Center for American Progress found that “women need an additional degree to earn as much as men, meaning that a woman with a college degree will earn as much, on average, as a man with a high school diploma” (Glynn, 2019). By 2019, Canadian women who are 15 years and older represented almost half (47.4%) of the labour force, compared to 37.6% in 1976—an over 25% percentage increase (Catalyst, 2020). It took many years and several people to achieve this level of social and financial gains for women in the workplace, and therefore, the impact of the COVID-19 pandemic is a great setback in many ways for the advancement of women in the workplace.

3.3 Change in Work Environments Before and After the COVID-19 Pandemic

A global study was done by Herman Miller research programs that surveyed organizations across two years for the changing nature of both work and place. It found that "between 75-99% of facility managers in all regions indicated that creating spaces to improve employee engagement was a strategic priority (Herman Miller, 2013). To achieve this, creating a sense of community and belonging was a top workplace strategy on all continents" (Herman Miller, 2013). The office is no longer just a place to work, but a strategic tool to engage employees in the best way possible to achieve higher quality output. However, creating a sense of belonging, especially for women post-COVID-19 pandemic will have its challenges, with declining female representation in the workplace due to the significant number of women that have left the workforce.

Work from home is becoming more normalized as companies shift to a work from home model. According to a recent study done by the Massachusetts Institute of Technology (MIT), about half of the people who were employed before the COVID-19 pandemic are now working from home (Ibarra et al., 2020). A growing number of companies including Facebook and Twitter are allowing employees to work from home permanently (Ibarra et al., 2020). Kate Power, a researcher and consultant on sustainable change, mentions that as a result of the COVID-19 pandemic, people are experiencing reduced commute time and increased family time (Power, 2020). This might be seen as an opportunity to provide an equalizer for women to still work and progress their careers during their caregiving years and attend to family (Ibarra et al., 2020). While remote work allows employees more flexibility, and may also strengthen family bonds (Power, 2020), it is important to keep women in mind when making policies for employees as they return back to work physically.

According to the Center of American Progress, "the number of women who dropped out of the labour force because of the COVID-19 pandemic is four times that of men'' (Fisher, 2020). As organizations primarily have male decision makers who are working at the top, women may have reduced networking opportunities by working from home; as a result, it may potentially be harder to build employee relationships virtually as opposed to physically (Ibarra et al., 2020). In addition, when people are more comfortable rejoining the workforce physically and are going back to the office, more women may potentially decide to stay at home due to their at-home responsibilities and work remotely. It is possible that, in the workplaces where this shift happens, women

may become ‘out of sight out of mind’ (Ibarra et al., 2020). If the majority of presence in the physical office is male, they might be seen as the present contributors to the business (Ibarra et al., 2020). Organizations may compensate people with a promotion or a raise for the show they put on at work and reward those they can physically see present, versus the actual output that is being produced. (Ibarra et al., 2020).

Access to external childcare services has allowed many women to re-enter the workforce. However, they generally still take on the majority of the care work in the home and carry the mental load, which involves planning schedules and performing emotional labour to tend to family relationships, as well as taking care of children and the elderly (Power, 2020). “Globally women and girls are responsible for 75% of unpaid care and domestic work in homes and communities every day” (Moreira de Silva, 2019, as cited in Power, 2020). Some families turn to options such as grandparental care for assistance in regular childcare. However, with social distancing rules, not to mention the higher mortality posed by COVID-19 to the elderly, grandparental care options have also become limited. In Canada, daycares and schools have closed during many periods of the COVID-19 pandemic. Some women have stepped back from the workforce during these lockdowns, but for the women that are still working and carrying additional stressors from the home environment, they may suffer from poor mental health and/or job dissatisfaction related to work-family conflict. Care work is core work for the economy as it sustains all other work in society, and although the quality of unpaid care work varies on “social inequalities, conflict, and other factors, it is ‘unpaid’ and routinely undervalued and exploited, generating life-long inequalities in social standing, job opportunities, income, and power between men and women” (Raworth 2017, as cited in Power, 2020).

Such conflicts and mental health issues in an employee’s life directly have a significant impact on productivity and performance at work (Burton, 2010). Research has found that “employees experiencing high work-family conflict demonstrate up to 13 times as much absenteeism at work and have a 2.3 times higher intention of quitting” (Burton, 2010, pp. 37). If fewer women participate in the workforce in the future, it will likely slow down the progress of gender equality as well as economic recovery; due to rising unemployment rates within women and less income earned to spend back into the economy. “In the United States, women’s unemployment increased by 12.8% points between February and April 2020, versus an increase of only 9.9% points for men” (Alon et al., 2020, p. 1). This is particularly harmful to women who are of low income, women

of colour, and single mothers who are more vulnerable.

Lean In, a global advocacy group promoting equality, found that a recent survey in the United States reported "while more than a third of women have been laid off or received pay cuts due to the coronavirus outbreak, the situation for women of color tends to be even more challenging: black women are twice as likely as white men to report these financial issues, with 54% losing their job or income compared with 27% of white men" (LeanIn 2020). Particularly women of color are also less likely to have a financial safety net, due to greater job insecurity and lower average pay (LeanIn 2020). Women are twice as likely as men to report being unable to afford necessities for more than a month if they lost their job, while black women are three times as likely as white men to report this financial insecurity" (LeanIn 2020, as cited in Power 2020). Although women are leaving the workplace due to the difficulties of the COVID-19 pandemic, it will also result in some problematic economic and societal long-term consequences. Additional difficulties that women are facing due to the COVID-19 pandemic will be discussed in more detail in chapter 4.2.

Chapter 4: Women, Employment and Unpaid Care Work

This chapter will discuss women's responsibilities and how they have shaped their roles at work and at home, prior to and during COVID-19. It will also focus on what unpaid care work means for women, society, and its implications. Lastly, it will also briefly explore the social, physical and mental health concerns that arise for women due to work and the workplace as well as domestic issues.

4.1 Women at work prior to the COVID-19 Pandemic

Women comprise seven out of ten health and social care workers and contribute $3 trillion USD annually to global health, half in the form of unpaid care work (WHO, 2019). In virtually all countries and traditions around the world, women bear the primary responsibility for providing domestic care (Nussbaum 2005), which poses constraints on the kind of employment they can take up (Chen et al., 2005). The unpaid care work "caregiving" that women are responsible for determines where they might find themselves in the labour market. It also means that gendered notions of what is

considered ‘mens’ work and ‘women's work’ have historically shaped the structure of job roles and responsibilities in the labour market (Chen et al., 2005).

The following terms refer to ‘unpaid care work’, a term which is often used to refer to the provision of services within households for other households and community members. ‘Unpaid labour’, which can also refer to unpaid care work, is also unpaid work within a family business, for example, ‘Reproductive work’, can refer to unpaid care work as well as giving birth and breastfeeding; and ‘Homework’, can also refer to paid work done in the home, on subcontract from an employer.

“Each word within the term ‘unpaid care work’ is important:

- ‘unpaid’ meaning that the person doing the activity does not receive a wage for it, particularly a living wage.
- ‘care’ meaning that the activity serves people and their well-being, it is a notion of health and well-being.
- ‘work’ meaning that the activity has a cost in terms of time and energy and arises out of a social or contractual obligation, such as marriage or less formal social relationships”

(Chen et al., 2005, pp. 24).

Women's work is usually paid less than men and single mothers who are the primary household supporters have even less financial security, seen more profoundly among minorities or immigrant women. According to Statistics Canada, between the years 1998-2018, six out of ten employees paid a minimum wage were women, and in 2018 12% of immigrant employees earned minimum wage compared to 9.8% of Canadian-born employees (Dionne-Simard & Miller, 2019). Also in 2018, 32.7% of all minimum wage workers were employed in retail, while 26% worked in accommodation and food services (Dionne-Simard & Miller, 2019). As previously discussed, these are industries where women were primarily employed.

As a result of gaps created by gender roles through unequal pay, lack of equitable benefits and career progression, the stereotyping has contributed to financial disadvantages and a higher incidence of poverty among women, in addition to other inequalities in terms of class, religion or race compared to men (Chen et al., 2005). Thus,

it comes as no surprise that women are not able to surpass or achieve the same compensations as their male counterparts in most financial and professional situations. Occupational segregation by gender is still a very real problem, for example, based on WHO's analysis of health care workers across 104 countries, it was found that 67% of the workforce was female; yet the physicians, dentists, pharmacists and other professionals were a majority of males (WHO, 2019). Females were primarily found in midwifery and nursing roles among the medical professions (WHO, 2019). Plenty of women work in informal work arrangements, such as housework or home care jobs, which is not valued by society in the same way as work in the 'professions' (WHO, 2019). An article by Canada Broadcasting Company (CBC) stated that part of the problem for inequities in the workplace, is that feminized industries are not paid well to begin with (Edwards, 2021).

Women who participate in formal employment while also performing childcare work, carry much of the mental load and perform a "second shift" after work when they go home. In the 2019 Women in the Workplace report, mentioned by LeanIn, 40% of women said they do all or most of the childcare and housework for their families; just 12% of men said the same (Thomas, 2020). As mentioned previously, this disparity and gap in care work holds true globally. According to a survey conducted by the Organization for Economic Co-operation and Development (OECD) in 20 countries, women do an average of 173 minutes of housework each day, compared to just 71 minutes by men (Thomas, 2020).

Taking part in both formal and informal work is even more challenging for single mothers. If a single mother does not have a partner or family to help with financial support, oftentimes, they are forced to choose short-term goals versus long-term ones that could benefit them more in the future. Studies show that one in eight women worldwide is a single mother (Thomas, 2020). "An analysis of 104 countries revealed that women form 70% of workers in the health and social sectors, and 50% of unpaid carers. At the same time, over 70% of CEOs and board chairs in global health are men, while just 5% of are women from low- and middle-income countries" (Sili, 2020). Although a lot of women are working on the frontlines of the COVID-19 pandemic, especially in the health and social sectors, "yet they have little say in the policy measures put in place to address the crisis" (Sili, 2020).

Other countries and public systems have attempted to improve these situations by encouraging women to be more involved in the workplace, and "going out to work" to be part of the social and economic fabric of communities. However, the impetus to work has not given much relief to women with their historic and dual responsibilities of 'care-work'. Instead, women are juggling their jobs, trying to make an income while doing the primary domestic and societal care work. For example, in former communist countries, governments encouraged women to participate in the labour market on equal terms with men (Chen et al., 2005). This involved extremely high rates of state social spending, especially on childcare, while little attention was given to finding new ways of changing the gendered division of care work (Pascall and Lewis, 2004, as cited in Chen et al., 2005). Ideally, the responsibility of care work is shared and not dependent on just women. According to the UN's organization's executive director, Anita Bhatia, "there is great opportunity to 'unstereotype' the gender roles that play out in households in many parts of the world" (Bhatia, 2020 as cited in Power, 2020). "UN Women's organizations encourage governments, especially male leaders, to join the HeForShe campaign that calls on men and boys to ensure that they are doing their fair share at home" (Power, 2020).

4.2 Work/Life during the COVID-19 Pandemic

For plenty of men and women, their employment and financial security is significant to their well-being and livelihood, to support themselves as well as their families. However, with increasing job insecurity and pay cuts being administered during the COVID-19 pandemic, the growing unrest has driven employees to do whatever it takes to maintain their employment and income, up to the point of going to work despite being sick. While the motivations for going into work while sick are understandable, it can cause a chain of harmful, and even deadly effects. Such decisions put the families of these employees as well as their colleagues or customers in the workplace at risk for contracting and spreading the virus, potentially reducing the quality of life for the people around them. A recent study conducted by Public Health in the Greater Toronto Area from August 2020 to January 2021, shows that one in four employees went to work despite showing symptoms of the virus, and out of those workers, 1% went to work after receiving a positive test for COVID-19 (City News, 2021). Nearly 8000 cases were studied to show that 2000 people still went into work despite being sick, and 80 of them still went into work despite testing positive for the COVID-19

virus (City News, 2021). This is due to most employees not having access to paid sick leave and therefore still going into work when they are unwell. This data proves that if people were forced to choose between losing a paycheque and putting food on the table, a significant portion of the population will choose the paycheque (City News, 2021).

In Canada, only 40% of employees have access to paid sick leave, of which only 10% of employees are low-income, low-wage earners (City News, 2021). Women, being a primary group of lower wage earners, are more likely to be significantly affected by unpaid sick leave and may be a part of the statistic of 1 out of 4 people that are still going into work despite feeling sick. Moreover, with socio-economic status being one of the primary determinants of health, “wealthier people are expected to be healthier than poor people'' (Burton, 2010, pp. 40). Also, many studies do not consider gender-specific data when conducting studies, similarly to how this study by Public Health reported by City News does not highlight data with a gender perspective for women in mind. However, it did find that COVID-19 and unpaid sick leave has “affected certain groups disproportionately compared to other groups. And it is often poorer people, marginalized people, working gig economy, racialized communities, minimum wage workers, the people that are working out there to keep us safe and to keep us moving forward” (City News, 2021). It is likely that a significant portion of these groups are women.

Living with these altered conditions and increased time spent at home, from either unemployment or shifting to remote work, parental roles in domestic household tasks have also shifted or been reorganized. “The International Labour Organization (ILO) calculates that on average women around the world perform 4 hours and 25 minutes of unpaid care work every day compared with 1 hour and 23 minutes for men'' (Pozzan and Cattaneo, 2020 as cited in Power 2020). When women spend more time doing unpaid work, it allows less time and opportunity for paid work, decreased productivity in their jobs or further education, leisure, and skill growth to advance their careers. In July 2020, the Mckinsey Global Institute reported that women’s jobs are “1.8% more vulnerable to the crisis than men’s jobs...women make up 39% of global employment and account for 54% of overall job losses'' (Chaudhri, 2020). Also, in terms of unpaid care work and health, the effects towards long-term health of women are unclear, “there is little knowledge of the prevalence and incidence of diseases, accidents

and risk factors related to unpaid work, which mainly affects women" (Östlin, 2002 as cited in Messing & Östlin, 2006, pp. 24).

Unpaid care work does not have any tactical value in today's North American society, and scholars have argued for "economic measures that value this core work that sustains all other work in society" (Donath 2000; Dengler and Strunk 2018; Folbre 2001; Schor 2008 as cited in Power 2020). The Canadian Urban Institute released a report after a year of assessing the COVID-19 pandemic and highlighted some statistics after surveying 180,000 Canadians (Canadian Urban Institute, 2021). When respondents were asked about whether the COVID-19 pandemic has affected one's household, the report said people who identify as women (51%) and gender non-binary (63%) are more likely to report a stronger impact than men (51%) (Canadian Urban Institute, 2021). People with children in the home also report stronger impacts than people living without children (31%) (Canadian Urban Institute, 2021). The study concluded that women, and people with children were more impacted by the pandemic than men (Canadian Urban Institute, 2021), yet there is no extra support in terms of economic measures provided for groups that have been impacted more severely.

Nowadays, the home has become a multi-purpose place of work and productivity while trying to provide a safe haven for leisure, relaxation and rest. Many times, these two worlds will collide, especially when multiple people are trying to function together in one space. Employee wellness will potentially take a hit if their home lives keep pushing into their work lives, unwittingly affecting everyone around them, including children. If this cycle continues for over-stressed parents whose health and wellness have been suffering, it will likely impact their mental and physical capacity to take care of their children, home and families.

Formal employment that allows working mothers the flexibility of remote work, might imply the possibility of managing childcare at the same time as working. Children have been uniquely impacted by the COVID-19 pandemic, with negative outcomes on their social life and education. Mothers who work from home may inadvertently divide their attention between their jobs and providing care for their children. "I was already working harder than I thought was possible. Now I'm supposed to be a high-performing employee, a reassuring mom during a global crisis – and my kid's teacher too?!" (Thomas, 2020). This includes supervising and assisting in remote learning amongst

recurring requirements such as food and entertainment while balancing many responsibilities. It is important to note that remote learning poses additional challenges to both parents and young children, who lack the practical assistance from teachers that they would have received in an in-person setting at school. The household may not have the same teaching tools available to schools, and certainly has less space and facilities for activities. These are just some factors that will add mental stress to both working and non-working moms, despite having the flexibility to work from home. Hence, although the COVID-19 pandemic might cause companies to shift to a hybrid work model that is more flexible and does not require the same in-person attendance as before, it may still be a challenging way to work for women.

The New York Times claims that the COVID-19 pandemic will take our women back ten years in the workplace (Taub, 2020). “Substantial research has shown that most professional gender gaps are in fact motherhood gaps: women without children are much closer to parity with men when it comes to salaries and promotions, but mothers pay a large career penalty” (Taub, 2020). Women have historically been behind the curve in terms of inequality and equal rights and now, women have now fallen even further behind. Until affordable quality childcare is accessible, many women will not go back to working full time due to their at home childcare responsibilities. If women do not go back to work, the economy will recover slower. That is because if women are not returning back to work full time and their household income will subsequently decrease. This may be concerning because, for example, in Canada, 57% of the Canadian GDP is driven by household spending (Canadian Urban Institute, 2021). Women constitute an integral part of the workplace and the economy and their ability to participate in it has a significant economic impact.

Unfortunately, the consequences of the COVID-19 pandemic were deadly to women in Canada. In May 2020, the Globe and Mail reported that women make up over half of COVID-19 deaths in Canada at 53%, which is, more than any other country in the world, according to a research initiative by the University College London’s Centre for Gender and Global Health (Denette, 2020). This research found that as of May 2020, Quebec and Ontario are primary drivers of this finding in Canada. In Quebec, 54.9% of COVID-19 deaths have been among women, compared to 54.4% in Ontario (Denette, 2020). Women account for 59.3% of infections in Quebec and for 56.9% in Ontario (Denette, 2020).

A reason to explain this finding is that women are the ones who are generally caring for the sick, in addition to the fact that older women live four years longer than men in Canada, who are also more prone to being infected (Denette, 2020). Women make up over 70% of Ontario and Quebec's long-term care residents, and more than 80% of personal support workers and nurses are subjected to a high risk of infection while working in long-term care homes are also women (Denette, 2020). Biologically, scientists believe that men are actually more prone to get sick and die from the COVID-19 virus, because they are more likely to smoke, drink and suffer from chronic conditions, such as diabetes and heart disease (Denette, 2020). Globally, the study also found that more men died of COVID-19 than women as of May 2020 everywhere except Canada, and Portugal and Finland reported 51% of deaths were among women (Denette, 2020). However, despite the fact that women are biologically less susceptible to dying from the COVID-19 virus than men, the lack of safety measures in regards to their occupations and care work, did not help prevent countless women from sickness and death during the COVID-19 pandemic.

4.3 The Working Woman and her Childcare Dilemma

Historically, as women started to join the workplace, many companies made an effort to try and promote inclusivity and diversity in their hiring process. While these measures may have been implemented with the objective to treat all employees equally, not all employees are the same. Women, with or without children, may have different needs and preferences than men. For example, many women perform a 'second shift' after work; the second shift is when women are taking care of the children or elderly after work (Power, 2020). "When people talk about empowering women because they now also work outside the home in the paid economy, in addition to taking care of their children and home, without any systematic attempt to encourage or enable men to take more responsibility. This is what sociologist Arlie Hochschild famously referred to as "the second shift" (Power, 2020). Despite women having different duties, responsibilities and expectations in the economy than men such as childcare, very few workplaces have a childcare facility available to help support the needs of these groups of employees. For example, only 4-8% of FORTUNE 100 companies offer on-site childcare (Meister, 2018).

Families face difficult and expensive decisions with childcare options, which are not readily available. Daycare is quite an expensive option, especially in many parts of North America. For many families, it does not always make financial sense for both parents to stay at work and pay for daycare. For example, a family in Toronto Canada sought daycare services for their two young boys in 2019, calculated a cost of two thousand six hundred dollars a month (CAD) (Collie, 2019). The median full-time cost for infant daycare in Toronto is $21,096 per year, and $16,248 per year for toddlers (Stechyson, 2018). There are many families with dual earners, where both parents have agreed to work while they pay for childcare services to assist them. Now, with the COVID-19 pandemic and fewer childcare options, one parent has to take a hit and step back from the workplace to take that childcare responsibility.

Institutional childcare has not been accessible for many families during the COVID-19 pandemic and unpaid childcare work has been falling more heavily on women, which has constrained their ability to work (United Nations 2020, as cited in Power, 2020). The cost and availability of care is a barrier for women to re-enter the workforce and participate in paid labour, as they stay home and help with care work instead. There are lingering frustrations on the same issues and trends occurring about equality for the past several years. For example, women are generally the lower-income wage earner in a hetero-sexual relationship, which is another reason they are the ones that step back from work to provide family care (Collie, 2019). In Canada, it has been over a year since lockdowns went into effect, and childcare remains unavailable in many regions, which may slow down the ability to get back to work for some women. Moreover, this setback at work will affect women long-term financially, even after their child is older. Women absorb the underlying costs of providing 'free' care work in the home by reducing their earning potential long-term, by adding long gaps their resume, bank less experience and as a result earn less money and provide fewer contributions to their pensions, leading to less financial security in the future and reducing their lifetime income (Power, 2020).

Recently, in Canada, there have been some positive conversations and actions to support childcare. In 2018, Canada announced that in Ontario, there will be free daycare for children aged two and a half years old until they are eligible for kindergarten at the age of four (Stechyson, 2018). This was anticipated to save parents in Ontario an estimated $17,000 per child (Stechyson, 2018). This plan was dependent on the liberals winning, which they did not. The new government had many budget cuts in childcare

and had scrapped this plan (Jones, 2019). However, despite the fact that childcare organizations are currently facing closures due to the COVID-19 pandemic in parts of Canada, in January 2021 the government of Ontario, announced that it will be providing free, dependable and safe childcare for essential front-line workers (Laucius, 2021). The list of eligible workers was later expanded to include people working in grocery stores, pharmacy workers, farmers, truck drivers and various other work that may also be considered essential (Laucius, 2021). The list continues to grow to include more front-line workers in Ontario, however right now only these workers are able to access free childcare. There are plenty of people who are not able to access such benefits, and as most office employees are working remotely, they are trying to manage to work and take care of their families at the same time. Regardless, introducing free healthcare to essential workers is a great step to help parents in the economy.

A report from the Canadian Institute stated that in April 2020, 85% of Canadians aged eighteen and over reported that their mental health was good, very good or excellent. However, by the end of February 2021, that percentage had fallen 18% points to 67% (Canadian Urban Institute, 2021). This means that adults are not feeling very good a year after living in the pandemic but are still trying to manage their lives, including jobs, responsibilities, children and households.

4.4 Social, Physical/Mental Health, and Domestic Issues related to Work and new realities of COVID-19

.1 Social Issues Caused by Work

Katherine Schwab from Fast Company examined a study done by Alison Hirst from Anglia Ruskin University and Christina Schwabenland from the University of Bedfordshire, where they observed the local U.K. government move one thousand one hundred employees from traditional offices to large open floor plan offices over the course of three years (Schwab, 2018). They found that open floor plan offices designed by men are subtly sexist and women felt differently in them versus men. The male designers of the office compared the open glass wall feeling of being on a nude beach (Schwab, 2018). Where one might feel self-conscious at being nude but would likely get used to it since everyone’s nude. Perhaps that is the case for men, but the study found that women became more and more self-conscious about their appearance (Schwab,

2018). Women started to dress differently, wore more make-up, hid from certain areas of the office because of comments from men, avoided simple actions that took care of their health if it revealed female health issues and several others (Schwab, 2018). Women felt frequently watched and judged by their male peers and it was reported that men did not feel judged or feel the same pressures that women did (Schwab, 2018). Office plans can be subtly sexist, but would they be different if women were a part of the design process, and if so, would these issues still be valid? (Schwab, 2018).

The initial designs for the office, office furniture, as well as studies done to base new office designs off, are generally based on the original designs of male designers and male architects, such as Wright and Miller. It may be difficult to understand the impact on women's health from their work environments without understanding their gender roles, socio-economic class, race and ethnicity. If there is a gender bias when workplace initiatives are being put in place, employees may be impacted by various risk factors which further influence gender inequalities in the workplace. There is evidence to support that there is gender bias in occupational health research. The WHO released a publication that reviewed some evidence on gender equality and health at work and found that:

> "Women's work-related health cannot be understood without adding other frameworks related to gender roles and women's work in the domestic sphere." (Doyal, 1995, Orth-Gomér et al., 2000, Wamala et al., 2000, as cited in Messing, Östlin, 2006)

As a result, the office environment can be a space that contributes to social pressures and subtle practices (such as sexism), which can impact women and their behaviour as well as their performance at work.

Since currently there is no overarching cure for the COVID-19 virus, the curative approach already falls short. Many individuals at work, especially those working in part-time jobs, do not have access to additional health benefits outside what is provided by the federal or provincial government, limiting access to the level of care they might need to remain healthy. For example, 61 Indigenous communities across Canada do not have access to clean water and are under boil-water advisories (Kuryk, 2020). Access to resources related to social determinants of health are not equally distributed.

Inaccessibility to services and lack of employment opportunities are all factors that contribute to inequalities women still face, ones that prevent them from having a better quality of life and overall well-being.

.2 Physical Health Issues Caused by Work

When conducting research for work and health, a fundamental element should look at how biological, social and environmental factors can impact the health of women and men. However, the historical research has, by and large, left women out of the data collection and this is problematic when trying to understand the physical, physiological and other factors women experience.

> "Many occupational health studies are gender-blind. Occupational health research – has been heavily criticized during the last decade for the general lack of a gender perspective, usually leading to the exclusion of women and their concerns. Researchers have failed to include women in studies and have often not considered gender- and sex-specific factors when designing studies and analysing data" (Zahm et al., 1994; Neidhammer et al., 2000; Messing et al., 2003, as cited in Messing, Östlin, 2006).

This impacts workplace design and its formation throughout history. When offices and workplaces were initially being designed, even if they were looking to do their due diligence and consult workplace health research studies to provide a safe and healthy environment for all, they were unconsciously leaving women out of their office design process. Which ultimately impacted both men's and women's health, along with their mortality rate due to their participation in the workplace.

> "According to the International Labour Organization (ILO, 2005), each year an estimated 2.2 million men and women die from work-related injuries and diseases. Moreover, annually, an estimated 160 million new cases of non-fatal work-related diseases occur worldwide. These include cancer, respiratory and cardiovascular diseases, infectious diseases, musculoskeletal and reproductive disorders, and mental and neurological illnesses" (Takala, 2002, as cited in Messing & Östlin, 2006).

When the office is not designed with safety and employee wellness in mind, it can lead to short and long-term risks affecting employee health. This subjects employees to work with various physical and psychological hazards such as: heavy lifting, repetitive working movements, sustained static postures, awkward postures, night work, long hours, violence, noise, vibration, heat, cold, chemicals, stress related to high mental demand, speed, lack of control over the way work is done, lack of social support, lack of respect, discrimination, psychological and sexual harassment (Messing & Östlin, 2006). It was found that women suffering from these factors varied based on the location and socio-economic status of their environment. For example, in developed countries, the hazards women were exposed to were things like awkward postures and highly repetitive movements, which will generally cause long-term impairments compared to less developed countries which had more immediate impacts (Messing & Östlin, 2006). Women in Latin America were exposed to chemicals, ergonomic hazards, noise, and stress (Cedillo et al., 1997, as cited in Messing & Östlin, 2006).

One study found that 17% of women had a cumulative trauma disorder diagnosed on physical examination (Meservy et al., 1997, as cited in Messing & Östlin, 2006). Almost twice as many women as men reported such disorders and, in general, women are exposed to psychosocial risk factors at work, such as negative stress, psychological and sexual harassment and monotonous work more often than men (Arcand et al., 2000, as cited in Messing & Östlin, 2006). Compared to North America, in less developed countries, there are numerous more hazards and regulations which may be non-existent or ignored (Takaro et al., 1999, as cited in Messing & Östlin, 2006) causing employees to be less protected and more vulnerable towards psychological and physical hazards. Moreover, the repetitive movements and heavy loads that employees may suffer with can:

> "Damage bones, joints, muscles and nerves. Working in overly hot or cold temperatures can affect the cardiovascular and reproductive systems, causing pain and illness. Working under pressure with little power to change the work the employee needs to perform, can result in the work environment causing psychological and physical distress" (Messing & Östlin, 2006, p. v).

The combination of paid and unpaid work affects women's health (Brisson et al., 1999, as cited in Messing & Östlin, 2006) and work-related fatigue, repetitive strain injury, infections and mental health problems are more common among women than

among men (Östlin, 2002a, as cited in Messing & Östlin, 2006). The United Nations released a report in April 2020 confirming that “unpaid care work has increased with children out of school, heightened care needs of older persons and overwhelmed health services'' (Power, 2020). This has caused women to step in and support these responsibilities that have been removed from other care systems, and potentially increasing their level of fatigue, burden, stress, strain, injury and risk of infections to their health. Long term, these effects may potentially only worsen if some relief is not provided to their load.

This is of significant importance due to the contribution of the diseases and disabilities employees will acquire throughout their working life. Currently, 24% of all women in Canada have a disability (Edwards, 2021). This is a significant statistic, and to accommodate these members at work, companies will have to put in more measures to include and support them in the workplace. It makes sense to focus on preventative actions rather than wait to implement reactive solutions.

‘When’ people work might also be a determinant of health as well. The study published by WHO on healthy models found that working in shifts can cause deleterious effects on both mental and physical health (Burton, 2010).

> “Some of the physical effects of working rotating shifts are increased risk of breast cancer, irregular menstrual cycle, miscarriage, ulcers, constipation, diarrhoea, insomnia, high blood pressure, and heart disease. As well as increased levels of anxiety, depression, work-family conflict, and social isolation” (Burton, 2010, pp. 33).

.3 Mental Health Issues Caused by Work

It goes without saying, that mental health is impacted by lockdowns, unemployment, and job losses. As previously discussed, more women have lost their jobs or stepped back from work than men during the COVID-19 pandemic. Focusing on the well-being of people relative to work is crucial because there is a projected increase in suicide from 418 to 2114 in Canadian suicide cases associated with joblessness (McIntyre and Lee 2020, as cited in Xiong., et al, 2020). Women are suffering from joblessness since the COVID-19 pandemic, and it is crucial that they are soon

represented in the workplace again or they may have to face severe mental health impacts as a result. Mental health should not be taken lightly and seen as less equal to physical health, because physical and mental health are intertwined (Burton, 2010). When physical health is impaired, it affects the mind, and when mental health and well-being are impaired, it affects the physical body (Burton, 2010).

> "To safeguard one's existence, that means to have a fixed and reliable income. That is extremely important... The point is to have security in the job. This is the main criteria [for a healthy workplace] indicated by the employees" (Burton, 2010, pp.33).

Employment allows people the means of obtaining adequate economic resources for material, physical, mental and social well-being and full participation in society, and is linked to an individual's identity and social status (Burton, 2010). Employment outside the home is an important source of social support and self-esteem and helps women to avoid social isolation in the home (Romito, 1994; Razavi, 2000, as cited in Messing & Östlin, 2006, pp. 11). It can help people feel valued and that they are a part of a larger purpose. Work and the workplace can also provide a sense of community and belonging. On the other hand, experiencing negative mental health side effects is also a reality for many people at work. According to WHO (2019) "work is good for mental health, but a negative working environment can lead to physical and mental health problems". In previously mentioned works done by PWC in Singapore, 52% of residents claimed stress levels went up in the last six months of 2016 due to working long hours and burn out (Daruwalla, Zubin, et al, 2019). As well as that in Singapore, 1 in 3 residents are at risk for developing a lifetime of diabetes, 1 in 8 residents have a mental disorder, and 52% of residents claimed stress levels went up in the last six months due to working long hours and burn out (Daruwalla, Zubin, et al, 2019).

If employees are not supported at work, there is a cost to pay for employers as well as society. In 2002 Canadian businesses reported an estimated cost of $33 billion CAD per year, due to mental health problems and a myriad of non-clinical diagnoses (e.g., burnout, subclinical depression, etc.) (Burton, 2010). "A conservative estimate of productivity losses alone due to depression, anxiety and substance abuse in Canada for enterprises and society is $11.1 billion per annum" (Burton, 2010, pp.37). During the

year 2000 in France, a total of 31 million working days were lost due to depression (Burton, 2010).

To understand how the COVID-19 recession and post-pandemic economic state will impact women, there are previous disease epidemics that can be referred to. Historically speaking, when epidemics like the bird flu, swine flu, or SARS, impacted countries in the past, the negative effects lasted for several years for women, even after men's income recovered to previous numbers (Power, 2020). Julia Smith, a health-policy researcher at Simon Fraser University, told The New York times "men's income returned to what they had made pre-outbreak faster than women's income" (Lewis, 2020). The Toronto Fallout Report, which captured the first seven months of the COVID-19 pandemic in Toronto, also found that "unlike in previous recessions, job losses have been concentrated among women, and women with children are not recovering their hours, even as many other workers are getting back to work" (Toronto Foundation, 2020).

This is particularly unfavourable for women's mental health and stress, which will ultimately contribute to their ability to succeed. A systematic review of the mental health impact from the COVID-19 pandemic found that females tend to be more vulnerable to develop the forms of mental disorders during the pandemic, including depression, anxiety, PTSD and stress (Ahmed et al., 2020; Gao et al., 2020; Lei et al., 2020, as cited in Xiong, J et al., 2020). This recession is different compared to something like the great depression because disease as epidemic-related recessions affect women more greatly. This is due to the fact that women's jobs are primarily affected by social distancing and care work.

.4 Domestic Issues Caused by Work and COVID-19

Men are also undeniably feeling the stress of losing income and effects to their jobs as well, and potentially taking out this stress on their partners and families. New restrictions on movement and financial constraints have provided abusers additional power and control. During the COVID-19 pandemic, it has been reported that women are experiencing more domestic violence at home, potentially because they are confined in the home with abusive partners (Marques, Emanuele Souza et al 2020). There is decreased access to the community, family, friends and social services, and as a

result many people have had to compromise their social supports as well as any opportunities to strengthen them (Marques, Emanuele Souza et al 2020). Especially for low-income families, where homes might be smaller and have fewer walls, women may not be able to safely file a complaint and as a result, might be discouraged from doing so (Marques, Emanuele Souza et al 2020).

> "The following individual factors can lead to violence: the aggressor's increased stress due to fear of falling ill, uncertainty about the future, the impossibility of social contact and treat of reduced income, especially in underprivileged cases, as well as the consumption of alcoholic beverages as well as the consumption of psychoactive substances" (Marques, Emanuele Souza et al 2020).

Women who are financially dependent on their partners or depend on informal work, which has become significantly less prevalent due to lockdowns, are more vulnerable and have less opportunities to break away from such duress. While job and income losses are mostly temporary, the emotional impact and stress that women face in this situation will likely be long-term. A study done across China in January 2020 - in the midst of the COVID-19 pandemic - had 52,730 valid responses, deducing that almost 35% of the respondents experienced psychological distress, 64% were women, showing a significantly higher level of distress than their male counterparts (Qiu et al 2020). Women are much more vulnerable to stress and more likely to develop post-traumatic-stress disorder (Qiu et al 2020).

Unfortunately, children might be feeling even worse during the COVID-19 pandemic. Rising Canada 2020 found that in 2018 almost twenty-five thousand Canadians of all ages died of suicide or stayed in the hospital after harming themselves (Children First Canada et al., 2020). The report found that hospitalization for self-harm is way higher in young girls and women than young boys and men across most age groups. The highest number was seen in females between the ages of ten to twenty-four which was three times higher than males in the same age group (Children First Canada et al., 2020); this was before the pandemic.

Children who have fair or poor mental health also had lower grades compared to children with good or excellent mental health (Children First Canada et al., 2020). About 25% of children between the ages of five to seventeen who have poor or fair mental

health reported they have trouble making friends versus only 1% who had good or excellent mental health indicated having difficulty (Children First Canada et al., 2020). Also, 57% of participants in Canada aged fifteen to seventeen reported that their mental health is worse than before social distancing measures were implemented (Children First Canada et al., 2020). Recent data also found there has been a significant increase in calls to the Kids Help Phone, a Canadian charitable organization that is available to the public at all hours of the day to provide support and counselling (Children First Canada et al., 2020). This may be another indicator that mental health for children is declining during the pandemic.

Women being the ones primarily responsible for childcare, may be forced to decide between their careers and financial independence and children. Raising Canada 2020 is a reporter revealing that children are not doing well under the stress of the pandemic (Children First Canada et al., 2020). The report revealed that due to the pandemic, children are facing threats towards food insecurity, child abuse, mental illness, physical inactivity, and poverty (Children First Canada et al., 2020). It also reported that children aged twelve to seventeen do not share the same perspective as their parents on their own mental health (Children First Canada et al., 2020). About 65% of this group rated their own mental health less positively than their parents did (Children First Canada et al., 2020). This means that the majority of parents do not realize the mental health struggles their children are going through and are therefore unable to provide them with the support or help they need. This is an area where children would benefit from some help through either their parents or other wellness programs. The report also found that now, the leading cause of death for children between ten to fourteen is suicide (Children First Canada et al., 2020).

> "Women with children under the age of 18 have shown significantly increased levels of depression and anxiety since the start of the COVID-19 pandemic, which could have a negative effect on children's mental health and well-being" (Children First Canada et al., 2020, pp. 18).

Children aged between ten and seventeen are feeling bored, and sixteen- and seventeen-year-olds reported feeling "angry" and "lonely" while the ten to twelve year olds were more likely to say they are "happy" or "good" (Children First Canada et al., 2020). "Loneliness" was the third most used work for kids between ten and seventeen used to describe how they have felt in recent weeks (Children First Canada et al., 2020).

One in four kids' friendships have been negatively affected by stay-at-home orders (Children First Canada et al., 2020).

Moreover, children are also spending more time online due to lockdowns which is increasing the sexual exploitation of underage people (Children First Canada et al., 2020). Parents are trying to take care of their children and their other responsibilities simultaneously, while they also are suffering during this situation. People may not be fully aware of the hidden health risks emerging from the COVID-19 pandemic aside from catching the virus. That will impact their own and their children's health outside of actually getting the virus. The severity of these impacts may ultimately affect women's ability to rejoin and effectively perform in the workforce.

Chapter 5: Gaps in Knowledge

This chapter will explore gaps in knowledge and practices due to unconscious bias, traditional mindsets towards women and wealth, policy, and workplace practices to understand gender gaps, inequalities and barriers in the office.

5.1 Gaps in Knowledge and Unconscious Bias

The gender roles that have been defined and experienced historically contributed towards mindsets that hold unconscious bias, as well as traditional cultural norms and behaviours, which are among the gaps that impact women's career fulfillment, enjoyment of work, and experiences of well-being, of feeling valued and respected. Despite organizations implementing diversity and gender-related initiatives into the workplace, a gender parity gap still remains where women are still not equal to men, most pronounced in matters relating to wages and leadership positions (IBM, 2021). One reason for this may be that bias has been ingrained into people's form of thought, based on the historic roles of women, and may unconsciously support certain prejudices, which may affect decision making and behaviours at work (Millstam, 2020). It comes down to organizations struggling to create a mindset shift, a behavioural shift, and a culture shift, while also trying to sustain any progress they have made in these areas over a period of time, in addition to tackling existing barriers and risks that organizations may be able to control, implement or use to instrument change within

their work culture and employees. The caveat is having the right people in leadership, as well as employee job satisfaction, a sense of belonging and happiness in the workplace. It comes down to the people and their values and beliefs.

Although there are more women being represented in the office now, as well as more companies driving gender diversity programs and initiatives, the shift is not happening quickly enough. The IBM study stated that, despite this push, the percentage of women in executive positions within the last two years remained the same percentage (8%) (IBM, 2021) which represents no change. The changes are being implemented too slowly and the hardest part of this is shifting the mindset of people working, and leading organizations, there is too much focus on programs and not enough on shifting mindsets (IBM,2021). More diversity programs does not necessarily mean better outcomes. Organizations may be using various tools and programmatic interventions to achieve inclusion and diversity, however in the long run, these tools and training programs will not fully address these issues sufficiently (IBM, 2021). A study by Harvard University found that "in the typical ways such training is deployed—mandatory tutorials followed by questionnaires—the positive benefits rarely last beyond a day or two and employees are good at guessing the right answers" (IBM, 2021, p.8), which results in superficial learning. Employees need deeper learning, ideally experiential where they can feel the impact.

> "Gender equality is a moral and a business imperative. But unconscious bias holds us back, and de-biasing people's minds has proven to be difficult and expensive. Diversity training programs have had limited success, and individual effort alone often invites backlash. Behavioral design offers a new solution. By de-biasing organizations instead of individuals, we can make smart changes that have big impacts" (Bohnet, Harvard University, as cited in Millstam, 2020).

Employees are human - they will feel if an environment is not welcoming, the behaviours of people around them, which will ultimately affect their sense of belonging at length. When organizations have an inclusive corporate culture, plus employees with welcoming behaviour and open mindsets, this can help employees be more productive and purposeful while contributing to the business advantage. However, plenty of employees working in male-dominant industries and offices are still experiencing a "boys club" mentality. In the United States alone, 25% of women and 16% of men say that the "old boys' club" culture prevails (IBM, 2021) and this bias can cause harm to

people's mindsets and impact belonging and community at work. Work culture is a big part of wellness and happiness at work, as well as job satisfaction. According to an article in Positive Psychology today, “Job Satisfaction (Hoppock, 1935) defines job satisfaction as any combination of psychological, physiological, and environmental circumstances that cause a person to truthfully say that they are satisfied with a job” (Bourne, 2020).

The IBM study found that fewer executive employees challenged gender-biased behaviours and language at work and fewer confirmed that high-performing women receive promotions as often as high-performing men (IBM, 2021). People in leadership roles are not actively questioning these gaps and biases. Some managers and executives also carry the bias that women with children are not as dedicated to their jobs. These archaic mentalities can harm women progressing in the workplace and their opportunity for promotions and raises, which later on can also hurt their morale and productivity, as employees who do not share the same mindsets will become unhappy. Morgenson and Humphrey (2006), recognized the relationship between the following factors and happiness at work: Workplace autonomy and the freedom to decide, task variations and scope for creative ideas, task significance, recognition for work, task difficulty, professional skills and specialization, social support within the workplace, feedback from superiors, environmental conditions at work, business management and networking channels (Chowdhury, 2020). This can be challenging to provide to the many employees an organization may consist of, without the right leadership team and leadership tools. Along with the implicit employee biases that many unconsciously hold, control over behavioural and cultural shifts are more difficult to achieve.

Selina Millstam, Vice President and Head of Global Talent Management at Ericsson, explores unconscious bias further in terms of its effects at work. Unconscious bias may be present in the workplace culture, as well as in the hiring process and everyday tasks at work. The issue with unconscious bias is that employees may be completely unaware they might be practicing , and this includes employees at work in leadership roles. Bias can be described as systemic prejudice for or against something, someone or a group by being compared to another, usually in ways that are considered unfair or based on things like stereotypes (Millstam, 2020). It can be related to race, religion, culture, ethnicity, age, or ability. People learn and absorb bias from an early age, by the content we consume in media, the news, or though other people and the world around us. This may depend on the context of how people were raised and how

they formed their view of the world and may base it on that influence. Such bias can impair or impact our judgements by leading to decisions that are non-factual, based in favour of a particular person or group, usually at the expense of another (Millstam, 2020).

Unconscious bias can be disguised in many ways such as “stereotypes'', that “gut feeling” or by a particular “culture fit” (Millstam, 2020). Recruiters may often try to find candidates that fit their specific company culture, which results in employees that are similar to themselves, often looking for people whom they would rather share a cup of coffee and enjoy a chat with, versus relying on someone who is the most qualified and best suited for the job based on experience and skill. When hiring someone based on culture and irrelevant similarities that are unrelated to the actual job, it means we end up hiring the type of people we like and are like us (Millstam, 2020). This is problematic because the majority of hiring managers are men, which results in more men being selected for jobs than women (Millstam, 2020), and this may potentially also be contributing to the reason why there are still fewer women or minority groups in leadership today, as well as other minority groups despite many inclusion and diversity initiatives.

Another possible reason could be that women may suffer from “double-bind” bias, where women are more critical of other women when considered for leadership (Millstam, 2020). This is because women are often considered, both socially and culturally to be nurturing and likeable, which makes them appear as if they are unfit for a leadership position. However, when women behave in the opposite i.e., more assertive and forthright, they are considered unlikeable and too bossy to be good leaders, and it is apparent that either type of woman cannot win in this situation (Millstam, 2020). Since much of such bias is unconscious, it can be arduous to remove something that people are unaware of and that is hard to regulate between employees.

One example from the works of Millstam, of this is when a hiring manager was looking to increase women’s representation at work, when hiring for a new leadership position, they were mindful to consider women. However, despite all the candidates having nearly identical resumes, hiring managers preferred the male candidates more. Now, this might be because the males were better candidates, or it might be because men were more confident and better able to articulate their successes. This might make

the hiring manager think the male candidate would be a strong leader and confident manager for her team with great communication skills, not associating any part of this to his gender. However, when you see this exact pattern repeat over several interviews, it might be attributed to gender bias (Millstam, 2020).

> "Studies have repeatedly shown that the traits most commonly associated with successful leaders are those that align with stereotypically male behaviours. So, if our performance or succession management processes are built on identifying these traits, we are unlikely to promote women" (Millstam, 2020).

5.2 Traditional Mindsets Towards Women and Wealth

Another unconscious belief that contributes to the issues in the gender equity gap has to do with mindsets. Despite the fact that women make up half of the workforce in the U.S. and account for the most consumer spending, there is still a deep unconscious belief that women's earnings are not central to their family's economic security (Glynn, 2019).

> "This same belief too often has created a tolerance for gender-based wage disparities that have resulted in fewer resources for families. Unfortunately, these views are still too widely held—even though research has consistently proven them wrong for years—and gives workplaces and lawmakers little incentive to pass policies that support working families." (Glynn, 2019).

The reality is that most parents in North America grew up with either one single working parent or two working parents and most of the time all adults in the family work (Glynn, 2019). It is beliefs such as these that cause harm and slow down the progression of change. The notion that there is one family member who will be available for free childcare is no longer always the case for the majority population, especially as cost of living continues to increase. Many women are now the primary or the sole economic supporter for many families and have been so for decades. In 1967, 15.9% of women in the U.S. were earning at least half of financial household income, by 2017 this statistic grew to almost half of the population at (41%) (Glynn, 2019). This may cause a larger

disconnect in overall inequality because the majority of women who are the main or only income supporters for their family are minority women.

For instance, 51% of black mothers and 41% Hispanic mothers were 26% of the breadwinners for their family (Glynn, 2019). While some white women (16%) also support their families financially, it was found that they are more likely to be co-primary supporters, making around equal income to their partners (Glynn, 2019). This is important to note, as by 1970, 36.4% married and 22.2% unmarried black women were already the primary economic supports of their families, meanwhile, the same number of white women (36.8% married and 25.6% unmarried) became primary income supports to their families as of 2017 (Glynn, 2019). Exploring the impacts of women in the workplace based on race is out of the scope of this paper, however, the evidence and research have proven that women have been in the workforce and the primary financial and economic support for their families for decades yet there has been very slow change and shift in mindset and policy legislation to acknowledge this. Women and their financial positions can impact their health, well-being and the gaps in inequality, creating a direct impact on their quality of life. This has already been the case for the past several decades.

> "Wealth and socioeconomic status have always been regarded as primary determinants of health" (Burton, 2010, pp. 40).

The same trends have continued to exist and have been rapidly growing for over a decade, nevertheless, the national policy landscape remains largely unchanged (Glynn, 2019). Policy and legislation needs to shift based on research and evidence in order to better support the population and economy. Gender roles and families do not look the same as they did several years ago, so it does not make sense for policy and allocation of government funding, programs and legislation to look the same.

5.3 Lack Policy and Organization Accountability

Lastly, there is little accountability and repercussions for the parties that are causing harm to employees and the overall well-being of people and their families. Our actions and the consequences that result from them are intertwined into society as a

whole, not just our local surroundings. Whether an organization has an exceptionally large carbon footprint or has a poor office culture or environment that damages employee health, it affects people's ability around them to prosper mentally, physically, socially and economically. Yet, there are very few repercussions for responsible enterprises, and the current situation would've likely been prevented by better practices and effective policies that hold them accountable. It is unfair that organizations can function at the cost of the people and their health, which, in the end affects other people and systems around them. When enterprises affect employee health in a negative way, there is a cost. The cost can include what people pay to treat new illnesses or mitigate the discomfort they live in, which translates into more care required from other systems including the people in their home (usually women), and less economic prosperity due to reduced productivity. People pay for these added costs using their immediate or long-term health, their lives, and additional tax dollars, while enterprises face little to no consequences, and continue to provide little employee support – even though they may be the catalyst or main culprits behind these issues.

The WHO believes an essential factor in creating a healthy workplace is developing government legislation, strategies, and policies (WHO, 2017). Although there are employment laws in place for most employers regarding rights to safe working conditions and health, many of them are immediate and reactionary versus long-term and preventative. Health risks at work are attributed to several factors that could be burdening our current healthcare system. WHO describes that "Physical and mental health risks at work can be related to the type of work, organizational and managerial environment as well as the skills and support required for employees to carry out their work" (WHO, 2019). Due to the dramatic shift in work and the workplace environment from the impacts of the COVID-19 pandemic, there are potentially several long-term effects that employees will have to face and continue to live with, now and post COVID-19 pandemic, particularly regarding mental health.

There should be more government policies set in place that hold organizations accountable for any harm caused to their employees, especially those that may disproportionately affect certain groups. Such policies would also help organizations enforce better workplace practices, healthier workplace culture and set guidelines for a healthier physical workplace that supports employee wellness.

Chapter 6: Reassessing the Nature of Work

This chapter will explore the changing nature of work that resulted from the COVID-19 pandemic, which shifted many people to work from home. It will also focus on diversity at work, as well as the implications for the future of work, home life, health and productivity for employees.

6.1 Complexities of Work Life During During the COVID-19 Pandemic

A perfect work/life balance is a life situation that many continue to strive for, even before the COVID-19 pandemic affected our lives. In 2020, a survey of one thousand US working parents of school-aged children was polled in August. This survey found that over half (54%) of working parents say they feel guilty because they cannot fully care for their children, while 43% reported feeling guilty when they are caring for their families as they are not focusing on their work responsibilities (Leonhardt, 2020). Parents said they feel as if they are constantly failing at one thing or the other, and it is a trade-off of whether they are doing a bad job at work or a bad job of parenting (Leonhardt, 2020). Work and family are a big part of a person's identity. Elizabeth Wiggs, a thirty-six-year-old Seattle-based marketing manager for Zillow states “It’s hard to maintain a sense of your personal value and self-worth when the two pillars of my identity — my career and being a parent — feel like they have massive cracks running through their foundations. This is like an identity crisis” (Leonhardt, 2020). She goes on to say her work requires her to be in meetings for the majority of the day, and her form of childcare is left to sitting her daughter down in front of the television. As part of this survey, women with children also reported waking up a couple of hours earlier before their kids wake up and before work hours to focus on work.

With several people working from home during the COVID-19 pandemic, it has provided an opportunity to reassess the nature of work and evaluate how to build the future of work. In Canada, about four in ten Canadian workers are working from home during the COVID-19 pandemic, with 64% of workers enjoying working from home (Canadian Urban Institute, 2021). However, after the COVID-19 pandemic, most employees and managers express a desire for a hybrid work arrangement when they return, allowing them to work both at home and in person. This option was most attractive to people aged between thirty-five and sixty-four with kids at home (84%) and least desirable to people with no kids and aged over fifty-five (but still with 70% indicating a desire for a hybrid work model) (Canadian Urban Institute, 2021).

These statistics may indicate that people who expressed less desire to continue working at home likely prefer the social interaction and office environment that comes with physically going to work. Currently during the COVID-19 pandemic, employees have to tend to both their home and work at once, which allows us to appreciate a new perspective: that people's lives are complicated and are tied to their families and their homes. For example, employees are performing zoom calls with kids running around and dogs barking in the background from reorganized workspaces in their homes. As a result, when redesigning the workplace for a post-COVID-19 pandemic world, they should be built with considerations of the complexities that exist for many employees (Rowe, 2020).

Now, for those who are working remotely, their homes are being stretched to function for more scenarios than usual, that must account for everyone in the household being home significantly more. This requires homes to be very flexible in order to accommodate families and all their diverse needs, such as comfort, work, play, leisure, privacy, exercise, study, hobbies and other activities a family needs to be supported and to function well. Kids need a workspace and so do the parents, which is something many people did not consider making a space for in their current homes. Not everyone has extra rooms that can be dedicated to an office, classroom, or workspace for multiple family members, nor did many even consider this when purchasing their homes before the COVID-19 pandemic hit. For many families, this means having to work together in communal spaces like the living room or kitchen.

Most offices are set up with ergonomic furniture, controlled temperatures, bright lighting and quiet, collaborative workspaces. Even without children or big families, it can be challenging to work from home without having the optimal workspace that employees are used to working in, which many employers have designed for employees to perform their best possible work in comfort. Interestingly, many surveys are finding people are working longer hours at home. According to CNN, employees working remotely in the United Kingdom, Austria, Canada, and the United States are putting in more hours than before, adding approximately two and a half hours to their average workday (Guy, 2021). It is harder to shut off work at home now when people sleep, eat and work in the same space. According to NordVPN Teams, a New York based company that provides virtual private networks (VPNs) to more than 10,000 companies, recorded "no significant drop of business VPN usage at lunchtime, which indicates

potentially short lunch breaks while working remotely (Guy, 2021).

Finding separation between work and home life has become a challenge for many. This might affect wellness in the future in many ways for remote workers, and more so for mothers working at home trying to balance family care and work. NordVPN Teams also reported a 41% increase in VPN server traffic on Thanksgiving compared to an average weekend, which the company says is suggestive that “people are spending their family time working". NordVPN confidently says their research reflects longer working hours (Guy, 2021). Everyone is different and working remotely affects people in different ways. People are also working in different situations: some people are working with kids and families versus no kids, some employees are working in large homes versus others in small apartments with multiple family members. This factors in determining either a negative or positive work from home experience for employees, which may affect their productivity levels to be better or worse, based on their home life and what works best for them.

Some employees will find that remote flexibility reduces stress and gives them the ability to multitask and more time for other things they want to do. Women may favour this option as it allows them to earn and work while also attending to their home lives or children. As stated at the beginning of this paper, work is good to do for mental health as it can empower people, give them self-confidence and financial security (WHO, 2019). Employees who may be less productive at work and not performing as well as they did in a physical office space may feel less confident in their jobs, which may impact further promotions and feeling good about their jobs. The challenges of managing separation between work and home life may add additional burden and stress for many employees. This might be especially challenging for women who may have trouble drawing boundaries between work and home, and as a result, have no other place to go.

6.2 Diversity and Inclusion in the Workplace

Inclusion benefits everyone and statistically works better for an organization's strategy. Gender-inclusive organizations that prioritize the advancement of women reported revenue growth as much as 61% higher than other organizations, while 60% reported that they were more innovative than their competitors and 74% say they lead

their field in customer satisfaction (IBM, 2021). Gender diversity and equity are undeniably good for business, which contribute to a happier work culture. Organizations would benefit to work towards a happier work culture, as happier employees are more productive by 31% (Hansen, 2019).

One of the drivers of that happiness is diversity. A survey with 1,000 respondents from each of the following countries: United States, United Kingdom, France, and Germany, found that in the United States, 55% of happier workers are more likely to report greater diversity in their office (Hansen, 2019). Having a more diverse workplace allows employees to be open and grow, be accepted, learn from each other's unique experiences and offer new perspectives, "Inclusion and equality are huge testaments to a happy and healthy workplace culture" (Hansen, 2019). In such environments, employees are also better at working together, have a sense of community and are fueled by a common purpose or goal, and feel like they are part of something bigger. Zero percent of workers who are "elated" at their jobs reported having a "very poor" relationship with their manager (Hansen, 2019).

Now that there are even fewer women in the workforce post-COVID-19 pandemic, their representation in the workplace will seem even more scarce, which may reduce their sense of community or belonging and happiness. Even when people slowly make their way back to the office, and more women choose to work from home, the remaining women that do go back to the physical space will see less representation. Sian Beilok from the Washington Post explores this topic further and shares how it can be of concern because "feeling as though we don't belong has a direct impact with our relationship to our work" (Beilock, 2021).

Women might not feel comfortable coming into the office where they mostly see male faces while the majority of the other women are working from home, it is likely that they will opt to work from home as well. A study done by the University of Washington found that when a computer science classroom had stereotypically male decor such as sci-fi posters and electronic equipment, college women who entered reported less interest in computer science than those who entered the same classroom when it featured more neutral décor (Beilock, 2021). An environment that makes people feel like they do not belong will directly impact how they work and how comfortable they feel.

6.3 Importance of Employee Well-Being for Health, Productivity and Success

A better work environment can harness an employee's creativity and productivity, which will potentially pay off any additional workplace investments made by an organization. For organizational and business success, it makes sense to invest in employee wellness so employees can feel healthy and engaged at work. The Engagement Report from the Society for Human Resource Management explains why employee job satisfaction is important for organizations. The report found that there are four main benefits that organizations can benefit from (Lee et al., 2016, as cited in Bourne, 2020). Firstly, increased profits: satisfied employees lead to higher sales, lower costs, and a stronger bottom line (Bourne, 2020). This could be due to cause and effect from the second benefit: satisfied employees are more productive. Whether employees are satisfied with organizational culture, with their rewards, or recognition, they will produce more and work more efficiently (Bourne, 2020). The third benefit is lower turnover: training employees is expensive, and satisfied employees are less likely to leave. New talent will also be incentivized because they will see staying power as an added benefit (Bourne, 2020). The fourth benefit is employee loyalty. Employees are more satisfied when there is an opportunity to grow for them, they feel the organization has their best interests at heart, which leads them to support the company's missions and objectives (Bourne, 2020). In turn, employees may also tell others good things about the organization which helps spread the company's will (Bourne, 2020).

Long before women's rights, pay and benefits had progressed to what they are today, employment outside the home was an important source of social support and self-esteem, and helped women avoid social isolation in the home (Romito, 1994; Razavi, 2000, as cited in Messing & Östlin, 2006). This statement recognizes that the social and mental wellbeing benefits were for working 'outside' the home. Meanwhile, with the shift to remote work, women "will experience increased loneliness and the stress that comes from feeling that the division between their work and their home life has eroded" (Beilock, 2021). Working from home may add to the stress, anxiety, and depression women are feeling with the combined responsibilities from their housework, with no boundaries of where they can step out and truly only focus on one or the other the entire time.

There is also the issue of potentially being stuck at home in an abusive situation with a male dominant partner, which will add trauma and more stress to a female

employee working remotely. Moreover, if women are still doing the primary care work at home, which in earlier chapters stated that they indeed are, this may mean male partners will feel less responsibility to participate in domestic labour and will be less likely to exercise the option for remote work, leading to an unbalanced representation at work for male and female employees. Overall, everyone benefits from a healthier workforce, especially employers.

> "Good employee health contributes to high productivity and success of the enterprise, which leads to economic prosperity in the country, and individual social wellbeing and wealth of workers"
> (Burton, 2010, pp. 40).

In a report published by WHO in 2010 about healthy models, expresses that the employer absorbs many costs for unhealthy employees. The health care costs that employers or government healthcare plans incurred have been influenced by the health of the employees. The report mentions that there are two costs that an employer must account for when their employees are not healthy on top of health insurance or disability costs. The first cost is associated with when the employee is too ill to come into work. The absent employee causes the employer to either pay to bring in a replacement worker for that day or possibly experience delays in achieving their organizational goals or mission and potentially experience reduced quality of work. In Canada, it was found that short-term absence costs more than doubled between 1997 and 2000, going from 2% of payroll to 4.2% (Burton, 2010, 36). There are also absentee costs from the results of smoking as well. Every Canadian employee who smokes costs a company $2500 per year, primarily due to increased absenteeism and decreased productivity (Burton, 2010, 36). The second cost is when the employee is not feeling well and comes into work anyway. When this happens, a phenomenon, labelled as "presenteeism," occurs, which describes the reduced productivity of someone who is either physically or mentally ill, and therefore not as productive as they would normally be (Burton, 2010). Either way, it is the employer that absorbs the cost of an employee who is not healthy.

Employees suffer from various health conditions and the employer ends up dealing with these costs. It could be a relatively common condition such as allergies, or other more serious illnesses such as heart disease. This has a significant impact on the employer's costs per employee. For example, based on average impairment estimates,

the overall economic burden of illness to an employer for high blood pressure per year, per employee (all covered employees, not just those with the condition) was $392 (USD), for heart disease $368 (USD), and for arthritis $327 (USD) (Burton, 2010). That means, an American business that has one hundred employees is paying $39,200 (USD) per year because of high blood pressure among employees (Burton, 2010). The authors of this study noted that "presenteeism" costs were higher than medical costs in most cases and represented 18%-60% of total costs. They also mentioned that a diabetic worker costs the employer five times more that of an employee without diabetes (Burton, 2010). People suffering from poorly controlled allergies were also found to be 13% less productive than other workers (Burton, 2010).

The cost of reduced productivity can create a large financial impact. It was found that health-related productivity costs were more than four times greater than medical and pharmacy costs (Burton, 2010). In developed countries, it is common for employers to provide healthcare insurance and wellness plans, likely because they recognize these costs and want to reduce them by investing in the health of their employees.

> "In a survey of American and European employers, when asked why they provided wellness or health promotion programmes to their employees, the Americans' top two reasons were to reduce health care costs and improve productivity; the Europeans' top two were reducing employee absences and morale" (Burton, 2010, pp. 43).

Chapter 7: Guidelines for employee accessibility and well-being

This chapter focuses on an Ontario government legislation that supports employee accessibility. It also highlights an innovative checklist by the International WELL Building Institute designed to foster healthy workplaces to support employee well-being.

7.1 Ontario Accessibility Guidelines (AODA)

In Ontario, the government has introduced an Accessibilities for Ontarians with Disabilities Act (AODA), that has enforced a set of standards for employers to follow in order to provide their employees with an accessible and healthy space to work in. This

set of guidelines aims to support people with disabilities and to ensure the spaces they are in are accessible for all.

According to an article on the AODA website about public spaces, some standards for buildings include:

a) Ramps, lifts or elevators whenever there are stairs
b) Automatic doors and wide doorways at entrances to buildings and common areas
c) Accessible public washrooms
d) Barrier-free paths of travel into and through buildings
e) Accessible seating and auditoriums
f) Visual fire alarms in auditoriums and hallways
(Thomson, 2019)

The AODA standards do a good job of addressing accessibilities of employees with disabilities. However, the changes mentioned above are generally larger changes to implement, requiring significant time and financial investments. To allow organizations to immediately start implementing best practices, it would be good to outline small, attainable tasks that can be implemented quickly, at a low cost, so that small actions can begin to foster change. The AODA also lacks standards for many aspects of accessible building structure, but cities have created their own standards to fill this gap (Thomson, 2019). It would also be helpful if legislation such as this are not just limited to one region, and if there were strong provincial and federal level guidelines created to drive change to the greater economy as a whole, which helps in addressing more groups who have barriers to entry.

There is a need for a stronger provincial code and standard that supports more groups who might suffer from barriers at work, including women. A stronger provincial code and standard would help eliminate barriers to entry at work and accommodate the needs of more employees and their preferences. With gender norms evolving, inclusive policies towards women in the office workplace will promote and encourage accommodation for more employees and their needs, regardless of gender.

7.2 Emergence of WELL and new Best Practices of Office Spaces

The International WELL Building Institute (IWBITM) is an organization that has built a people-first approach to buildings, organizations and communities. They have accomplished this by building the WELL Building Standard (WELL), which is a roadmap for creating and certifying spaces that advance human health and well-being (International WELL Building Institute, n.d.). WELL has created a checklist of 10 core items that support the physical and mental well-being of employees to do their best work and be their best selves. The checklist has a point system for employers to follow as a standard practice and guideline to be WELL certified, creating a healthy workplace that supports employee well-being. These guidelines are a holistic approach to human health, work performance and overall well-being grounded by research-based methods that are also regularly updated (International WELL Building Institute, n.d.). The WELL checklist has been optimized for buildings, institutional and commercial office projects and has been adopted by various corporations. To summarize, the guidelines include the following items, (with 24 precondition factors being the required items and additional 97 optimization factors being rewarded with points).

Below are some brief examples of the WELL Guidelines for 2021 from the core ten categories.

1. **Air**
    a. Provide basic level of air quality
    b. Create a smoke free environment
    c. Minimize indoor air quality issues with ventilation design
    d. Minimize pollutants with construction pollution management

2. **Water**
    a. Verify water quality for human contact through testing for certain parameters
    b. Provide access to drinking water that meets the chemical thresholds
    c. Control and reduce risks by basic water quality management

3. **Nourishment**
    a. Provide and promote consuming fruits and vegetables

b. Help individuals make informed food choices with nutritional transparency

4. **Light**
    a. Provide indoor light exposure through daylight and electric light strategies
    b. Provide visual comfort for all users through electric lighting

5. **Movement**
    a. Create active buildings and communities that facilitate all types of movement, physical activity and exercise, and also reduce sedentary behaviour
    b. Reduce the risk of physical strain on the body through ergonomic design at workstations

6. **Thermal Comfort**
    a. Provide a thermal environment that the majority of building users find acceptable

7. **Sound**
    a. Incorporate strategic planning required to prevent disturbance from various sources of noise

8. **Materials**
    a. Restrict known hazardous ingredients in newly installed building materials, specifically asbestos, mercury and lead
    b. Manage exposure risks of the hazardous building materials asbestos, lead and polychlorinated biphenyls (PCBs)
    c. Mitigate risks of human exposure to chromate copper arsenate (CCA) and lead

9. **Mind**
    a. Promote mental health and well-being through the provision of supportive programs, policies and resources

b. Support occupant well-being by incorporating the natural environment throughout the building

10. Community

a. Promote health and well-being through available health resources and programs
b. Facilitate a collaborative process and support adherence to collective well-being and sustainability goals
c. Enable organizations, families and individuals to prepare and respond to diverse emergency situations
d. Evaluate the experience and self-reported health and well-being of users through occupant surveys

(International WELL Building Institute, 2021).

According to the WELL website, in Canada only five buildings are currently WELL certified so far, however, there are many more buildings that have started the process and are working towards obtaining a WELL certification. Globally, WELL has 10,784 buildings certified, which seems a promising start for a brighter healthier future ahead. While this is a comprehensive checklist, there are large upfront costs involved, but the long-term return on investment with the benefits aimed at employees, users and visitors it intends to achieve are worth it. If institutions such as WELL were to become more widely adopted, it would be a great achievement that supports both men and women to be safer and healthier at work. Women would have the opportunity to have more support at work and in the workplace than they do now, which will bridge the gap to equality. Other systems such as healthcare would also be less burdened by implementing strategies such as the WELL standards. As a result, healthy employees would have more capacity to support themselves and their families and live longer and happier lives.

Chapter 8: Building Strategies and Recommendations for Wellness and Work

In this chapter, there are various recommendations presented to support and encourage employee wellness, which would also help promote equality, diversity, inclusivity in the workplace, and improve productivity in the workplace.

Some organizations have already begun to implement similar strategies, such as hiring more women in leadership and women of colour, incorporating diversity training at work and more. However, many of these initiatives are limited to a few workplaces and offices and with the setbacks women are experiencing from the COVID-19 pandemic in terms of employment and wellness, there needs to be a drive to implement change quickly and effectively. It is also noteworthy that there are no laws that require an employer to promote healthy lifestyle practices in their workplace, however, there are laws that prevent discrimination and harassment from various lifestyle factors such as obesity, smoking, unhealthy diets or lack of physical activity (Burton, 2010).

Employers who promote health and wellness within their organizations must do so tactfully so that those who do not wish to participate or engage are not pressured or discriminated against. There may be exceptions to this, for instance, if unhealthy employee habits are negatively impacting their performance at work or harming other employees.

8.1 Addressing Mental Health with Education and Learning

Early childhood education can build the tools and best practices to enable children to better understand the importance of taking care of, and advocating for, their own well-being as well as others. It would help mothers and parents if their children had the tools and emotional intelligence to combat problems that they fear or are unable to share with their parents. Through knowledgeable teachers and professional resources, children would better understand healthy relationships, emotional and social health and well-being, more than what several parents might have been able to provide. Emotional intelligence can take years for even adults to develop, children can slowly be introduced to what this is, and progress in their understanding of it as they experience life.

This does not insinuate that students may be able to solve all their problems after one class, instead, it just means they are able to learn about the importance of emotional intelligence and mental health early on. Over time, these programs can become more refined and potentially provide a long-term impact on children in their own life and family lives as they grow. If young students were to have a curriculum at school to make sense of their feelings, perceptions, and experiences, they might be better equipped to deal with their relationships, be more self-aware, reduce self-harm, combat anxiety, depression, build more confidence and treat others with greater empathy. A school is a place of learning. In this space, teachers can identify persistent behaviours contributing to inequality and help the next generation unlearn such behaviours.

When kids make better sense of these things as they grow up, it can allow them to be better leaders by being more aware of biases, more empathetic and respectful to others despite what they have grown up experiencing. They might be able to better recognize if something is wrong versus just accepting the status quo, and understand how to respectfully instigate change that will help themselves or others. Racial, gender, cultural inequity and the biases that surround it have been taught to us and we understand it through the experiences we live by as we grow up. These are overly sensitive topics, and children might be experiencing these in their own lives as they age.

At the very least, it will teach them how to be happier and live more balanced lives. This would benefit everyone, as happier kids might mean a happier childhood, which means parents have less stress from their home life, and kids. Of critical importance, however, is that teachers should be properly trained and equipped for these educational tasks, possess good mental wellbeing and not throw in their own unconscious biases in the process. A private school in Dubai is rolling out a mental health curriculum for teenagers aged between 16 and 18, where they will dedicate one hour a week to it. Joe Hall, head of the sixth form at Brighton College Dubai says:

> “This will allow pupils to identify their own psychological and emotional strengths... A huge part of my role will be supporting pupils beyond the curriculum and academic studies and supporting them with character development and how to adapt and be prepared for a post-COVID world" (Rizvi, 2021).

Racial, gender, cultural inequity and the biases that surround it have been taught to us and we understand it through the experiences we live by as we grow up. These are very sensitive topics and children might be experiencing these in their own lives as they age. Classes such as these can help them dissect these ideas further and proactively shape their behaviours around them. It allows them to be mindful and self-aware of their actions and their behaviours towards others. Something to be mindful of when implementing something like this is that teachers are equipped to perform this type of education towards kids. They need to also have good mental well-being and not throw in their own unconscious biases in order to effectively teach this to kids.

Children may greatly benefit from classes focusing on everyday life skills. Women are doing most of the primary care work, which includes cooking, cleaning, managing schedules, etc. If younger boys were empowered to participate, they may become more mindful of how to help their mothers as they get older and contribute to change when they start their own household. In the labour workforce, women do women's work, and men do men's work, the roles they perform in the home have created gender divisions at work. High schools and universities offer classes such as robotics, and computer science that are primarily filled with men, and the women who try to join drop out, as previously discussed in this research. To help address the divide, classes where young kids learn to do the tasks that are traditionally considered for the other gender's role, tasks that both genders are considered capable of doing, can help us do so. Additional classes could involve organizational practices, home economics, learning to grow food, handy work and so on.

Although gender gaps are slowly closing, taking care of the home environment should be everyone's job and children need to be taught that early on, so in the future they are able to equally participate in care work. The examples most people see at home are the mother doing primary care work and that is what we have seen for generations. If men and young boys were to be more active in the household, they can become equal providers of care work. If such practices were distilled into people from primary school to high school, maybe these practices would not be so out of character for the opposite gender.

8.2 Ensuring Diversity at Work

A current diversity-promoting strategy that organizations implement includes diversity training at work and hiring a more diverse workforce. However, this might not always be significantly effective, especially because of unconscious bias. A study by IBM suggested that creating experiential and voluntary programs would be more effective when compared to online training and formal tests. If such diversity initiatives were carried out more effectively, perhaps gender biases faced by different strata of employees, such as that women with children are not as committed to their jobs, would be reduced. This can potentially allow more women to succeed at work, get promoted and grow in their careers, which will significantly impact their morale. If women have a more positive work experience and agree with their organization's goals, they will be happier at work, which in turn makes them more productive and effective at their jobs as well.

Leaders should strive to eliminate bias when hiring employees. Companies can leverage AI hiring tools to remove bias that is formed by humans during their candidate selection process. Organizations should also include diversity initiatives in their daily practice. This could mean recognizing and celebrating cultural and/or religious holidays other than Christmas, monthly themes that are dedicated to black history month, LGBT pride month and so on. Organizations need to recognize individuals as a "whole person", provide layered supports that are flexible, and include personalized resources that employees need to be successful. Organizations need to create new exercises that bring employees closer and allow them to connect and relate to each other, that are not just superficial. This is especially important for employees who look or feel different and might experience a sense of imposter syndrome, where they do not feel like they rightfully belong in their workplace.

8.3 Creating Job Opportunities for Women to Return to Work

Women can be empowered to return to work through "Returnships". Returnships are similar to internships, designed to help adults who have taken time away from their careers to reenter the workforce (Bianchi, n.d.). Returnships are paid, and offer mentorship, additional skills training, improve previous skills and aim to work to welcome people back into the work culture and the workforce (Bianchi, n.d.). In

Canada, according to IRelaunch, companies like IBM, MasterCard, RBC, GM, and a handful more offer a re-entry program for those who have been out of the workforce for years and have a gap in their resume. Some of these re-entry programs are designated for women.

This is a great initiative that can help women that took gaps in their careers, however, only a handful of organizations offer such programs, and the number of positions are scarce, in addition to the re-entry programs being limited to certain industries. Returnships only capture a small percentage of the millions of people who are trying to return to the job market (Lipman, 2019). Only about 34% of Fortune 50 companies have such programs and the percentage is even smaller for Fortune 500 companies (Hall, 2020). Additionally, return to work programs will need to help support significantly more people looking to return to the workforce soon, for as much as 84% of millennials of both genders say that they expect to take a "significant" break at some point in their careers for childcare or other reasons (Lipman, 2019).

Ideally, more return-to-work programs should be created in various job roles and companies would be encouraged to provide more opportunities to women who are returning to work. It might be possible that more women who have advanced degrees and higher educational qualifications are being selected as candidates for the returnship programs, which excludes a huge population who are less educated. Returnships can help during a female-led recession, if we remove hiring practices that make it difficult for them to return to work and add workplace policies that offer the flexibility they need, including health care benefits (Hall, 2020). Throughout this research, the fact that COVID-19 pandemic has forced women to leave the workforce has been highlighted in multiple occurrences. To help women reenter the workforce, reskilling and increasing the participation of women in growing industries are important initiatives (Dessanti, 2020). These initiatives must be fostered by employers or the government to support the reskilling and upskilling of women.

8.4 Address "Unpaid Care Work" with New Models of Economic Valuation

In North America, caring for the elderly or children, unless done professionally and paid for, does not count towards the GDP, and is considered informal work with no rewards (Power, 2020). Even though this is a critical function in society, there is no

monetary incentive to perform such tasks. If there were some rewards programs put in place that compensated care work and helped people, it might provide some relief to the community.

This idea is similar to a practice adopted in Japan which allows people to earn credits caring for the elderly (Hamilton Aging in Community, n.d.). People also have the option to save these credits for themselves as they age and exchange them for services (Hamilton Aging in Community, n.d.). The world's longest-running community currency is from Switzerland, it is called “WIR” meaning ‘we’ in German (Miller, 2020). WIR helped provide economic stability during national recessions (Miller, 2020). When individuals find themselves short of cash, they can use community currencies such as WIR to afford their next meal at their local grocery store, which can also help reduce the wealth disparity (Miller, 2020). Community currency is also helpful to encourage local spending and promote local products, helping to improve unemployment status and encourage community building. It allows businesses to make money while supporting their community and their economy (Miller, 2020).

If people were paid in some form of credit, for doing tasks such as driving a senior to an appointment, babysitting, running errands or other miscellaneous care work, they might be more incentive to help each other while forming community ties and bringing generations closer. This may provide much needed relief by taking some of the care workload off women, who would normally be the primary caregivers and distribute the work within the rest of the community or family. This is an effective way to help the local community and drive the local economy.

8.5 Provide More Affordable and Quality Childcare

As mentioned in earlier chapters, daycare options are not affordable for many people, which prevents women from re-entering the workforce as they step back to care for children. The plan to provide free daycares for all in Canada by 2020 was cut without providing any solution or alternatives. Data shows that only 20% of families with one child can afford licensed childcare in Ontario, Canada according to a report commissioned by the Ontario government (Stechyson, 2018). This limited access widens the gap between wealthy and poor populations and expands the gap in equity. Due to high demand, childcare centres have long waitlists and usually lack enough licensed staff

to fulfill the ever-increasing demand. At the age of four, children can start kindergarten, which is accessible to all as public education in Canada is covered from kindergarten to grade twelve. However, for children younger than four, there are no publicly funded pre-kindergarten programs, and so many women stay home from work to care for children and avoid daycare costs. Affordable and accessible childcare is a systemic problem in Canada and requires a long-term strategy in order to function better for the greater population.

If more childcare facilities were to be created, it would create more jobs for licensed childcare workers and reduce the waitlists to accommodate more children. If there were more resources available to cater for the increasing demand, the result would be lower childcare costs. Ideally, the government would reallocate tax dollars to subsidize healthcare or cap a certain amount of fees that parents pay. To do this successfully, there first needs to be a drive to get more people certified in early childhood education. There are several unemployed or underemployed populations that would stand to benefit if there were financial aids and educational support initiatives to encourage study and work towards careers in childcare (Dessanti, 2020).

However, something to be mindful of are gender-specific labour concepts i.e., what is historically considered female jobs and male jobs. Childcare services should not be limited to only women, even when paid, so that when building a greater workforce in this industry to support more parents, gender diversity is represented and supported.

8.6 Including Women, People of Colour, and Minorities in Decision Making and Governance

Women, people of colour and minority populations need to be involved in policy decision making, especially when those policies create a significant impact on their own groups. Policy takes a long time to implement and instigate change, but it can create real and meaningful long-term change that can help and protect people. There is a lot of historical data and previous analysis that could help guide these policies to protect women. There should be strategic plans to reduce psychological distress to prevent mental health problems, especially for issues that are proven to be the result of lockdowns. There needs to be better foresight planning for epidemics and crises, especially for vulnerable groups to prevent harmful implications. There should especially

be prioritization and focus for vulnerable groups such as women, students, the elderly and people with chronic illnesses. If governments wish to create lockdowns that affect people's jobs and incomes to protect their physical well-being, they must also be prepared to deal with the emotional, mental, and financial well-being of their citizens by reducing stress among other things. Isolation, loneliness, mental health are also important public health issues. Prolonged periods of quarantine have also been correlated with higher levels of anxiety (Xiong et al., 2020).

Diversity is a core value in Canadian society. Professionally, Canadians are not required to disclose their age, religion, or marital status during interviews with potential employers. This is to help ensure equal opportunity for all and to promote an egalitarian society. While Canada does this better than many countries, there is still room for improvement. Canada was one of the first countries to legalize same-sex marriage and protect the rights of the LGBQT+ community. A government that values equal opportunity for all needs to evolve its policies as societies needs to evolve, to ensure that everyone is included. Now it is time for policy to evolve to equalize women and their rights, to provide equal pay and opportunity as men. Women need to have the same right to develop their careers, live meaningful lives and pursue their passions. Men and women need to be seen as equally valuable in society in order to receive equal pay and rights. Doing so will help build egalitarian values and a diverse and equal society.

8.7 Fostering Large Organizations in Driving Change and Wellness Initiatives

Organizations must know the optimal physical and virtual space elements to provide for their employees to promote wellness. Ideally, there is a checklist that guides employers to ensure everyone is safe, comfortable and supported within the office space. The workplace checklist should ensure that the office and virtual spaces include a number of things for employees and their work.

This list includes, for instance:

- Considerations in office design: Natural light, natural elements, optimal indoor temperature, good air quality, soft lighting, ergonomic furniture, noise reduction in work areas, workspaces, calming décor colours, cleanliness and hygiene, health and safety planning

- Considerations for employees: lunchrooms, collaborative, stress management options (lunch and learns', yoga or counsellors), leisure and physical activity spaces, healthy team challenges, health insurance planning, private and open spaces, flexibility for work-life balance,
  equipment and training for home office ergonomics

When implementing workplace strategies and initiatives, it is important that organizations have come up with these decisions with a diverse set of stakeholders that include women in the decision-making process and have viewed things from a gender-diverse lens before implementation.

8.8 Including Mental Health Services in Health Insurance Coverage

Stress is a large part of wellness; however, mental healthcare is not a category that is covered by health insurance plans. Employed men and women have access to health insurance coverage from work and in Canada, all citizens have access to health care from the government to a certain degree of care. However, in the majority of extended health care options provided through work, as well as the subsidized care from the government that is available, therapy options are not one of the services included. Even more relevant nowadays, COVID-19 pandemic stress caused more significant negative impacts on women compared to men. Fortunately, the COVID-19 pandemic has allowed us to collect valuable data on employment and health. Many surveys found that women had greater psychological distress during the COVID-19 pandemic versus men. "Several lines of research also indicate that women exhibit differential neurobiological responses when exposed to stressors, perhaps providing the basis for the overall higher rate of select mental disorders in women (Goel et al., 2014; Eid et al., 2019, as cited in Xiong et al., 2020)". Stress is a big contributor to several health issues as previously mentioned in this research and the COVID-19 pandemic has brought out great stress in all people.

For women to be healthier and enjoy more success, we need to improve their overall mental wellness. Providing relevant services to cater for women will additionally benefit the mental health of the greater population. Ideally, there will be an emergence of new government-funded programs that focus on the recurring stress factors that affect women and provide some type of support or tool. These programs must actively focus on getting women and the community to participate to encourage higher levels of

social support. Two key areas these programs can focus on include social interaction and unemployment. Social interaction can help alleviate stress, reduce loneliness, and provide support. While unemployment is considered a large contributing factor to stress which many women are facing from the impact of lockdowns.

Chapter 9: Conclusion

All employees should have the right of and access to better healthcare services, employment wellness practices, workplace flexibility, and opportunities that allow them to participate at work while thriving at home and family life. the 1946 Constitution of the WHO states:

> "The right to health is a fundamental part of our human rights and of our understanding of a life in dignity. "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition."
> (Office of the United Nations High Commissioner for Human Rights & World Health Organization, 2008)

This project explored the importance of health and wellness in the workplace, especially for women. Additional factors considered pertain to the impacts of the COVID-19 pandemic. Women are essential contributors to the workplace and the economy, the setbacks they experience at work will have significant consequences to their physical and mental health, along with their well-being and the overall economy. To help mitigate the risks and harmful impacts from the limitations of the workplace and workplace support, there are various opportunities for enterprises and the government to better support the health of employees at work. Creating healthier workplaces and better workplace practices could build overall healthier and more productive populations, relieve the burden off other systems such as healthcare, improve the competitive standing of the economy and help enterprises meet their goals more effectively and efficiently.

This project projected a number of recommendations presented such as employee wellness programs, better healthcare benefits packages, improving workplace culture shifts and initiatives, offering more flexibility, adjusting the physical workplace to be hybrid, decreasing stress, ensuring work-life balance, tracking health promotions and several other ways. Implementations for change can be expensive and time consuming. To begin taking small inexpensive steps quickly towards healthier workplaces that support women, organizations and leadership should start by creating movements towards culture shifts through campaigns to get employees on board.

The next steps for enterprises may be to create short and long-term plans targeting employee and economic well-being following any of the strategies that were explored. Enterprises need to do the most that they are able to do for now, and slowly increase their scope to ensure they are planning for sustainable futures for everyone they affect in their line of work. Government can also play a role by building sustainable policies that better support the well-being of employees and hold enterprises accountable for any harm they cause workers. The key takeaways from this research are that we need to be mindful of the spaces and environment we create, as the chain of events that it may lead to can impact others and greater systems.

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