ACKNOWLEDGMENTS

The Massachusetts Commission on the Status of Women

The Massachusetts Commission on the Status of Women (MCSW) is an independent agency established by statute in May 1999. (M.G.L. chap. 3, sec. 66.) The mission of MCSW is to provide a permanent, effective voice for women and girls across Massachusetts, and to ensure that they achieve full equity in all areas of life. The MCSW fulfills its statutory requirements and satisfies its mission through public hearings, annual reports, and additional reports as the Commission deems necessary.

The MCSW is composed of 19 volunteer commissioners who are appointed by the Governor, the Senate President, the Speaker of the House, and the Caucus of Women Legislators. In addition, there are 11 regional commissions that span the Commonwealth and are comprised of 113 regional commissioners appointed by MCSW.

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Members of Mashpee Wampanoag Tribe of the Cape Cod and Islands region
Brockton Women’s Group in Brockton of the Plymouth County region
Brazilian Women’s Group of the Eastern region
Community Action Pioneer Valley in the Hampshire-Franklin region
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COVID-19 exposed and amplified systemic inequalities women face in the workforce, an acute crisis that continues to have long-term negative implications for individuals, families, and communities across the Commonwealth. The pandemic has exacerbated significant workforce barriers for women and simultaneously revealed long-term societal, institutional, and systemic fault lines necessary to address to ensure equity and dignity for women in the workforce. A persistent and underlying challenge, especially for women with children, is the cost-prohibitive childcare system in the Commonwealth. As primary caregivers, the direct and indirect impact on women has led to lost household income and the emergence of a “second shift” effect on mental and physical health. To measure this impact, MCSW conducted quantitative and qualitative research in fall 2021 and winter 2022, which included: a survey of Massachusetts women which garnered data on workplace benefits, flexibilities and opportunities; a virtual public hearing held in November 2021, and 7 Community Conversations across the Commonwealth. This report shares the feedback and voices of women who completed the surveys and participated in public forums. In addition, this report highlights four primary areas that emerged from the qualitative and quantitative research conducted and reveals significant opportunities for immediate policy intervention. These findings serve as a platform for shaping further research and inspiring legislative advocacy.

**Key Highlights**

- **(Mis)Treatment in the Workplace**
  Almost 40 percent of the women surveyed indicated a direct correlation between their gender and their treatment in the workplace. In addition, women in higher-income categories expressed increased gender-based mistreatment.

- **Gaps in Workplace Benefits and Advancement Opportunities**
  Women earning less than $50,000 yearly reported fewer healthcare/insurance benefits and paid time off. Most notably, women surveyed in this category indicated limited access to mental health care and virtually no access to childcare or dependent care benefits.
Key Highlights

- **The Second-Shift Effect: Home and Work-Life Responsibilities**
  More than 40 percent of the women surveyed reported increased caregiver responsibilities. Almost half of the women indicated an increase in household chores while balancing an increase in hours in their workplace.

- **Prioritization of Physical and Mental Health**
  More than a quarter of the women surveyed indicated that their work status has affected their ability to prioritize physical and mental healthcare. More than a third of these women stated that their work status negatively affected their mental health.

**Policy Recommendations**

- Investment in the four key areas to eliminate barriers and promote equality for all women in the workplace is critical for the Commonwealth. This includes establishing policies that devote additional resources to high-quality, affordable healthcare, creating an Office of Career Re-entry to help address gaps in employment, and passing Predictable Scheduling legislation to ensure women have a healthy work/life balance.

- This report highlights proposed legislative solutions that may address the key areas identified in the report, including bills related to childcare, and remote work.

- This report highlights the importance of collecting data for women of color. More needs to be done to ensure that diverse voices of women of color are captured via formal surveys and informal conversations to understand their challenges and behaviors better and develop policies accordingly. Devoting more resources to qualitative research is essential for a deeper understanding.

“I don’t say women’s rights – I say the constitutional principle of the equal citizenship stature of men and women.” Justice Ruth Bader Ginsburg
II. INTRODUCTION

The MCSW’s Reports and Evolution of this Initiative

Since its inception, MCSW has strived to fulfill its statutory imperative to "conduct an ongoing study of all matters concerning women" and to "study, review and report on the status of women in the Commonwealth." (Mass. Gen. Laws. c. 3, § 66)

Following Governor Baker's state of emergency declaration on March 10, 2020, MCSW has studied the impact of this pandemic on women and girls across the Commonwealth, in conjunction with examining important issues and barriers facing women and girls. This includes gathering, analyzing, and reporting information on the impact of COVID-19 on women and girls in the Commonwealth for the last two years. The MCSW's intent and mission are to offer well-informed recommendations as programs and policies are developed and legislation is enacted to meet the needs of Massachusetts constituents. This effort has resulted in MCSW issuing four major reports:

- **April 2020,** The Impact of COVID-19 and Related Policy on Massachusetts Women and Girls
- **October 2020,** Childcare and Education During COVID-19: A Report on the Economic and Social Impact on Women in Massachusetts
- **May 2021,** Impact of COVID-19 and Related Recommendations to Improve the Status of Women of Color
- **June 2021,** Report on the Status of Girls in the Commonwealth and Related Recommendations

The Commonwealth, specifically women, has weathered two years of a global pandemic and remains impacted by the repercussions of COVID-19. As the country and the Commonwealth enter a new stage of recovery, new strategies must be adapted to support working women, particularly women of color. The pandemic shed light on and compounded the systemic inequities for women before 2020 and COVID-19.

The findings in this report show the value of a comprehensive approach to research that informs public policy. This report looks at the systemic inequities and barriers women face in the workforce and addresses the challenges revealed in women’s lived experiences across the Commonwealth. The MCSW offers findings and related policy recommendations which contribute to that conversation and serve as a resource to policymakers at the state and local levels.
III. METHODOLOGY

**Goals**
The goal of MCSW and this study is to provide a report on the status of women in the Commonwealth. The fourth is a series of findings from MCSW focusing on the impact of the COVID-19 pandemic on women. This report is specific to the workforce and explores this impact across geographic, ethnic, cultural, socio-economic, and LGBTQ+ identifying groups.

**Survey**
The initial study design included a voluntary survey via Google translated into five languages, including Spanish, Portuguese, Mandarin, Vietnamese, and Haitian Creole. The survey instrument included some questions that were given a scale from 1 - 5, with 1 being the least and reflecting minimal effect, to 5 being the most and reflecting a severe impact. The scale was used to give respondents a way to measure the impact of different variables on their workplace experience. The survey was promoted through various platforms, including e-mail, direct contact, social media, and MCSW newsletter. The survey opened on November 5, 2021, and remained open until February 28, 2022. Further outreach to diverse communities was employed to expand the number of survey respondents.

**Public Hearing**
MCSW held a virtual public hearing on November 18, 2021, with 83 stakeholders in attendance and 15 participants who provided oral and written testimony. In addition, multilingual services, including American Sign Language interpretation, were provided.

The public hearing captured many unique voices of women in the Commonwealth. However, the demographic makeup of the public hearing represented only a small view of the rich diversity of women in Massachusetts.

**Targeted Community Conversations**
To enrich the quantitative and qualitative data captured in the survey, MCSW piloted a series of 7 Community Conversations that intentionally reached into communities where women’s voices have been traditionally underrepresented. The MCSW collaborated
with its regional commissions to identify and engage community partners to organize these events.

The MCSW leveraged its connections and networks of state and regional commissioners and partner organizations to ensure that diverse groups of women not captured in the survey were able to share their unique perspectives.

The following Community Conversations were held from January 10, 2022, through February 28, 2022:

- **La Colaborativa** in Chelsea of the Eastern County region
- **Members of the Mashpee Wampanoag Tribe** of the Cape Cod and Islands region
- **Brockton Women’s Group** in Brockton of the Plymouth County region
- **Brazilian Women’s Group** in Allston of the Eastern region
- **Community Action Pioneer Valley** in the Hampshire-Franklin region
- **MomUp** in Needham of the Upper Middlesex region
- **South Shore Women’s Business Network** of the Plymouth County region

Conversations were guided by the questions of the survey MCSW distributed. In some convenings, MCSW co-facilitated conversations with community partners to strengthen existing partnerships. Building on the trust, diversity, and inclusion MCSW brings to all of its public hearings, Community Conversations were conducted in collaboration with community organizations to guide MCSW around issues of confidentiality, anonymity, language, culture, and ethnic identity. Women were given flexible options to share their stories, including off-camera discussions and non-recorded sessions. Some sessions included free childcare and light dinner to engage a broader audience. Multilingual staff members facilitated two community discussions in Spanish.

The survey and public forums yielded an increase and variety in responses from more varied racial, ethnic, geographic, socio-economic backgrounds, enriching both the quantitative and qualitative data gathered up to that point. Guidance from community partners created a safe and comfortable space for women to share their lived experiences. We embraced the need to be more flexible and collaborative in our data gathering process. Similar to pre-pandemic hearings, these conversations offered the authenticity and a platform for all women’s voices. In addition to official testimonies, these conversations offered MCSW the opportunity to connect with women who are understandably distrustful of “official” and governmental agencies because of historical and ongoing trauma.
**Situating This Report**

The MCSW recognizes that this report is part of a larger ecosystem. Therefore, MCSW reviewed a wide range of literature in the field of women in the workforce to ground the results in context. These resources are listed in the References section.

**Next Steps for Methodology**

This report highlights the importance of exploring alternative research models that provide effective platforms women of color to voice their experiences. This includes collaborating with community partners to expand outreach to women of color, ensuring richer data collection, and providing more flexible timeframes that make it easier for women to attend public forums and complete data surveys. Additional strategies include: issuing a press release to media outlets across the Commonwealth, sharing information through social media and in partnership with participating organizations, incorporating a robust feedback loop to share findings, and having conversations with community leaders about the significance of data collected and the community impact.
"Responding to surveys such as this one is difficult when I don’t feel I fit into the underlying model of workforce participation. I haven’t had a full-time paid job for 35 years, yet I consider myself and am perceived as an accomplished professional. I consider myself a full-time artist. Is that a job? If I’m in the studio less than 40 hours/week, is it full-time? I am well past the traditional retirement age, but my work life is barely different from long before reaching that age. Must you be retired because of your actual age, and you don’t hold a paying job? These kinds of questions and categories are important. In my own research on professional women, many, if not most, piece together professional and personal lives in a large number of creative ways that are hard to categorize. Those that don’t fit like me, just don’t fill in surveys like this because of course they don’t fit. So you build in a significant bias and miss much that is happening. Thank you for reading."

Survey Respondent
IV. RESEARCH AND FINDINGS

Overview
As noted, MCSW conducted a survey to collect quantitative data about the impact of COVID-19 on working women in the Commonwealth. The survey asked respondents to provide a number range to their survey questions. The scale ranged from 1-5, with 1 being the least and reflecting minimal effect to 5, being the most and reflecting a severe effect. The survey instrument was designed primarily to gather information about a respondent’s work benefits, work-life balance, and ability to prioritize mental health. More than 650 racially/ethnically diverse women representing 186 communities in the Commonwealth completed the survey. The MSCW also hosted a public hearing and 7 Community Conversations throughout Massachusetts to collect qualitative data from women.

Survey Responses and Demographics
This report combines quantitative and qualitative data from the statewide survey, the public hearing in November 2021, and 7 community conversations. It includes key findings on women in the workforce and findings relative to all women. This report is followed by actionable recommendations for legislators, community leaders, organizations, and businesses.

Most of the respondents (637) answered in English; 10 responded in Spanish; 6 responded in Portuguese; and 1 responded in Haitian Creole. The respondents were predominantly women, with 6 respondents identifying as non-binary/gender non-conforming individuals and 6 respondents identifying as men. For the analysis below, reports of “women” respondents include those identifying as non-binary/gender non-conforming, as those respondents may also experience gender-based discrimination or other gender-based effects on their lives and workplace treatment. For more details on the survey respondents’ demographics, including racial/ethnic identity breakdown, age range, and income range, please see the graphs on the following pages.
This report highlights 4 primary areas that emerged from qualitative and quantitative research, these areas include (mis)treatment in the workplace, gaps in workplace advancement and opportunities, The Second-Shift Effect, and prioritizing physical and mental health.
1. (MIS)TREATMENT IN THE WORKPLACE

COVID-19 has revealed how women have long endured gender-based workplace mistreatment and their ability to advance careers, income, and wage levels. Income range, type of workplace, and race/ethnicity often intersect to create additional nuances and exacerbated mistreatment for women. Respondents reported myriad mistreatments including being cut off in a conversation, getting labeled as too assertive for expressing one’s opinions, and worrying about or directly experiencing sexual harassment.

“\textit{I did feel like my gender affected how I was being treated at work so I switched to a company that had a leadership team that is primarily female and now I feel like my voice is heard more and gender is not as much of an issue. I also switched jobs in July to be able to have more work-life balance, be able to practice more self care, and be able to continue to work from home.}”

Survey Respondent

Cross-sections of MCSW’s recently collected data provide insight into the women’s workplace treatment, including how that treatment is affected by intersecting identities. The survey data showed that a significant portion - 37.8 percent of women - overall ranked the effect of their gender on their treatment in the workplace a 4 or 5 out of 5. Interestingly, the survey demonstrated that, as income range increased, there was a higher occurrence of adverse gender-based workplace treatment. This is an area warranting further study in order to determine the dynamics causing negative treatment based on gender.

“Please do an investigation on how Black women physicians are being undermined/mistreated on the job by colleagues, and pushed out their positions in the Massachusetts health care setting, particularly in the large hospital systems in the state. With all the health disparities, we should preserve the diversity in the Massachusetts medical workforce.” Survey Respondent

The MCSW’s survey also showed that race affected treatment in the workplace, with women of color much more likely than white women to state that their race significantly affected their treatment.
"At almost 55 years old and in senior management (and physician), I’m still finding that my male colleagues (juniors or supervisees) try to pawn off their secretarial work on me, and patients call me by my first name or Dr. Cutsie First Name or ‘hon’ or ‘babe’. In some ways things were better 30 years ago because everyone was bending over backwards to try not to be sexist in the workplace whereas now people think we’re past those days so unthinking continue to exhibit sexist behavior, often even women against other women. Sad how far we have not come." Survey Respondent

Notably, intersections of race and gender affect workplace treatment. Self-identified Latinx respondents reported experiencing gender affecting their workplace treatment at higher levels than white women or women overall (roughly 52 percent versus 37 percent and 38 percent, respectively). The survey also showed, through the qualitative responses collected, that efforts internal to workplaces were shut down or frustrated. For example, one respondent reported that efforts to hire paid diversity, equity, and inclusion (DEI) staff were rejected and that her company expected her to devote significant unpaid hours to DEI efforts.

Collectively, the data indicates that policy priorities should be focused on addressing the effects of discrimination in the workplace, both for women and people of color, but especially for women of color.
“This is an important conversation ... I feel fortunate that I am able to work from home and that I have not been affected by it and I've had this reflection during the pandemic that I do want this type of separation but at the same time I have enjoyed my little ones a little more. I am fortunate enough to be a part of an organization, I work for Foundation Medicine, that has been flexible with parents especially mothers. They have their own group of people, an internal organization called Uplift; unleashing of leadership and impact of female talent. It has been a forum for mothers and for women to really help each other to think about all the issues that are facing us. I feel fortunate to work for an organization that is thinking about the status of women and how to unleash all the potential and help them through the hurdles they might have.”

Gina Rodríguez

“A lot of women are going from working for corporations and having burnout, then turning to growing their own business. They want to have more diversity in the type of members: moms, single, socio-economic status. They see issues with balancing fulfilling needs at work then coming home to fill needs of children or parents; then having no time for themselves. Lynn suggested ways we can present the information we found to the communities we want to hear from--webinar, short presentation of data and findings.” South Shore Business Network

“Issues were brought up around access to technology and internet, proper childcare, transportation and experiencing prejudice. A member discussed her experience with the school system treating her and her family differently due to prejudice and not being offered services and or support for her children while they were having issues with internet and transportation access. She felt that if she had more or was of a different background she would be given better access to support. Although their tight knit community of other families is supportive, they felt they were navigating outside support on their own and did not know where to turn. Issues with not having daycare or daycares being closed or at full capacity. She saw children having mental health issues and feeling unstable with all the changes that COVID brought, and schools not showing their support.”

A member of the Mashpee Wampanoag Tribe
2. GAPS IN WORKPLACE BENEFITS AND ADVANCEMENT OPPORTUNITIES

The MCSW examined how workplace benefits contribute to the welfare of women workers, specifically asking if their employers offered paid time off, healthcare/insurance, mental health benefits, pension or retirement funds, and child and dependent care.

The most prevalent workplace benefits that were offered to respondents included healthcare/insurance (80 percent), paid time off (79 percent), and pension or retirement funds (73.4 percent). Only 43 percent had access to mental health services benefits, while 31.4 percent had dependent care accounts, and only 7.38 percent received childcare benefits. The 176 respondents who made less than $50,000 per year received fewer benefits in all categories: only 64 percent receive healthcare/insurance and paid time off, and 55 percent are offered a pension or retirement funds. Fewer than 30 percent of respondents have access to mental health care through their workplace. Notably, the lack of childcare (3.4 percent) and dependent care benefits (11.4 percent).
“I spend about 40% of my income on childcare. I’m fortunate that I can and don’t understand how most people with kids do it. I wish that [workplaces] could offer more to working parents who can’t pay for quality childcare. We need those parents in the workforce and it shouldn’t come at the expense of their children’s well-being.”
Survey Respondent

Overall, about 20 percent of respondents indicated that they have no opportunities for advancement. Of those with an annual income less than $50,000, nearly a third do not have opportunities for advancement. Notably, MCSW survey data revealed that leadership opportunities, education, and promotion are available only at fewer than half of workplaces, and that over a third of women responding had no opportunity for a salary raise. The absence of advancement opportunities were more pronounced in women earning less than $50,000 per year, with only about two-thirds having no option of receiving salary raises, education advancements, or leadership opportunities. Approximately, 75 percent of respondents in this lower income bracket have no opportunities for promotion. Of note is that over 75 percent of those who earn less than $50,000 per year are paid hourly and have more than one job, compared to 25 percent of those who make over $100,000.
"I am a Master’s level, bilingual Mental Clinician who prior to the pandemic was working ... I was making less than $50,000 with a family of 5 and over $120,000 in student loans. When the pandemic started; I was working, going back to school and having to stay at home with my children for virtual learning became too difficult. Because my husband had a consistent paycheck and had the ability to get paid more than I did, I was forced to leave my job to assist my 7- and 4-year-old with virtual learning and I had no childcare option that we could afford. My husband increased his work hours to help pay for increased financial responsibilities. My husband and I are a hard working middle class, Latinx family who did not qualify for additional financial support or child care assistance during the time public schools were closed.” Survey Respondent

“The pandemic was giving us the opportunity to mend a system that was not set up for working women in the first place. We should not be transforming into a society where women work remotely at home to be with children and men go back into office. We found commonality in challenges with breaking into marginalized communities to offer services and support with empathy and compassion. We should be encouraging women to get into new fields and not limiting them to admin positions. We should be talking and helping women get into a supportive work environment where they have opportunities to grow.” MomUp Participant
3. THE SECOND-SHIFT EFFECT: HOME AND WORK-LIFE RESPONSIBILITIES

The Second Shift, a phenomenon named and popularized by sociologist Arlie Hochschild, refers to the household and caregiver obligations women encounter following their day’s labor outside of the home. This effect exacerbates the detrimental impact of limited workplace benefits and advancement opportunities.

The graph above reflects the increase in at-home responsibilities coupled with workplace responsibilities within the past year. There is no time to decompress or rebound before the second shift of home care begins.

“I work at Eastern Nazarene College and they recognize the importance of families ... I have been an educator for over 20 years and it certainly is a challenge to find the time to do everything else in addition to being an educator. We need to continue to help women find those places and spaces that offer that work-life balance that they so desperately need. We have all of those multiple roles and hats in our families, so as a professional who is over 50 it took me a long time to figure out that my health and wellbeing is very important and it is important to the job that I do and my family and extended family and that's my number one contribution.” April Díaz
Despite the strain of The Second Shift, the quantitative data showed that employers are not accommodating essential needs: 92.9 percent of respondents reported that they do not receive any childcare benefits. Furthermore, of those who reported an increase in caregiver responsibilities, 1 out of 5 respondents do not have paid time off from their workplace. This emphasizes the need for childcare as a public good and the necessity to offset the burden that frequently falls on working women.

“Online schooling and decreased child care hours with additional workload with less employees working has made the last year and half unbearable at times. For those of us essentials that worked straight through Covid with no bonuses or extra pay or government assistance, we have been let down people, everyone in this state/country!” Survey Respondent

Despite the strain of The Second Shift, the quantitative data showed that employers are not accommodating essential needs: 92.9 percent of respondents reported that they do not receive any childcare benefits. Furthermore, of those who reported an increase in caregiver responsibilities, 1 out of 5 respondents do not have paid time off from their workplace. This emphasizes the need for childcare as a public good and the necessity to offset the burden that frequently falls on working women.

“Same with the culture of the profession my husband/co-parent is in, but that's another can of worms. I would love to share more if it might influence policy change. I have so many examples from my own life, from 'progressive' bosses refusing to let me work from home even part of the time (when I had a 1-year-old and my commute was 2+ hours per day), to people telling me to 'go home and rest' when I showed up in court visibly pregnant, to employers refusing to consider me for a job they themselves said I was very well qualified for solely on the basis that I could not work nights and weekends (in addition to working all normal business hours). I have experienced prejudice unrelated to my status as a mother—e.g., co-counsel expressing surprise that I wrote a good motion 'all by myself,' supervisors insisting on 'putting me in my place' if they thought I was becoming 'presumptuous' in my advocacy for a client—but I really don't want the special problems faced by mothers to get left out of the conversation. The women's movement did great things for women in the workforce. But we still have so far to go for MOTHERS in the workforce.” Survey Respondent
The MCSW collected data highlights important problems raised by women's experiences in the workforce and elucidates more nuanced lived realities. The survey shows a tendency for women to overextend themselves to satisfy professional and domestic needs.

The data indicates that 63.7 percent of respondents’ income financially supports other individuals: 48.7 percent support children, 7.8 percent support parents, and 8.6 percent support extended family. To satisfy this obligation, responses demonstrate that 43.3 percent of women work over 40 hours a week, and 40.1 percent work full-time.

“I am fortunate enough to work at a job that provides flexibility and allows me to work remotely, but the weight of childcare during Covid has been crushing. There is never a moment to breathe because I am always working or caring for a child or doing laundry or figuring out where to get a kid tested for Covid or frantically figuring out how I'll attend a meeting with a child home quarantining. Men deal with these issues too, but I've seen it disproportionately affect women, and I fear that the women of the Commonwealth are going to lose decades of (painfully slow) progress in the workplace because of the pandemic.”
Survey Respondent

“Now that I am working primarily in-person more than 75% of the time, self-care has taken a backseat to other responsibilities.”
Survey Respondent

“In the US, there is no slowing down, there is no self-care. People talk about it, but you need to work. You need to finish this project or that email. You work through lunch. You don’t eat half the time. You hurry to pick up your children, and go home, cook supper, clean up, do laundry, and put children to sleep. By then, most working parents are too exhausted to plan out what little they will do for themselves and there is probably no extra money anyway. I personally wish there was some type of government funding to spend more time with your family. That is the most important thing, not to rush around everywhere and put a job before the children.”
Survey Respondent
Notably, 1 in 6 respondents hold more than one job, and one-third of respondents with more than one job make less than $50,000 per year. Thus, for low-income households who also lack the flexibility of a remote or hybrid work environment, satisfying domestic obligations becomes increasingly challenging.

“Part-time workers continue to give way more than they receive back & employers capitalize on this.” Survey Respondent

In addition, 42.2 percent of women reported working in person, thereby highlighting an increased lack of flexibility that accompanies remote or hybrid work. Additionally, 38.2 percent of respondents are not salaried by an organization, implying a further lack of scheduling stability, as wage workers often do not get predictable schedules or organizations’ security and benefits.

“I am an hourly independent contractor at a local defense company. I get no benefits at all. I am in my 60s and have been facing age discrimination for a long time in trying to get a permanent position.” Survey Respondent
4. PRIORITIZING PHYSICAL AND MENTAL HEALTH

In evaluating the status of women in the workplace, the MCSW collected data on both the effects of work on women’s mental and physical health, as well as the provision of benefits to address mental and physical health in the workplace.

Response rates related to the negative effects on mental health were consistent when disaggregated between the income range and race/ethnic identity. However, when broken down across age groups, younger women reported negative effects on mental health at much higher rates than older women.
The data suggests a need for further exploration into the mental health effects of the workplace on younger women. Decision-makers should prioritize examining work’s negative effects on women's mental health, with special attention to young women in the workforce.

“The pandemic severely impacted the mental health of my teenage daughter. She was hospitalized and my family was responsible for ensuring her safety and that she could access appropriate treatment and support. Thankfully I had an incredibly supportive workplace that allowed me to work from home as needed. Unfortunately, without paid leave, I could not stop working temporarily in order to care for her.” Survey Respondent

“Today I am speaking on my own behalf, as a mother, as a woman, as a woman of color, as a black woman. I wanted to talk about; kind of how COVID, in the workplace has affected me over this year and some of the things that I have seen as a professor. I work with a lot of different students and a lot of the things that I have heard from women and girls as students is the mental health aspect of it, the anxiety, the losing their jobs, they’re trying to take care of school and work and kids and parents. 19 and 20-year-olds sometimes try to take care of children, parents, and grandparents all while dealing with grief and loss and career uncertainty and it makes it even harder as a professor because you want to help ... it is hard to juggle it all it is very important that we are looking at this because our real-life issues are exacerbated because of the things we are and are not dealing with in the workplace.” Survey Respondent

Responses relative to prioritizing mental and physical health-based work status were consistent across race/ethnic identity. However, when the data was viewed by income, responses varied greatly. For example, women in the lowest income brackets reported an inability to prioritize mental and physical health at much higher instances, with almost half (46.67 percent) of respondents earning less than $10,000, rating this effect a 4 or a 5 compared to 26.7 percent of women overall. This indicates a need for further study of how lower-income women may be prevented from accessing the healthcare they need and exploring policy objectives to remove those barriers to access.

The survey data additionally showed that only a small portion of women whose mental and physical health was significantly negatively affected by their work status had benefits related to mental health covered. For example, fewer than 40 percent of women who rated their work’s negative effect on their mental health as high or severe had mental health benefits provided by their employer. Further, the survey showed that more than 20 percent of women spend over a quarter of their income on healthcare expenses.
The qualitative data from the survey confirms these effects and also demonstrates the connections to related issues, such as the ability to provide care for oneself and others. One respondent reported that even with “the highest amount of coverage that my employer can provide,” health insurance bills themselves negatively affected her mental health. Meanwhile, the same respondent reported that “sexism in the workplace is a daily struggle.” Another respondent reported that the pandemic had significantly affected her daughter’s mental health. While her benefits provided healthcare coverage and her workplace was supportive, there was no ability to take paid leave to stay with and support her daughter. Another respondent demonstrated the intersection of the pandemic’s impact on issues of mental health, childcare, and economic loss. She explained that while she was able to work in a job that was remote and flexible, stating, “the weight of childcare during Covid has been crushing. There is never a moment to breathe because I am always working or caring for a child or doing laundry or figuring out where to get a kid tested for Covid or frantically figuring out how I’ll attend a meeting with a child home quarantining. Men deal with these issues too, but I’ve seen it disproportionately affect women, and I fear that the women of the Commonwealth are going to lose decades of (painfully slow) progress in the workplace because of the pandemic.”

Overall, both the qualitative and quantitative data suggest that work is having a negative effect on the mental health of many women—especially young women—and that many of those women do not have access to workplace benefits to address that negative effect. The data also shows that many women have been negatively affected by their work status which hinders their ability to prioritize physical and mental health and wellbeing. This suggests that decision-makers should explore policy solutions addressing both the negative effects of the workplace on women’s health and wellbeing, as well as ways to address removing barriers to care—financial and otherwise.

**Analysis**

The MCSW’s analysis of the quantitative and qualitative data found the most significant barriers for women include:

- Access to transportation
- Access to affordable and high-quality childcare
- Sustainable employment
- Food insecurity and hunger
- Access and maintenance of mental and physical health
- Increased household responsibilities
- Access to reliable Internet
- Lack of affordable and below-market housing
V. RECOMMENDATIONS

This report is an invitation to lawmakers and the private sector to heed women’s voices, especially those most marginalized, to collaborate, identify gaps between policies and needs, and propose and review solutions that have the most significant impact. In partnership with the eleven regional commissions, MCSW makes the following recommendations:

- **Normalize affordable and accessible high-quality childcare as a public good**

A consistent and critical theme that emerged from the research is the breakdown of the childcare infrastructure, before and throughout the pandemic. The data confirm the gaps in childcare, forcing many women to abandon or reduce work or rely on informal childcare arrangements. Lack of policy prioritization of this issue disproportionately impacts women, who have primary responsibility for childcare regardless of their income level, race, ethnicity, and other demographic indicators.

As illustrated in the Governor’s *Future of Work* Report, childcare is critical for recovery. It postulates that female employment recovery to pre-COVID-19 levels are expected to lag behind males’ recovery rates by 18 months, and "access to affordable childcare for ages 0-5 and before/after school care for school-aged children is likely to remain a barrier to workforce participation." On a positive note, the report indicates that an additional 72 percent of employers are considering offering childcare support to employees in the future. This is essential.

The MCSW advocates strongly for high-quality, affordable, and accessible childcare as a fundamental investment for a vibrant workforce and, as such, should be considered a public good. The MCSW applauds the Massachusetts Department of Early Education and Care for its plan to use federal stimulus funds for grants to childcare providers for recovery and for training. Furthermore, MCSW suggests expanding the network of locally run or home-based childcare centers and, as the Executive Office of Labor and Workforce Development recommends, conducting a "deep dive into innovations around childcare to better understand segments of workforce most affected will benefit."
For decades women have borne the brunt of an invisible tax incurred on their earnings, future earnings, and potential and career trajectory due to care-related employment interruptions. The pandemic only exacerbated this discriminatory practice due to the prevalence of women stepping back to address childcare gaps, school closures, care for other dependents, and their own health.

The Governor’s *Future of Work Report* states that as of April 2021, the labor force of female workers in Massachusetts dropped by 5.1 percent relative to pre-pandemic levels, compared to 1.7 percent for male workers.

Employers have traditionally failed at interpreting employment interruptions on a candidate’s resume. As such, women who have stepped up to the plate to take on increased care responsibility, before and during the pandemic, are faced with the added burden of an employer’s inability to accurately interpret a resume with employment gaps. Automated resume tools, known as applicant tracking systems, are known to overlook candidates with any employment interruption. This structural impediment to re-employment is an extra burden that women in the workforce face in the post-pandemic workplace. Women pay a steep price for this re-entry burden. Estimates of a two-year interruption in employment translate into lost earnings of $700,000 - $2,000,000 per earner, depending upon their education level over their lifetime.

This is especially pronounced for certain sectors that women of color occupy. The *Future of Workforce Report* states that “it is quite likely that a disproportionate amount of job displacement will impact women, who represent over 85 percent of administrative occupations such as assistants, secretaries, payroll clerks, and receptionists.” *What’s up with Massachusetts’s Labor Market* indicates that employment, in December 2021, is down 17 percent in hospitality, down 6 percent in education and health services, while up in business and professional services.

Testimony at the public hearing called for the immediate creation of an Office of Career Re-entry to address this ongoing and accelerated form of discrimination incurred by women at all economic strata and anticipated this transition to be a crucial area for scrutiny, education, re-alignment, and programmatic support. The MCSW advocates for this action.

• Normalize gaps in employment
- **Normalize innovations in work flexibility**

During the pandemic, sectors and workplaces were able to pivot to remote or hybrid work arrangements, which allowed many women to remain and increase their salaries in some cases. Surveys and testimonies called for the importance of workplace flexibilities as an important work benefit that can positively impact women’s ability to balance work-life responsibilities and improve mental health.

In pursuit of flexibility or out of necessity, many women opt to work part-time. However, many part-time positions, like those in retail and hospitality, often are “on-call” and employees have little control over their shifts. Having predictable scheduling allows workers not only to take care of the family but also to pursue educational opportunities that can launch women into other positions more suited to their capacities and talents. The MCSW advocates for lawmakers to pass related Predictable Scheduling legislation.

- **Normalize inclusive and dignified workplace cultures**

Women, especially women of color, continue to experience mistreatment and discrimination in the workplace, ranging from sexist attitudes that dismiss or mischaracterize their contributions to sexual harassment. Since fewer women are in management positions, their ability to voice concerns and advocate for themselves or for broader diversity, inclusion, and equity are complicated by power as well as social dynamics. Even in situations where an employer might consider an examination of workplace culture and processes, those marginalized are often burdened with unpaid labor to assess and advise.

While many corporations have already dedicated resources to offices or officers of diversity, equity and inclusion, efforts have primarily been focused on recruitment, which is easily quantifiable. Transforming workplace culture, with the input of women, especially those with intersecting identities, is an essential component in both recruiting and retaining the talents and experiences of women.

Legislation critical for retaining women in the workforce, while respecting their dignity, includes those that prohibit discrimination (including loss of employment) based on status as a victim of abusive behavior - even when that abuse occurs outside the workplace, as exposed and multiplied by COVID-19 - and those which require employers to provide workplace accommodations for victims of abuse in the process of seeking redress.
WOMEN IN THE WORKFORCE

- **Normalize mental health and physical health benefits.**

Many women who were surveyed and testified emphasized the lack of mental health resources made available through a benefits plan. Financial security can also be severely compromised, especially for low-income women who have to pay for childcare or healthcare out of pocket. In turn, their health is compromised when they cannot afford to take time off to meet preventive, urgent, and chronic physical and mental health needs. The lack of retirement contributions from an employer further exacerbates the issue of elderly poverty and puts a burden on the next generation. Paid time off, mental health, and physical health care are essential benefits for women, and especially true for women of color, who are disproportionately affected.

- **Normalize an intersectional approach and disaggregated data in policy review**

As Audre Lorde stated, “There is no such thing as a single-issue struggle because we do not live single-issue lives.” Whether in the workplace or amongst government agencies, the design of equitable cultures, policies, and laws requires us to collect and examine disaggregated data. As noted in the Boston Indicators report, *Building AAPI Power: A Profile of Asian American and Pacific Islander Communities in Greater Boston*, aggregate data can significantly skew analysis, and averages mask intra-group disparities in income, for example. As the *Women and Girls Matter! The Status of Massachusetts Women and Girls (2019)* report proposed, MCSW has adopted an intersectional methodology and “policy analytic framework...recognizing that gender does not privilege it as a category over race/identity, social-economic status, or other identities...” The analysis in this report has sought to adhere to this approach.

This intersectional approach, coupled with an equity framework such as those employed by the San Francisco Commission on Women and the City of Pittsburgh’s Gender Equity Commission to measure the differential impact on women’s lives can further identify social determinants that adversely impact a woman’s success in the workforce and related barriers to (re)entry. Indeed, the community conversations with traditionally marginalized groups, including those who may otherwise be “statistically” insignificant, have yielded important insights into the challenges they face. These challenges include: transportation, food insecurity, employment status, economic stability, lack of accessible, affordable, high-quality childcare, and physical and mental healthcare evidenced in the survey. This qualitative data points to specific policy and programmatic interventions that would have been missed if only aggregate data were analyzed and measured against.
VI. LEGISLATIVE ACTIONS

The MCSW is committed to legislative actions proposed in this report, along with the legislative passage of the Proposed Resolution found in Appendix C of this report. Towards this end, the MCSW has endorsed the following bills:

- “Common Start” An Act providing affordable and accessible high-quality early education and care to promote child development and well-being and support the economy in the Commonwealth **H.605** (Reps. Gordon & Madaro) & **S.362** (Sens. Lewis & Moran)
- An Act addressing barriers to care for mental health **S.2572** (Sen. Cyr)
- An Act Requiring One Fair Wage **S.1213** (Sen. Jehlen)

In addition, the MCSW urges consideration and support of the following proposed bills:

- An Act relative to work from home incentives **H.2900** (Rep. Frost & Dooley).
- An Act relative to helping residents work remotely **S.54** (Sen. Finegold, Robinson, & Campbell).
- An Act removing barriers to lifting people out of poverty **S.102** (Sen. Eldridge & Sena)
- An Act providing a guaranteed minimum income to all Massachusetts families **S.1852** (Sen. Eldridge, Uyterhoeven, Lewis, & Lovely)

As part of its legislative agenda for the 2022-2023 programmatic year, the MCSW will advocate along with coalitions and supporters for the passage of these bills.
VII. REFERENCES

**Reports**


UMass Boston’s Center for Women in Politics and Public Policy of the McCormack Graduate School of Policy and Global Studies, Women and Girls Matter! The Status of Massachusetts Women and Girls: Data to Inform and Advance Policy *(December 2019)*

Executive Office of Labor and Workforce Development, Impact of COVID-19 on Women in Workforce *(October 1, 2021)*

Boston Indicators, a research center of the Boston Foundation in partnership with the BBI's Asian Research Fund, Building AAPI Power: A Profile of AAPI Communities in Greater Boston *(2021)*

Boston Indicators, What's up with the Massachusetts Labor Market? *(February 2, 2022)*

Center for American Progress: How COVID-19 Sent Women's Workforce Progress Backward *(October 30, 2020)*

The White House (Biden Administration), National Strategy on Gender Equity and Equality, *(October 22, 2021)*

MCSW also reviewed Briefing Papers from the UMASS Center for Women in Politics and Public Policy *(January 2022)*
Appendix A – Quantitative Data: Women in the Workplace Survey

The survey instrument was designed primarily to gather information about a respondent’s work benefits, work-life balance, and ability to prioritize mental health. Total respondents to the survey was 654, representing 186 communities and the racial/ethnic identities in the Commonwealth, completed the survey. The open period of the survey was November 5, 2021, through January 24, 2022.

To view the text of the survey, follow this link: (English Survey)

To view the results, follow this link: (English Results)
Appendix B - Qualitative Data: November 18, 2021 Public Hearing

The virtual hearing titled: *Women in the Workplace. Share your experiences. Elevate your Voice* was held on Thursday, November 18th, 2021, 6:00 PM - 8:00 PM, resulting in 83 attendees. Written testimony was submitted prior to and after the live hearing, along with verbal accounts shared during the hearing. Minutes and the audio file from the hearing may be found on the [MCSW’s website](#).

![Screenshot from the MCSW meeting with women from La Colaborativa, Chelsea Black Community, The Neighborhood Developers, and Chelsea City Hall.](image-url)
Appendix C – Proposed Resolution

RESOLUTION

For the Commonwealth of Massachusetts to develop a plan to revitalize and restore women in the workforce.

WHEREAS, any relief and long-term recovery from the economic fallout of the COVID–19 pandemic must recognize, rebuild, and return women to the workforce;

WHEREAS, women, and especially working mothers, are facing the brunt of the economic fallout of the pandemic as a result of existing social barriers and policy failures that have been compounded by enduring racism and gender injustices, such as—
(1) the lack of a care infrastructure, including high childcare costs and childcare deserts;
(2) the lack of family-supportive workplaces; and
(3) gender and racial pay inequities;

WHEREAS, women are overrepresented in low-wage jobs and underrepresented in high-wage jobs, making up two-thirds of minimum-wage earners;

WHEREAS, Congress passed the Equal Pay Act in 1963, and the Lilly Ledbetter Fair Pay Act in 2009, but the gender and racial wage gaps persist in every industry, at every level of employment, regardless of education level or experience;

WHEREAS, women’s wages are key to their families’ economic security and survival and promote the economic self-sufficiency of low-income women through their increased participation in high-wage, high-demand occupations where they currently represent 25 percent or less of the workforce;

WHEREAS, prior to the COVID–19 pandemic in the United States (2019), there were roughly 9,700,000 working mothers with a child under the age of 6

WHEREAS, mothers’ earnings are inextricably linked to the families’ earnings, such that per parents’ labor force participation rates—
(1) even 1 percent of mothers leaving the workforce would result in an estimated $8,700,000,000 (nationally) economic fallout for working families; and
(2) even 1 percent of full-time working mothers reducing their work to part-time would mean an estimated $5,000,000,000 less in wages per year (nationally);
WHEREAS, prior to the pandemic, working mothers faced biases and stigmas in the workplace that caregiving responsibilities negatively impact their work performance, and now these concerns are intensified with increased family demands;

WHEREAS, Asian-American and Pacific Islander women, in particular Southeast Asian and Pacific Islander women, get paid as low as $0.50 for every dollar a White man makes, illustrating some of the widest wage gaps among all women and a pay gap that increases for Asian-American women even more with age;

WHEREAS, Black women make only $0.49 for every dollar a White man makes, and can lose $946,000 in their lifetimes;

WHEREAS, Latina women earn $0.45 for every dollar a White man makes, and may lose over $1,100,000 in wages over a 40-year career;

WHEREAS, Native American women are paid $0.60 for every dollar a White man makes and are murdered at 10 times the rate of the national average, even though financial independence and security can increase chances of escaping violence for these women;

WHEREAS, women of color play a vital role in the financial stability of their families, and any disruptions to their earnings would be detrimental to the welfare of their families;

WHEREAS, women have suffered the majority of pandemic-related job losses, and since February 2020, women nationally have lost over 5,400,000 net jobs and account for 55 percent of overall net job loss since the start of the crisis;

WHEREAS, during the pandemic, mothers permanently leaving the workforce or reducing work hours are disrupting their career trajectory and endangering their future Social Security earnings and other potential retirement income;

WHEREAS, child nutrition is inextricably and intimately related to mothers in the workforce, such that almost one in four children experienced food insecurity in 2020;

WHEREAS, mothers are more than 3 times as likely as fathers to be responsible for most of the housework and caregiving, and are 1.5 times more likely than fathers to be spending an extra 3 or more hours a day on housework and childcare, which is equivalent to 20 hours a week, or half a full-time job;
WHEREAS, since April 2021, in Massachusetts, the labor force of female workers dropped by 5.1 percent relative to pre-pandemic levels, compared to 1.7 percent for male workers. Female employment recovery to pre-COVID-19 levels is expected to lag males’ recovery rates by 18 months.

WHEREAS, the pandemic has signaled a financial and emotional calamity for America’s women, who are shouldering the majority of childcare, domestic work, and remote schooling responsibilities;

WHEREAS, throughout the COVID–19 pandemic, women of color work on the frontlines as essential workers and across a variety of industries, such as nursing assistants, home health aides, and childcare educators and providers;

WHEREAS, millions of Americans are suffering financially due to the COVID–19 pandemic, but women of color are experiencing job loss at higher rates than their White counterparts;

WHEREAS, 100 percent of net jobs lost in December 2020 were jobs held by women of color, with women losing 156,000 jobs, and over 2,000,000 fewer women in the labor force in December 2019 than there were before the pandemic began;

WHEREAS, women of color are disproportionately represented in many industries that lack critical benefits like paid sick leave, including food services, hospitality, retail, and social assistance, and are experiencing significant job losses due to the COVID–19 pandemic;

WHEREAS, The Bureau of Labor Statistics January 2021 unemployment data reflects a jobless rate for Black women and Latina women aged 20 and over as 60 percent higher than their White counterparts;

WHEREAS, Asian Americans recorded the highest jobless rates among women in the last 6 months of 2020, even though pre pandemic, their average unemployment rate was the lowest, and Asian-American women aged 16 and above were hit hardest, making up 44 percent of unemployed women for at least 6 months;

WHEREAS, childcare is the lifeline for working mothers, and over three-fourths of mothers with children under age 10 say childcare is one of their top 3 challenges during COVID–19;

WHEREAS, it is estimated that nationally as many as 4,500,000 childcare slots could be permanently lost due to the pandemic, affecting at least 2,250,000 families;
WHEREAS, access to paid leave has been linked to the prevention of the compounded stressors of countless evictions, hospitalizations, and hungry children. During COVID-19, women had to maneuver childcare issues, education, caregiving responsibilities, mental health, and the role of family provider while simultaneously challenged by numerous employment issues;

THEREFORE, be it resolved that:

The Massachusetts House of Representatives and Senate are in agreement with the Massachusetts Commission on the Status of Women on the following—

(1) the Commonwealth of Massachusetts needs a plan for women; to Fortify, Enrich, Enhance, and to Leverage success in order to revitalize and restore women in the workforce;
(2) women, especially women of color, have been pushed to the brink of economic, social, and emotional collapse during the pandemic because of the existing economic and social inequalities women have long faced;
(3) any relief and long-term recovery package to address the effects of the COVID–19 crisis must recognize and rebuild women in the workforce, in order to secure meaningful and sustainable economic recovery, by including, at a minimum—

- A robust paid leave plan, which is essential to securing families’ physical and financial health, including emergency paid leave policies that would create a path toward permanent paid leave solutions, and that it can be used for paid sick, family, and medical leave to help parents with additional caregiving responsibilities, including—
  - when a child or loved one’s school or care center is closed, participating in remote learning when given a choice, or a hybrid learning model
  - for people who have or are caring for people with COVID–19 symptoms;
  - or people who themselves are experiencing health issues due to COVID–19;
A robust and affordable childcare industry, with a vision toward universal childcare and early learning, which are essential to economic recovery and bolstering women in the labor force, including immediate investments to—

* support and ensure childcare programs do not close their doors permanently and can reopen;
* fund Head Start and Early Head Start to meet sanitation, personnel costs, and infrastructure needs to deliver programs that safely serve families during the pandemic;

Major investments in our education systems, which must be made in order to safely reopen schools and campuses, by providing funding to support and protect the safety and health of educators, support staff, students, and families through—

* equipping students with hotspots and devices to help narrow the digital divide and close the homework gap;
* offering mental health resources for students, families, and staff; and
* supplying other investments for children with disabilities;

Access to nutritious food as a health and human right, including through—

* increasing funds for school meals and other nutrition programs to meet an unprecedented demand;

Child poverty reduction tools that are necessary for families’ economic security and must include recurring child benefits and an expanded and improved child tax credit and earned income tax credit;

An expanded unemployment insurance program that must benefit struggling workers, including those experiencing long-term unemployment;

Access to mental health support for women and mothers, which is essential to maintaining the health of the family; and

Prioritization of Commonwealth employers and policymakers in addressing the economic cliff facing women and making permanent those above aforementioned so that women and mothers are protected against any future economic calamities.