Episode 10 Transcript

Covid-19: Sociological Reflections on Vulnerability,

Gender, and Care

Hosted By: Dr. Verina Wild

Guest: Prof. Dr. Paula-Irene Villa

Transcripts may have been edited for clarity.

Hello and welcome to another episode of 'Just Emergencies'. In today's

episode, Dr Verina Wild – Deputy Director of the Institute of Ethics, History,

and Theory of Medicine at Ludwig Maximillians University in Munich and one

of our project collaborators – discusses the relationship between vulnerability,

gender, and care during the Covid-19 pandemic with Professor Dr. Villa.

Professor Villa - a Professor of Sociology at the Ludwig Maximllians University

- discusses the bio-political and sociological aspect of vulnerability and the

feminisation of care work during the pandemic.

[Intro Music]

This is "Just Emergencies", the podcast where we show that global health

emergencies are anything but just. In each episode we explore an issue,

question, or event that makes us think about global health emergencies,

humanitarian crises, and how to best respond to them.

Without further ado, let's get into the episode!

Dr. Wild: I welcome Paula Villa from the Ludwig Maximillians University in

Munich to our podcast. Thank you for coming, Paula.

**Prof. Villa:** So great of you to have me. Thank you.

**Dr. Wild**: The first question is: who are you and what is your background?

**Prof. Villa:** I'm a Sociology Professor with an emphasis on gender studies at, as you said, LMU in Munich. I've been in this position for 11 years now... really quite a while.

My research focusses on what we might call 'bio-politics'; issues of embodiment, issues of the intersection of the somatic, the bodily, the political, the social, the cultural. I've researched on a wide range of topics in this realm, for example, cosmetic surgery, or nutrition/eating, or fitness... these kinds of things. I also do a lot of social theory, working on the notion of gender, for example, or sociological perspectives on difference etc.

Also, I think for our conversation today might be an important issue, I've been working on - for years now - care and especially again the intersection of gender and care. So how gender informs what we consider care work. How care work is part of gender. Roles or ideas around gender - I've been doing a lot of empirical research in this context as well.

That's mainly who I am in a professional sense.

**Dr. Wild:** So we're currently experiencing the Covid-19 pandemic. How would you describe your understanding of vulnerability in the context of this pandemic?

**Prof. Villa:** I think that's a super important question and topic. I'm not sure I've got a final answer. But I think it's really important to think about vulnerability within this context of Covid, of the corona crisis, of a pandemic. And it's really important to think through and understand this pandemic through a lens of vulnerability.

I think that vulnerability is a really basic issue that is often overseen or often, I think, misunderstood. Because logically, perhaps not each, but many disciplines have their understanding of vulnerability. But in fact, I think it's

really important to think and understand vulnerability as really a multidimensional issue; so no *one* discipline will do.

What I think is really basic about vulnerability is that's it's a kind of a trait, a feature, a condition, an aspect of living. Of all that lives, whatever species that might be; be it a big ecosystem, or an individual cell, or life forms in between also in terms of scale. All of them have a kind of vulnerability or are open towards being vulnerable. And this is because all living beings are affected - we all share an affectedness. No living kind of being is a thing that is in itself autonomous. So anything that lives will invariably depend on other beings and will be connected to other beings, or other objects, or whatever we might want to call them - and that's a really tricky issue. But for the time being, I think it's really important to acknowledge that that what lives is affected, and can be affected, and this always implies vulnerability.

So in a sense, vulnerability is, for example, for us human a kind of really basic, anthropological condition of our lives. And that's really universal. So there is, in this pandemic, a kind of universal openness towards being affected by the virus. The virus, in fact, doesn't discriminate - whether you're old or young, or white or brown, or German or Indonesian, or male or female or other gender. There is a universal issue to that.

But again, on the other hand, the specific way of being vulnerable, the specific resources we might have to deal with this vulnerability, and the specific approaches we are framed by in regards to our vulnerability, is super differentiated. Because societies as a whole and we as individuals and organisations and social structures, *do* discriminate along specific lines. That's where I think a sociological understanding is important; to understand how social differences and social inequalities - for example by class, by age, by gender, by income, by region - make us vulnerable in specific ways. So the universal vulnerability becomes a very specific issue according to whether you have money or not, have access to health systems or not, whether you can afford a certain treatment or not... these issues.

Vulnerability is in this context, as you asked, in the pandemic... it's important to see that there is something universal that connects all of us and that we could build a solidarity on - you know, the notion that we are *all* vulnerable. But it's equally important that at the same time, vulnerability is very unequally distributed because of the social differences that mark vulnerability. So that would be the kind of bio-political aspect that links vulnerability to the pandemic and then with a lot of many detailed issues that go along with this kind of general framing. That would be my kind of general answer to your question.

**Dr. Wild:** Let's have a look at one specific issue: how do you make sense of gender in the context of the pandemic?

**Prof. Villa:** Right. Gender is really a core social difference, a core structure of social inequality, as I mentioned before. I think that gender is actually, in this pandemic, very important - crucial even - in two ways.

One would be maybe that people might think of as more 'biological' or 'medical'. And that is the important differentiation through gender - or the gender divide, some might even say - in terms of the effects of the infection and of the pandemic itself. The mortality rates, the risk of being seriously affected by the virus, the question whether women and men are affected by the virus and the disease in different way. We know that there are, in certain regions at least, really important gendered differences in regards to mortality etc. And there it is important to see that these kinds of, some might say, 'sex based differences' are always also already gendered sexed differences. So we could say men and women have different mortality rates in the US or in Germany or in some other places. But a second and a third look through well-done research shows that these kinds of medical issues and these variables are always already informed by gendered experiences and gendered life circumstances. As we know from other research, it's not because of certain genetic disposition that men have a slightly lower life-expectancy than women

- it's mainly due to different lifestyles; more risky, less healthy etc. So I think the same might be true for the pandemic. And I think there is still a lot of research to be done, there, in this realm.

And the other dimension where gender is important - and I know more of that - is in relation to care. And in relation to who does which jobs and how important and how relevant is that within the pandemic? We know that, and that's very clear and really universal, it's worldwide even, that, for example, all jobs that are related to the care sector – nursing, and caring after elderly, and working in hospitals, and caring after children etc. - these are *overwhelmingly* women's jobs. This is feminised labour, because of historical reasons. Thus, the whole kind of system that now, in the pandemic situation, depends on people working in hospitals, people taking care of the elderly or the sick, or of children etc, are mainly women. That is one aspect.

The other aspect where gender is really important in regards to care is what we've been going through and still are in: homeschooling, home office, the whole confinement issue. Really pushing so much into, and back, and on families is by no means the family as such, but mainly it's mothers and women doing the enormous share. That's very clear. That's very clear in the German situation, but also in many many other parts of the world; the burden of taking care of children, of the private house, of all the chores, everything that has to be done is again feminised as women's labour. So those who are suffering probably more disproportionately and most are women in all sectors.

I mean, now from this pandemic situation, colleagues in academia - we're seeing this now, there's evidence coming in -, female scientists are publishing a little bit less than men because they have less time to write papers, as we both know, because of the situation that we're in. But also the nurse, the hospital, the single mother with children.... women are much more affected in a negative way by the current crisis than the men. This really on all levels. Of course there are some women who are more pivileged than others, that's also true. So it's always important to look at this gender and care issue in an

intersectional way so that's it never gender alone, it's always linked to other social differences and inequality structures. So it's a social position that's marked by gender and other differences. The care issue is feminised and it's super crucial to the whole pandemic crisis right now.

**Dr. Wild:** Some say that this is throwing back women into the position they had in the 1950s. Do you think that's true?

**Prof. Villa:** Not quite. I think it's important to have these warnings and to look at it. So I'm thankful for those who are ringing the alarm bell in that sense. But I think it's over-dramatizing, to be accurate.

I think there is a risk of a certain roll back. Speaking from the German situation, this is a really, really realistic risk that people kind of fall back into automatic gendered practises and structures. But then again, I don't think it's that strong. There are really important achievements and progress that has been done and made. I don't think it's that dramatic. But I think there are reasons to be kind of worried, to watch out for these issues and really pay attention to them. We'll see what we'll get now from research that's being done right now in social sciences about how the situation is. And it's important then to look at the evidence that comes out. I think it's important to be alert, but I wouldn't put it that stark. I wouldn't dramatize.

**Dr. Wild:** And would you have a recommendation to either individual women or to policy?

**Prof. Villa:** I'd always go for the political and the policy side and not so much for the individual people. Because I don't think we as scholars and academics should give advice or think that we know what individuals should do. People are adults and grown-ups and they make their decisions.

But what's really clear is that policy...I think that's true for many parts of the world. For sure it's true in Europe: family care, mothers are almost last on

the political agenda. They don't have a lobby as such. We've seen this in

Germany really clearly; the automobile industry, the Lufthansa... all sorts of

branches of the market are being served and catered because they have a

lobby and they're getting subventioned by the state, they're getting money, it's

all kind of taken care of. But the families aren't. The kids are at home, and

it's always like 'yeah, mummy will take care'. So it's not really a political issue.

And I think that's really a huge scandal.

I do think that policy to be addressed here and there have to be financial, tax-

wise compensations, refunds, something that really supports families and

especially mothers. That they get much more support in terms of money and

resources and are rewarded for the work that we're all doing right now. We

don't get six weeks of vacations now in the summertime. But we have

managed half of a school year so far. That has to be somehow taken care of

in a much more structured, political way. And that shouldn't be left for us as

individuals alone to manage somehow. Because that generates huge

inequalities. Some of us are capable of managing this and it's ok. I won't lose

my job, I will get a good salary as a Professor, whether I write an extra paper

or not... nobody cares. But for many other women, for many other parents,

for many other families, they don't have the privilege of having a big flat, a

nice garden, of being flexible in terms of time. These families are desperate,

they're way beyond what is really acceptable. So I think that's a political issue.

Dr. Wild: Thank you very much Paula.

**Prof. Villa:** It was a pleasure. Thank you. An honour.

[Outro music]

That's it for today – we hope you enjoyed the today's episode.

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Be sure to check out and explore our website "Justice in Global Health Emergencies and Humanitarian Crises" for more great content, just go to https://www.ghe.law.ed.ac.uk/.

Thanks for listening and see you again for the next episode.

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