
Effects of the COVID-19 pandemic on Women’s Wellbeing at the Workplace: Lessons for managing pandemics from the experience of Oxfam, Zimbabwe.

Nomthandazo Jones

Africa Leadership and Management Academy (ALMA)– an Affiliate College of The National University of Science and Technology

33 Marlborough Dr, Marlborough, Harare

Email: njones912@gmail.com

Paddington Marimo

Africa Leadership and Management Academy (ALMA)– an Affiliate College of The National University of Science and Technology

33 Marlborough Dr, Marlborough, Harare

Email: paddiemarimo@gmail.com

Abstract

The main objective of this study was to examine the effects of the COVID-19 pandemic on women’s wellbeing at the workplace in Zimbabwe. The specific objectives were to assess the workplace challenges faced by women due to the COVID-19 pandemic; to examine the effects of the COVID-19 pandemic on women at the workplace; and lastly, to establish measures that can be implemented to mitigate the effects of the COVID-19 pandemic on women’s wellbeing at the workplace. Primary data was collected from the 76 staff complement of Oxfam Zimbabwe. The research adopted a mixed methods approach and employed both qualitative and quantitative approaches using a cross-sectional survey research design. The researcher used SPSS software for data analysis as well as thematic analysis for the bulk of the qualitative data. The study found out that the major challenges affecting the wellbeing of women at Oxfam Zimbabwe during COVID-19 included exclusion, exhaustion, work-related pressure, and burn out. The study found out that one of the measures adopted by organisations to offset the consequences of the COVID-19 pandemic is re-establishing a new norm of flexibility. In terms of the countermeasures that can be taken to lessen the impact of the COVID-19 pandemic in its various forms, adjustment of policies and programmes to better support employees and improvement of the flow of information was also established as a measure to mitigate the effect of COVID-19. The study recommends that Oxfam Zimbabwe should make certain that the requirements of female healthcare providers are taken into consideration at every stage of the organisational response. In addition, the study

recommends that the employed should lobby their organisation to come up with cushioning mechanisms that would ensure their protection, safety, and wellbeing during periods of pandemics.

Key words: COVID-19, Wellbeing, Women, Workplace, Oxfam Zimbabwe

Introduction

The novel coronavirus, known as COVID-19, discovered in November 2019 in Wuhan, China, affected millions of people across the world, and made it necessary for all countries to impose stringent mitigatory measures such as complete lockdowns on citizens (Chirisa, 2021). The COVID-19 induced lockdowns brought several changes in the way people go about their business and interact in public spaces (Chirisa, 2021). In March 2020, the Government of Zimbabwe put in place a 21-day total lockdown which saw all organisations coming to a standstill, and employees having to stay at home, with only essential workers, mainly those in the health care sector, being allowed to move to their places of work and back home (Socio-Economic Survey on the Impacts of COVID-19 Pandemic on Zimbabwean Returnees, 2022). The total lockdown cost the country a loss of revenue, and many organisations closed during this time, as they could not sustain their operations (Socio-Economic Survey on the Impacts of COVID-19 Pandemic on Zimbabwean Returnees, 2022). Rahman et al. (2021) contends that, since the outbreak of the novel coronavirus, the world has witnessed multi-dimensional problems and challenges such as affecting livelihoods, increasing morbidity and mortality, overwhelming health systems, and triggering lasting geo-political changes (UN, 2020).

A study conducted in March, April, and May 2020 by a group of organisations working with women shows that reports of physical violence went up by 38.5% during April and May (UN, 2020). The COVID-19 pandemic has brought challenges to many organisations, affecting the wellbeing of employees, particularly women. Like many other organisations responding to the pandemic's devastating impacts, Oxfam Zimbabwe instituted a variety of strategies to cope with the economic pressures and recession that was induced by the COVID-19 pandemic. For women who are employed, this affected them differently than their male counterparts, as the pandemic and new ways of working magnified already existing inequalities brought about by the patriarchal nature of society (Bateman and Ross, 2020). This phenomenon was prevalent across the world in 2020, with even first-world countries experiencing negative effects on organisations and employees bearing the brunt of these effects (Alam, 2020). In contrast, at Oxfam Zimbabwe, some procedures are gender insensitive, which has a substantial impact on the workplace well-being of

women. As women try to cope with these changes, they are often found to be excluded, exhausted, burned out and, over and above, they faced a considerable amount of workplace pressure (Manungo and Rukuni, 2021).

Theoretical Underpinning to the study

The study is underpinned feminist theory is to gain an understanding of the factors that contribute to gender inequality. Additionally, this theory investigates the social roles, experiences, and interests that are unique to women (Ferguson, 2017). The idea that women are treated as being at a disadvantage in most sectors of life compared to men and the identification of institutions such as patriarchal structures as the fundamental cause of female subordination are the driving forces behind the genesis of the theory (Dietz, 2003). A central tenet of feminism is the idea that women and men should enjoy equal rights (Dietz, 2003).

The Women and Development (WAD) approach emerged in the 1970s and 1980s as a response to the limitations of mainstream development theories that largely ignored or marginalized women's roles and contributions. It aimed to integrate women into development processes and address gender inequalities systematically. Adopting a Marxist feminist approach, the main argument of WAD was that women had always been part of the development processes (Momsen, 2008). WAD asserts that women have always been important economic actors. The work they do both inside and outside the household is critical to the maintenance of society (Muyoyeta, 2004). However, this integration has only served to sustain global inequalities. Muyoyeta (2004) asserts that WAD was very persuasive in raising the debate that women have a role not only in reproduction but in production as well. For development to be meaningful for women both these roles must be acknowledged.

Women in Development (WID) theory emerged in the 1970s as a critique of mainstream development theories that often ignored or marginalized women's roles and experiences in development processes (Koczberski, 1998). Before the 1970s, development theories and policies mostly focused on economic growth, industrialization, and modernization without considering gender disparities. Women were often viewed as passive beneficiaries of development rather than active agents. Chowdry, (1995). challenge this perspective, arguing for a more inclusive approach that recognizes women's contributions to development. WID theory emphasized recognizing and valuing the economic and productive roles women play, often in unpaid or underpaid work such

as caregiving, agriculture, and informal sector labor (Koczberski, 1998). The theory advocated for integrating women into the development process, not just as beneficiaries of projects but as active participants in planning and implementation. WID aimed for gender equality and equity, highlighting the need to address the structural inequalities that marginalized women in access to resources, education, healthcare, and decision-making (Jahan and Mumtaz, 1996). However, some critics argued that WID theory initially had an essentialist view of women, assuming a universal experience without accounting for differences based on class, race, ethnicity, or other factors (Chowdry, 1995). Over time, WID evolved into Gender and Development (GAD), which broadened the focus to include men and masculinities. GAD recognizes that gender roles and norms affect both men and women and aims for more inclusive and intersectional approaches to development.

Gender and Development (GAD) is an approach that emerged in response to the limitations of Women in Development (WID) theory. The Gender and Development (GAD) Approach emerged in the 1980s and Young (1987) states that this approach looks at the totality of social organization, economic and political life to understand the shaping of aspects of society. GAD, however, does not necessarily focus on women only but on both genders. The concern is on the specific social roles and responsibilities assigned to both women and men. This approach exerts more importance on the state's participation in promoting women's emancipation, as it is the state's responsibility to avail social services (Rathgeber, 1989). The above theories see wellbeing as critical to the survival of women, and that the patriarchal legacy mandating women as caregivers of the world, creates contradictions in balancing the demand of caring for others with needing to care for themselves (Young, 2016).

Empirical Review

Educators for Excellence (2020) notes that because of the pandemic, parents were forced to work remotely through video chat, while children and teens were forced to attend "remote" online schools. In addition to other issues, this led to a day care crisis, as many parents were forced to babysit their children while still trying to work from home. The lack of access to childcare is not the only issue hurting women's jobs during the pandemic. McKinsey Global Institute research on gender equality in the age of COVID-19, for example, claims that women's occupations are 1.8 times more susceptible to this issue than men's employment. Despite accounting for only 39% of

the global workforce, women are responsible for 54 %of all job losses worldwide (Madgavkar et al., 2020). A “she-cession,” a possibly decades-long phase of slow development in which everyone will lose, but women will lose the most, according to Canadian economist Armine Yalnizyan, is causing women’s employment to suffer more than men’s (Landsberg, 2020).

Shambi (2021) studied the impact of the pandemic on working women and found that, before the pandemic little more than 16% of respondents with caregiving responsibilities claimed that they were responsible for caring for 75 % or more of their children or other family members. However, as of the time of the poll, that proportion had risen to 48%. As a result of their additional duties, such as virtual schooling and caring for other dependents, those with caregiving responsibilities have been negatively impacted. Women who don’t have to care for others are also under increased stress, which shows up in how much they feel they must be “on,” which has a negative impact on their health. People who do not have caring responsibilities have lower levels of mental (44%) and physical (49%) well-being than caregivers, despite spending more time on non-work-related activities (Shambi, 2021). More non-carers than caregivers feel the need to be constantly available at work (53 %compared to 44 %). Non-caregivers, for example, may experience an increase in stress as a result of this (58 %vs. 41 %). As the pandemic continues to wreak havoc, women are feeling the strain. 27% of those who have increased demands on personal time and daily routines report having less time to prioritise their health and well-being, and 54% of those affected believe that their male colleagues have not been affected to the same extent.

Women at workplaces may be more affected by job interruptions because of the documented connection between emotional stress and productivity. More women than males are affected by the epidemic (ILO, 2018). COVID-19 has been properly dealt with by several female leaders throughout the world. When compared with other studies that show people prefer a male leader during times of emergency, this suggests that a set of feminine values and traits may be more effective in crisis management, such as the following: a focus on the common good in moral decision-making (Gilligan, 1982); a greater sensitivity to risk (Eckel and Grossman, 2008), especially in relation to health issues (Flynn, Slovic, and Mertz, 1994); and a higher tolerance for negative outcomes (Campbell, 2013). Considering these findings, it is possible that a more feminine approach to crisis management may become the norm in the future.

There is still a significant gender pay gap in the workplace, with women often working fewer hours and earning less than men in similar roles. ILO (2018) note that because of the COVID-19 pandemic the gender wage gap grew further, placing women in an even more precarious situation. COVID-19 affects both men and women equally. However, various causes are causing more women to die from the disease than men. Healthcare personnel are among those most at risk of contracting the disease due to their prominent position in the fight against it (Gupta & Misra, 2020). In addition, women are directly harmed by COVID-19 because of a lack of access to healthcare and humanitarian assistance. When it comes to seeking medical attention, females face longer wait times than males, as reported by the United Nations (UN) (UN Women, 2020). As a result of the pandemic's increased strain, stress, and demanding conditions, women are more likely to be victims of domestic abuse (Irshad, & Yasmin, 2022).

There has been a major impact on the global economy because of the global pandemic of COVID-19. Because women make up most workers in the informal sector, such as travel, hospitality, textile manufacture, and retail sales, the epidemic has had a disproportionately large impact on them (ILO, 2018). People's social and economic circumstances have also been altered because of the epidemic. New laws for working from home began in March 2020, resulting in social and economic instability, making this an almost ubiquitous imposition. More than only laying off workers, the COVID-19 lockout has resulted in the loss of health insurance and other benefits for women, who are more likely to be laid off than males (Banda et al., 2020). COVID-19 has produced an economic crisis in a wide range of industries, including manufacturing, retail, and travel and commerce (Restubog et al., 2020). Even the most well-qualified professionals face the threat of job loss due to the rising rate of unemployment in the country. There will be an additional 25 million jobless individuals worldwide by the second quarter of 2020, according to the International Labor Organization (Restubog et al., 2020).

Since the outbreak of the COVID-19 pandemic in December 2019, the effects of the pandemic have been documented paying attention on the economy and geo-political patterns. Across every sphere, from health to the economy, security to social protection, the impacts of COVID-19 are exacerbated for women and girls simply by virtue of their sex (Bateman and Ross, 2020). The academic literature does not explore COVID-19's influence on work and workers, as well as the consequences for management, (Carnevale and Hatak, 2020). There are just a few

studies on this topic, but Carnevale and Hatak (2020) argue that management experts should work together to investigate the pandemic's effects on human resources management (HRM). In particular, the authors stress the significance of combining several fields to deal with HRM concerns in an integrated manner. Donthu and Gustafsson (2020: 284) remark that COVID-19 is "a strong reminder that pandemics, like other seldom occurring calamities, have happened in the past and will continue to happen in the future."

Evidence states that compounded economic impacts are felt especially by women and girls who are generally earning less, saving less, and holding insecure jobs or living close to poverty. The United Nations (2020) contends that evidence on the impact of COVID-19 suggests that women's economic and productive lives will be affected disproportionately and differently from men. Across the globe, women earn less, save less, hold less secure jobs, and are more likely to be employed in the informal sector. This is because they have less access to social protections and are most single-parent households. Their capacity to absorb economic shocks is therefore less than that of men (United Nations, 2020). However, the wellbeing of female employees is of central importance. Few scholars has written regarding the wellbeing of female employees. As such, this study seeks to unpack the effects of the COVID-19 pandemic on the wellbeing of female employees at Oxfam Zimbabwe.

Kniffins et al (2020) posits that the COVID-19 pandemic affects gender in a variety of ways. In this regard, women tend to work in positions that are more directly affected by COVID-19 and more easily replaceable (e.g., hospitality, cleaning, and domestic work) (Alon et al., 2020). In a recent survey of 996 U.K. healthcare workers, it was discovered that more women are experiencing distress and job disruption amid the pandemic (UN, 2020). United Nations (2020) postulates that although early reports reveal more men were dying as a result of COVID-19, the health of women generally is adversely impacted through the reallocation of resources and priorities, including sexual and reproductive health services. As women take on greater care demands at home, their jobs will also be disproportionately affected by cuts and lay-offs.

In a study conducted in Pakistan, it was discovered that female workers are mostly engaged in the informal sector where they are paid minimal wages (Bari et al, 2021). This is the sector, which is severely affected by public emergencies. Domestic workers, particularly women, involved in home-based small and medium businesses, are laid off due to employers' inability of

paying wages during lockdown. Female workers will experience multidimensional uncertainties due to absence of social protection schemes for them, financial insecurity and unprecedented economic vulnerability during the lockdown. These facts have the potential to reverse the progress that women have achieved in the labour market over the past few decades in terms of participation and wages. It is imperative that working women address both parts of the disproportionate harm they have suffered due to COVID-19's economic impacts: their overreliance on an insufficient childcare system and their concentration in low-wage occupations.

Methodology

The study adopted a cross-sectional survey design using a pragmatist research paradigm informed by mixed research methods to collect and analyse data. A cross-sectional survey research design was employed to concurrently focus and interpret the negative and positive implications of COVID-19 on the wellbeing of women at their workplace, focusing on the case of Oxfam Zimbabwe. Positivist and interpretivist research paradigms were blended along with the case study design largely because the explanatory variables chosen in the study were best explained using a combination of the mentioned research paradigms. As corroborated by Saunders et al., (2012), the mixed methods approach enabled the researcher to offset the (perceived) weaknesses of each of the approaches.

The target population for this was made up of the entire workforce of Oxfam Zimbabwe, comprising of 93 staff members (*excluding the head of each department and the director*) from 7 departments (Finance, Logistics and Procurement, Human Resources, Humanitarian/Wash, Livelihoods, Gender and Women's Rights, and Senior Management departments) from Harare, Chipinge, Gutu, and Plumtree offices who are directly involved in the day-to-day operations of the organisation. However, the researcher also selected 7 heads of each department and the director as the key informants of the study. Their selection as key informants were premised on their abundant and in-depth knowledge of the challenges faced by women during the COVID-19 period in Zimbabwe. Furthermore, they were responsible for the decisions made at Oxfam during the COVID-19 pandemic era. Stratified and purposive sampling were used to choose the individuals to whom virtual questionnaires were administered, and key informants interviewed to give responses to the research questions respectively. The study had a sample of 76 personnel from the population of 93.

Online questionnaires were used to capture quantitative information from the study participants on the effects of COVID-19 on the wellbeing of women at Oxfam Zimbabwe. The questionnaire had both closed-ended and open-ended questions. A key informant interview guide was used to conveniently conduct interviews at key informant level through online platforms (Zoom and Telephone). The types of questions in the guide were open-ended and descriptive, which allowed for probing and interrogating given responses by the participants.

Presentation and Discussion of Results

The study findings were arranged into three categories which are workplace challenges faced by women due to the COVID-19 pandemic; effects of the COVID-19 pandemic on women at the workplace; and measures that can be implemented to mitigate the effects of the COVID-19 pandemic on women's wellbeing at the workplace.

Challenges faced by women due to the COVID-19 pandemic.

The first objective of the study sought to examine the effects of the COVID-19 pandemic on women in the workplace. The findings show that 92% of the participants stated that women's wellness at the workplace during the COVID-19 pandemic era was generally considered at Oxfam. However, only 8% cited that the organisation did not consider the wellness of women at work during the height of the COVID-19 pandemic in Zimbabwe. This suggests that often, Oxfam generally considered the wellness of its female staff complement during the COVID-19 era. The 8% felt there was no support argued that some of the female employees were frontline workers who would be required to report for duty normally despite the risk of contracting COVID-19, and that there was no compensation for being on the frontline despite their being exposed to the risk of contracting the virus.

It was also established that the pandemic had a devastating effect on women. During the pandemic the number of incidents of violence against women increased. Since the beginning of the pandemic there had been a rise in gender-based violence, even though fewer people were utilising essential health services. Women in the workforce were also forced to work in positions that are undervalued or do not provide adequate protection in comparison to those offered to men during this pandemic period. Most of the essential workers, including those who work in grocery shops and health care institutions, are women. One of the key informants stated that, "*emotional violence against women increased throughout the pandemic even at workplace; While vital health*

services have shown a decrease in demand, gender-based violence has grown throughout the epidemic-to-pandemic timeframe". In addition, women in the workplace were forced to labour in positions that are less valuable or protected than those held by men. Female employees make up most of the key workforce, such as those in grocery shops and health care institutions.

In support of the above, another key informant further argued that "*... of the high incidence of COVID-19 infection among vital workers, the pandemic has disproportionately affected women. Despite their importance, care workers, both paid and unpaid, have been largely left out of discussions regarding worker safety and pandemic recovery. Many workers, particularly mothers, have been forced to care for their children and loved ones alone due to school closures and job losses*". In addition to the negative consequences of COVID-19, caregiving responsibilities may aggravate or create physical and mental health complications. Women are being pushed out of the workforce in significant numbers, resulting in a widening of the gender pay gap. Women's well-being and financial security have been adversely affected by the COVID-19 outbreak. Despite these issues, the government has taken very little action to alleviate the impact of the COVID-19 epidemic on women's lives.

Effects of the pandemic on women's wellbeing

The second objective of the study sought to examine the effects of the COVID-19 pandemic on women's wellbeing. The findings indicate that 35% of women at Oxfam Zimbabwe generally felt exhausted during the COVID-19 pandemic. However, 30% of the participants highlighted that woman constantly felt burned out at work because of the effects of the COVID-19 pandemic. Only 20% of the respondents stated that women at Oxfam Zimbabwe constantly felt excluded in some of the decision-making and organisational activities during the COVID-19 period. Furthermore, 15% of the participants argued that women at Oxfam succumbed to a significant amount of pressure to work because of COVID-19. Thus, one can conclude that the wellbeing of female employees at Oxfam Zimbabwe was significantly affected because of the COVID-19 pandemic in Zimbabwe.

In support of the findings, one of the key informants argued that "*It is of no secret that senior-level women face the same degree of pressure as males' counterparts. In situations where the stakes are high, as they are right now, women in top positions may be subjected to harsher*

criticism and harsher judgement because they are generally held to higher performance standards as demanded to respond to the pressure induced by COVID-19. Almost twice as many senior-level women are “Ollies,” which means they are the only or one of the only women in a room at work, work more, lone workers are more likely to encounter microaggressions, such as a need for more proof of their ability to work under the pressure created because of the COVID-19”.

In an interview with another key informant, who noted that women are among the unsung heroes of this workplace crisis during Covid 19. However, the transition to stay-at-home orders during the coronavirus pandemic required at least one adult in the home to focus on the children, helping them with schoolwork and supervising them all day. The respondents indicated that they have adapted their households and juggled work, children’s schooling, and other household needs. However, the pandemic uniquely affected mothers’ work in formal labour markets, and Oxfam Zimbabwe female employees are no exception.

The researcher ran a multinomial logistic regression model to ascertain, through statistical techniques, the effect of COVID-19 on women’s wellbeing at work at Oxfam Zimbabwe. The dependent variable was “wellbeing”, which has three classes (Bad, okay, and Good). The dependent variable was computed using a set of wellbeing performance indicators (excluded, pressured to work more, burned out, and exhausted) that the researcher computed into a new variable in SPSS software. After a series of iterations, the researcher considered the set of independent variables that gave the highest R-square statistics. Table 1 shows the model fit information.

Model Fitting Information

Model	Model Fitting Criteria	Likelihood Ratio Tests			R square statistics		
		-2 Log Likelihood	Chi-Square	df	Sig.	Cox and Snell	Nagelkerke
Intercept Only	139.229		28				
Final	94.500	44.728	28	.024**	.376	.983	.249

**significant at the 5% level

The findings shows that the odds ratio for the model is 122.92 while the overall significance is 0.024 (<0.1) which implies significance of the model at the 5% level. In addition, the model had a Cox and Snell R^2 value of 0.376 and a Nagelkerke's R^2 value of 0.983, as well as a McFadden R^2 of 0.249. The Nagelkerke's R^2 value of 0.983 means that 98.3% of the variability in the dependent variable was explained by the independent variables. Thus, much of the observed variability in the dependent variable is a result of the independent variables, and hence, the model has a high goodness of fit. Table 4.6 shows the model specification information.

Model specification

Effect	Model Fitting Criteria	Likelihood Ratio Tests		
	-2 Log Likelihood of Reduced Model	Chi-Square	df	Sig.
Intercept	129.535	127.809	4	.000
Exclusion	94.500 ^a	.000	0	0.008****
Pressured_ to_ work _ more	108.424	13.924	4	.093 ***
Burned_ out	102.473	7.973	4	1.672
Exhausted	100.096	5.595	4	.078**

* Significant at the 1% level

** Significant at the 5% level

*** Significant at the 10% level

The findings show the Likelihood Ratio Tests with seven (4) variables (Excluded, pressured to work more, Burned out and Exhausted). Of the 4 variables, exhausted, excluded, and pressured to work more were significant factors in influencing the model (with significance levels of 1%, 10%, respectively). Exclusion as a wellbeing measure, is very statistically significant with a p-value of 0.008 and thus, significant at the 99% level. Given such statistical significance, it can be attributed with 99% certainty that women at Oxfam were constantly exhausted because of the COVID-19, indicating that exclusion is a significant wellbeing parameter at the workplace in Zimbabwe. Pressured to work more was also statistically significant with a p-value of 0.093 and thus, significant at the 10% level. In addition, exhausted was also statistically significant with a p-value of 0.078 and thus, significant at the 10% level. Therefore, it can be said with 90% confidence

that exhaustion is also a significant factor. Thus, there is a symbiotic relationship between these effects and the wellbeing of women at work at Oxfam Zimbabwe.

Mitigation of the effects of COVID-19 on women's wellbeing

The last objective of the study established the measures to mitigate the effects of COVID-19 on women's wellbeing. In terms of the countermeasures that may be taken to lessen the impact of the COVID-19 pandemic in its various forms, the method of study demonstrated that one of the measures adopted by organisations to offset the consequences of the COVID-19 pandemic is re-establishing a new norm of flexibility. This was one of the measures found to be effective. It was brought to everyone's attention that, as a direct result of COVID-19, it was becoming increasingly difficult for workers to differentiate between their personal lives and the lives they lead at work. As a result, organisations ought to make it one of their highest priorities to re-establish work-life boundaries. On the other hand, quite a few safeguards were put in place. Among these are: creating jobs that are less harmful to the environment, redefining what it means to be flexible. As a result, the position that women find themselves in highlights the usefulness of the Women and Development and Gender and Development theories provided by the research, which aim to promote the psychological well-being of women in the workplace.

The study also concludes that in the wake of COVID-19, it has become more difficult for people to distinguish between their professional life and their personal life, and many feel that they are "always on." The study further noted that work-life boundaries should be restored in the workplace. Female workers need new work standards, such as creating meeting times and procedures for responding to emails outside of normal business hours. Others may need to improve communication within their teams regarding work hours and availability. Flexible work arrangements and organisational-sponsored boundary-setting may both help workers get the most out of their professional lives. Even though these solutions are readily available, some employees are wary of using them for fear of being stigmatised. Workers should know that their performance will not be evaluated depending on where, when, or how long they put in. Workplace flexibility can also be supported by management. During the COVID-19 pandemic, the vast majority of organisations' top executives followed suit. Even more importantly, leaders may set an example for their staff by making use of flexible work alternatives in their personal life. Employees are less likely to contemplate downshifting their careers or quitting the job if they perceive senior leaders are supportive of their flexibility demands.

Thus, re-establishing work-life boundaries should be a top priority for organisations argued by one key informant who said that *“for many, this may include developing new work standards, such as establishing regular meeting times; establishing procedures for responding to emails outside of usual business hours; and enhancing communication about work hours and availability within teams. Flexible work arrangements and organisation-sponsored boundary-setting may both help female workers get the most out of their professional lives. Even if these tools are readily available, some employees are wary of utilising them for fear of being judged for doing so. As a solution, executives might tell their staff that they will not be judged on how many hours they put in or where they work”*.

According to one of the key informants *“to make work more sustainable, leaders and managers need to examine the productivity and performance objectives set before COVID-19 and see if they are still reasonable. They may also have to re-evaluate their objectives, reduce the scope of their projects, or maintain their current objectives while extending their deadline”*. In that regard, only a few managers are currently doing this. It helps to come up with new ideas on how to give staff more time off.

During the interview processes it was highlighted that more paid time off and tools for homeschooling are just a few of the policies and programmes that many firms have implemented to help their employees during COVID-19. Organisations must ensure that their workers are well-informed about all of the perks accessible to them. Female employees are unaware of many of the benefits that their employers provide. When it comes to benefits, many employers provide mental health counselling, but only approximately half of employees are aware of this option. In the same way, useful programmes like parenting information, health screenings, and grief counselling are seeing a decline in participation. As organizations adjust to the new normal, they should assess how well they are addressing the most pressing concerns of their employees and reallocate resources to the most important programmes in their arsenal.

One of the study’s key informants, noted that, *“three times more likely to be dissatisfied with one’s employment is one who is shocked by decisions that influence their work. Nevertheless, during COVID-19, one out of every five employees reported feeling misinformed or in the dark”*. Thus organisations should provide more frequent updates on the condition of the business and important choices that influence the job and lifestyles of employees, and they should explicitly

address what bad news means for employees. The research process also established that the organisational leaders and human resources team must also speak with empathy if they want to ensure that their female staff feel appreciated and appreciated. Anxiety and distrust among female workers are reduced by an openness and understanding that is widely accepted.

Conclusions and Recommendations

The main objective of this study was to examine the effects of the COVID-19 pandemic on women's wellbeing at the workplace in Zimbabwe with specific reference to Oxfam Zimbabwe. The research adopted a mixed methods approach and employed both qualitative and quantitative approaches using a cross sectional survey research design. Analysing the data using SPSS software, the study found that the major challenges affecting the wellbeing and performance of women at Oxfam Zimbabwe during the COVID-19 pandemic includes exclusion, exhaustion, work-related pressure and burn out. The study concludes that the organisation did not give any thought to the health and safety of its female employees at the time of the COVID-19 pandemic. This was one of the most significant issues that the organisation had to deal with. The study also concluded that some of the female employees were frontline workers who would be required to report for duty normally despite the risk of contracting COVID-19.

Even though emotional violence against women increased throughout the pandemic, even at work, and even though demand for essential health services has shown a decrease, gender-based violence has increased during the timeframe spanning the epidemic and the pandemic. In addition to this, women in the workforce are often coerced into working in roles that are less prestigious or secure than those held by men. Most of the workforce in critical positions, such as those working in grocery stores and healthcare facilities, consists of female personnel. The study also reveals that women have been disproportionately impacted by the pandemic because of the high frequency of COVID-19 infection among critical workers. Despite the significance of their roles, care workers, whether they are paid or unpaid, have been generally excluded from conversations addressing the safety of employees and the recovery from the epidemic. In addition to the negative effects of COVID-19, the responsibilities of caregiving can exacerbate or create a variety of physical and mental health complications. The COVID-19 outbreak has had a negative impact on the health and well-being of women, as well as their financial stability.

The study also found that senior-level women and other female staff members at Oxfam faced the same level of pressure as their male colleagues. The study further concluded that women in Oxfam's top positions are more likely than men to feel the need to work longer hours and be constantly connected. There have been two female officers who resigned from their posts, both of whom claimed weariness as their primary reason for leaving. The study also found that women are among the crisis' unsung heroes. At least one adult had to be present in the house to aid with homework and supervise the children during the coronavirus epidemic, which necessitated a shift to stay-at-home orders. As a result, they've had to alter their homes and work around their children's school schedules, as well as other family demands.

The study also establishes that some of the specific negative effects that the COVID-19 pandemic has had on the well-being of women in the workplace include exclusion, greater pressure to work longer hours, burnout, and tiredness. The study demonstrated that one of the measures adopted by organisations to offset the consequences of the COVID-19 pandemic is re-establishing a new norm of flexibility.

Recommendations and Suggestions for Future Research

The study recommends that organisations come up with organisational policy to ensure that there is a gender sensitive policy that responds to the challenges caused by pandemics towards female employees. This may include lobbying organisations to have carefully planned and gender sensitive duty sharing that acknowledges the care giver role of women. The study focused on the effects of the COVID-19 pandemic on women's wellbeing at the workplace and used Oxfam Zimbabwe as a case study. To the extent the findings might be peculiar to Oxfam Zimbabwe and therefore not be applicable to other organisations, a comprehensive survey that critically examines the differential effects of COVID-19 on the well-being of women in formal employment in Zimbabwe could be pursued. Furthermore, the effects of COVID-19 might be influenced by unique variables such as the model, organisation size, programmes and programming models, funding, and its policy and governance architecture.

Reference

Alam J. and Kurtenbach, E. (2020). *Garment workers going unpaid as fashion labels cancel orders*. Retrieved from <https://apnews.com/article/global-trade-asia-south-asia-bangladesh-virus-outbreak-fd1d413a0e7cdaf73d6f101270c45e36>

- Alon, T., Doepke, M., Olmstead-Rumsey, J., and Tertilt, M. (2020). *The Impact of COVID-19 on Gender Equality*. Available at: https://ideas.repec.org/p/bon/boncrc/crctr224_2020_163.html (Accessed June 15, 2022).
- Alon, T., Doepke, M., Olmstead-Rumsey, J., and Tertilt, M. (2020). *The Impact of COVID-19 on Gender Equality*. Available at: https://ideas.repec.org/p/bon/boncrc/crctr224_2020_163.html (Accessed June 15, 2022).
- Banda, J., Dube, A., Brumfield, S., Amoah, A., Crampin, A., Reniers, G., & Helleringer, S. (2020). Knowledge and behaviors related to the COVID-19 pandemic in Malawi.
- Bari, F., Farooqui, A., Kamran, S., Shakil, S., Jamal, S. (2020). *COVID-19 and the New Normal for Women in the Economy: Case for Pakistan*. The Asia Foundation.
- Bateman, N. and Ross, M. (2020). *Why has COVID-19 been especially harmful for working women?* Retrieved from <https://www.brookings.edu/essay/why-has-covid-19-been-especially-harmful-for-working-women/>
- Campbell, J. L., Quincy, C., Osserman, J., & Pedersen, O. K. (2013). Coding in-depth semistructured interviews: Problems of unitization and intercoder reliability and agreement. *Sociological methods & research*, 42(3), 294-320.
- Carnevale, J. B. and Hatak, I. (2020). Employee adjustment and well-being in the era of COVID-19: Implications for human resource management. *Journal of Business Research*, 116, 183–187.
- Chirisa, I. (2021). *The impact and implications of COVID-19: Reflections on the Zimbabwean society*. Retrieved from <https://doi.org/10.1016/j.ssaho.2021.100183>
- Chowdry, G. (1995). Women in Development (WID) in international development regimes. *Feminism/postmodernism/development*, 26, 41.
- Dietz, M. G. (2003). Current controversies in feminist theory. *Annual review of political science*, 6(1), 399-431.
- Donthu, N. and Gustafsson, A. (2020). *Effects of COVID-19 on business and research*. *Journal of Business Research*, 117, 284–289.
- Eckel, C. C., & Grossman, P. J. (2008). Forecasting risk attitudes: An experimental study using actual and forecast gamble choices. *Journal of Economic Behavior & Organization*, 68(1), 1-17.

- Educators for Excellence (2020) *Voices from the virtual classroom: a survey of America's teachers on COVID-19-related education issues*, New York, NY, available at: <https://e4e.org/voices-virtualclassroom>
- Ferguson, K. E. (2017). Feminist theory today. *Annual Review of Political Science*, 20, 269-286.
- Gilligan, C. (1982). New maps of development: new visions of maturity. *American Journal of Orthopsychiatry*, 52(2), 199.
- Gupta, R., & Misra, A. (2020). Contentious issues and evolving concepts in the clinical presentation and management of patients with COVID-19 infection with reference to use of therapeutic and other drugs used in Co-morbid diseases (Hypertension, diabetes etc). *Diabetes & Metabolic Syndrome: Clinical Research & Reviews*, 14(3), 251-254.
- International Labour Office (2018). Report on Women and men in the informal economy: A statistical brief. *International Labour Office, Geneva*, 20.
- Irshad, I., & Yasmin, M. (2022). Feminism and literary translation: A systematic review. *Heliyon*.
- Jahan, R., & Mumtaz, S. (1996). The elusive agenda: Mainstreaming women in development [with comments]. *The Pakistan development review*, 35(4), 825-834.
- Kniffin, K. (2020). COVID-19 and the workplace: Implications, issues, and insights for future research and action. *American Psychologist*, Vol 76(1), Jan 2021, 63-77.
- Koczberski, G. (1998). Women in development: A critical analysis. *Third World Quarterly*, 19(3), 395-410.
- Landsberg M (2020). *Repairing the damage done by COVID-19 means coming up with a plan, fast*. *Chatelaine* ;93(6):68.
- Madgavkar, A., White, O., Krishnan, M., Mahajan, D., and Azcue, X. (2020). *COVID-19 and gender equality: Countering the regressive effects*. McKinsey Global Institute. (Haettu 29.9. 2020).
- Manungo, R and Rukuni, T. (2021). *Impact of Coronavirus Lockdown among the Seventh - day Adventist Community Members in Masvingo Urban, Zimbabwe* in *East African Journal of Education and Social Sciences* Vol. 2, No. 2, pp. 108-119. G-Card
- Momsen, J. (2008). *Women and development in the Third World*. Routledge.
- Muyoyeta, L. (2004). *Women, Gender and Development*. Educating and Acting for a Better World, Zambia
- Rahman, M.A., Islam, S.M.S., Tungpunkom, P. *et al*. COVID-19 (2021). Factors associated with psychological distress, fear, and coping strategies among community members across 17 countries. *Global Health* 17, 117 (2021). <https://doi.org/10.1186/s12992-021-00768-3>

- Rathgeber, E. M. (1989). WID, WAD, GAD: Trends in research and practice. *The journal of developing areas*, 24(4), 489-502.
- Restubog, S. L. D., Ocampo, A. C. G., & Wang, L. (2020). Taking control amidst the chaos: Emotion regulation during the COVID-19 pandemic. *Journal of vocational behavior*, 119, 103440.
- Saunders, M., Lewis, P., and Thornhill, A. (2012). *Research Methods for Business Students (6th Ed)*. Surrey: Financial Times/Prentice Hall.
- Shambi, J. (2021). Redefining employee experience during the pandemic.
- Socio-Economic Survey on the Impacts of COVID-19 Pandemic on Zimbabwean Returnees (2022). Covid 19 Status Report. https://zimbabwe.iom.int/sites/g/files/tmzbd11166/files/documents/iom-zimbabwe_socio-economic-survey-on-the-impacts-of-covid-19-returnees.pdf
- United Nations (2020). COVID-19 UPDATE. *WHO Switzerland*.
- Young, Z. P. (2016). Gender and development. In *Handbook on gender in world politics* (pp. 378-385). Edward Elgar Publishing.