

Time to fight the pandemic setbacks for caregiver academics

To the Editor — From the onset of the COVID-19 pandemic, we expected that people, especially women, caring for children, elderly, people with disabilities or other family members, would be the most impacted in academia; data proved this to be the case^{1–3}. This issue is central to the long-standing problem of low female representation in science, since women across all employment sectors persist as the main caregivers.

With attempts to return to normal lives following more than a year of remote working and home schooling in many countries, a question arises: how many institutions have implemented effective action to mitigate the pandemic's negative impacts on the academic careers of caregivers? These include reducing teaching or administrative workloads; extending deadlines for caregivers when necessary (for grants, scholarships or career advancement assessments); including specific criteria to fairly assess caregivers' productivity when compared to their peers; creating specific grants to support caregivers in their academic progress; and enforcing policies to increase diversity in academia, especially towards women of colour.

Worldwide, the most common measure to offset the pandemic's negative effects on academics was the extension of deadlines, especially for career advancement and tenure track assessments (for example, stopping the tenure clock). While positive, these actions were not specifically tailored to caregivers — those who were hit the hardest. A study published before the pandemic demonstrated that the adoption of neutral tenure clock-stopping policies substantially reduced female tenure rates and substantially increased male tenure rates⁴. Hence, an in-depth assessment with a gender perspective is needed of the consequences of such policies specific to the pandemic. In the specific case of caregivers, actions taken so far are scarce.

However, some initiatives are worth mentioning. For example, the University of Massachusetts Amherst provided emergency funds for caregiving assistance, including childcare and eldercare⁵; and some Brazilian universities approved internal legislation that recommends flexibility in the administrative and teaching workloads for caregivers during the pandemic⁶. Taking into account that professors were not the only ones affected, policies aimed at graduate students have also been implemented in Brazil, such as fellowships programs directed towards mothers, prioritizing those from under-represented and economically vulnerable backgrounds⁷. This financial support is crucial to preventing these young scientists from dropping out at such a critical moment. Nevertheless, much more needs to be done.

It is important to emphasize that the impacts of the pandemic will persist for many years to come, and isolated actions will not solve the problem. We need a global movement to bring solutions and actions to provide institutional support for people involved with care, especially those from under-represented groups, considering the intersections that exist between gender, race and parenthood^{3,8}. In fact, under-represented groups are the most affected by the pandemic^{9,10}. In terms of academic productivity, mothers and Black women took the hardest hit³, and even before the pandemic, Black and Latin American scientists already faced strong prejudice^{11,12}. Policies that fail to consider these intersections may aggravate inequalities that existed before the pandemic rather than reducing them. We are no longer at the prevention stage, but rather that of reversing setbacks. Time is a constraint, and we need urgent and effective actions across global institutions. □

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Published online: 11 October 2021
<https://doi.org/10.1038/s41562-021-01209-2>

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Competing interests

The authors declare no competing interests.