

The University Cannot Love You

Gendered Labour, Burnout and the Covid-19 Pivot to Digital

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A recent study of publishing on Covid-19 itself shows a precipitous decline in women's participation in journal submissions, as does a review of submissions in political science (Pinho-Gomes et al., 2020; Dolan & Lawless, 2020); academic women are increasingly speaking out about their inability to do their jobs completely, not only due to unpaid labour at home but due to unrecognized pastoral care work within the university (Burzynska & Contreras, 2020; Gabster et al., 2020). For many of us who work in educational technologies and faculty or student support, resisting or refusing care has an immediate and harmful impact on our colleagues and students. And so, as the work of care in the pivot to digital—both at home and at work—falls disproportionately on women, we find ourselves facing burnout. If we can't trust the university's capacity for care, what happens next? Rooted in feminist ethics of care thinking and an embodied approach to pedagogy and scholarship, this chapter reviews the most recent research into gendered participation in the academic labour force, care work, and the pressures on women academics at work and at home to argue urgently for a radical rethinking of how care is enacted within the university.

In March of 2020—or earlier, depending on your place on the globe—most of post-secondary education moved to fully remote instruction in order to accommodate public health demands for social distancing and government mandates to stay at home. A year on from this moment, many of our institutions are still fully or partially online. Much has been discussed about workload and burnout as we adjust to this so-called new normal, and research increasingly suggests that the workplace impacts for academics have not been evenly experienced. Care work is suddenly in the news all the time: families are managing childcare and virtual schooling and elder care and work-from-home dynamics, and the classroom is increasingly a site of accommodation, shared trauma, and grief. Many of us are enacting and framing care even more explicitly than we might previously have done—as our children and parents appear in Zoom calls and our syllabi lay out our practices of care—but care work within both the home and the academy has always been more likely to fall on women's desks, and even more disproportionately on the desks of racialized, queer, and disabled scholars. Those on the margins of the academy are more likely to do what the editors of *Gender & Society* have dubbed “the housework of the university”: mentorship, pastoral care, undergraduate teaching, and other “frontline engagement with student” work that is less prestigious and less rewarded within the structure of the academy (O'Keefe & Courtois, 2020). In the moment of Covid-19, all of this work demands an expanded capacity for care.

And yet, we work in universities: slow, lumbering institutions that do not, by their nature, have care at their centre. So as the labour of care in the pivot to digital—both at home and at work—falls disproportionately on women, we see increasing chatter about academic burnout. If we can't trust the

university's capacity for care, what happens next? Rooted in feminist ethics of care thinking and an embodied approach to pedagogy and scholarship, this chapter examines gendered participation in the academic labour force, care work, and the pressures on women academics at work and at home to argue urgently for a radical rethinking of how care is enacted within the university. How would the professional lives of women and marginalized scholars look if our institutions valued and rewarded care?

Defining and Recognizing Care

In thinking about care, I ground my definitions in ethic of care philosophy. Emerging from feminist thinking, the ethic of care is “a psychological logic of relationships” that attends to our relationships to each other, acknowledges the power dynamics that can disrupt those relationships, and centres our interdependence upon each other at the core of its thinking (Gilligan, 1993, p. 73). In other words, we demonstrate care by recognizing and prioritizing our relationships to each other within and beyond the institution, and we recognize our responsibilities to each other and the power we hold. In the context of pandemic teaching, for example, a care-centered pedagogy acknowledges the complicated moment we are living through and involves extending grace to students, recognizing that they might be caregiving or dealing with grief and loss, and resists adding additional burdens like requiring cameras to be on in the homespace or using surveillance tools like e-proctoring and analytics to track and punish behaviour. Care, of course, happens all over the institution—or, at least, there is space for care everywhere: in instructional time and mentorship/supervision relationships, in student services, in formal and informal pastoral care, and in faculty support, for example.

The work of care has larger ramifications for those who engage in it: it exacts a toll. Those who work in jobs with a high component of emotional labour—first defined by Arlie Russell Hochschild as “the management of feeling [...] sold for a wage” (2012, p. 7)—are particularly susceptible to burnout (Jeung, et. al., 2018). The stress of emotional labour is made worse when metrics of workplace success render it invisible (Hochschild, 2021, p. xi), because people don't stop feeling called to and responsible for caring for others just because their workplace doesn't value it. When we devalue care, we devalue the carer, and carers are often already marginalized in other ways. In academia, precarious employees are more likely to struggle with additional stress from emotional labour than tenured faculty, but interestingly status is only so insulating: women experience more stress than do men as a result of exhibiting higher levels of emotional labour, regardless of their employment status (Tunguz, 2016).

The pivot to fully online teaching required care. I am writing this while still mired deep in the pandemic, but if you are reading it from some moment in the future, think back to those early days through March of 2020 as the world shut down. The moment was unsettling for everyone, and most advice for novice online teachers was to foreground tenderness and calm. This advice carried through the summer and into the fall. But to help faculty extend grace to students, they needed to have someone extend grace to them. They needed safe spaces to learn and grow so that they could provide the same to their students.

Given this topic is deeply personal to me and my work, it's important that I take a moment to situate myself in this conversation. I am coordinator of educational technologies—a tenure-track role—at a regional university, and I was the faculty lead of the very small team that moved our campus courses to fully-online delivery in March of 2020. On our campus, we have a faculty complement of 500, and about half of those users had never engaged with our learning management system prior to the

transition. My role is pedagogically-focused, but I also do a lot of hands-on technical support and provide a lot of reassurance and comfort. It is, very explicitly, care labour. In the early stages of the pandemic, this was at its most extreme: I spent much of my long working days helping faculty feel safe using the tools and helping them to see the task ahead of them as achievable. This work was deeply rewarding, but also deeply exhausting. One day, after a very kind colleague told me she always felt so much better after talking to me, the source of my impending burnout snapped into focus: I was absorbing the anxieties of an entire institution. Where was I meant to put my own? While educational technologies are often overlooked as a site of care¹¹ within the institution, care is critical to any functional faculty support program.

I am also a mother to one boy who turned four during the pandemic. I don't think I have ever articulated that in a work of scholarship before, but my experiences of motherhood are central to my experiences of working through this period. When the daycare shut down, I had already elected to start keeping my son home for about a week—the university closed first, and it seemed strange to be home staying safe while he went to school—and for five months he was home full-time while I worked more than full-time moving my university online. (He has since gone back three days a week, and we muddle through accordingly.) I am married to my son's father, and while I would have described our caregiving as equitable in the time before the pandemic, when the daycare closed, my son moved into my workspace for almost all of the first few months. His joyful contributions to my working day made every day better and more loving, and he reminded me to draw on my stores of patience for him and for my faculty; those same contributions also made it impossible for me to do focused work or to think about anything significant until after he had gone to bed, and my working day often extended late into the night. And so while I was burning out on care at work, I was also burning out on care at home. My story, of course, is not unique.

And I am also a white woman. My race insulates me from many axes of marginalization within academia. As I write this essay, I am mindful of the tradition of “me first” equity politics that centres the experiences of white women as the most pressing, while also acknowledging that much of the research I draw on in this essay does not disaggregate data on racial lines, nor do I have explicit data on the experiences of other equity-seeking groups through the pandemic. Wherever possible, I have drawn on research and thinking that centres experiences other than my own.

Gendered Labour in Covid-19

Both within and without the academy, women have been disproportionately burdened by the expectations created by the pandemic working conditions. The impact is clear across the economy and across the world, where most of the job losses have been among women, and specifically among women of colour, meaning that the economic turndown is both a feminized and a racialized one. We are not, in fact, all in this together. It is also increasingly clear that where family pressures require someone to leave the workplace to enact care at home, it is disproportionately the case that women make that choice. For those women who have remained employed, lack of childcare resources have changed how and when they work. In general, it is women who carry the labour of caregiving. In April, the UN warned about the specific costs to women of the emerging pandemic; in particular, it anticipated the increased unpaid labour in the home as a result of school closures falling disproportionately upon women, as well as concerns about women leaving the paid workforce entirely in order to cope with this labour (UN, 2020). This has an impact on women of all socio-economic and backgrounds, and certainly more dire impacts on more marginalized women and their families.

But the early explorations into this moment in the academy should also give us pause, too. While academic women enjoy privileges of social and economic status due to their positions and work, they are still disproportionately impacted by Covid-19. Indeed, it should not be forgotten that women also make up the majority of precarious academic workers, who are typically the first casualties of budget cuts, especially those due to declining enrollments, which limit access to work for sessional and contingent faculty. A recent study of publishing on Covid-19 itself shows a precipitous decline in women's participation in journal submissions, as does a review of submissions in political science (Pinho-Gomes et al., 2020; Dolan & Lawless, 2020); academic women are increasingly speaking out about their inability to do their jobs completely, not only due to unpaid labour at home but due to unrecognized pastoral care work within the university (Burzynska & Contreras, 2020; Gabster et al., 2020). Women in all sectors of society are working harder and achieving less.

Resisting Neoliberal Manifestations of “Care”

In a recent meeting of our book club at my institution, we found ourselves joking about what it was we needed to really be able to do our jobs effectively. We were a room of care workers, broadly conceived: faculty support and instructional faculty, folks who are at the centre of a stressful transition to fully online teaching. We weighed the likelihood of the thing we really needed—adequate staffing for faculty support, smaller classes for instructional faculty—versus what we got: yet another offer to take a yoga class or mindfulness workshop via Teams. One of the more kind and generous among us noted quickly that our frustrations shouldn't be targeting the good folks in our wellness office trying to do the work of caring for us. And that's true, of course.

And yet. The university supports the development of those sessions for a reason. Wellness webinars and other representations of institutional care are typically framed as being an individual responsibility: stress is something for the individual to manage, not something structural for the institution to resolve. This is, in fact, a co-opting and neutralizing of the political dimension of care: we are invited to “breathe, meditate” to resolve the situation, and not to “organize for change” (Michaeli, 2017, p. 53). Michaeli references Audre Lorde's assertion here that self-care is an “act of political warfare”—and indeed, the history and Black and Indigenous invocations of care are acts of resistance and continuance—but not when it is subverted in the service of academics working harder and producing more. This, indeed, is the work of Black feminist and womanist thinkers that considers care as radical self-preservation and survival in a world that doesn't value one's presence. Without appropriating this perspective, non-Black scholars can embrace its resonances and reject neoliberal representations of care that strive to individualize the experiences of trauma and make survival our private problems to solve. I have come to see these wellness webinars as positioning my exhaustion, my stress, my overwork as something I can solve on my own, with deep breathing or lunchtime yoga; they invite me to see my struggle as a personal failing. I am not failing. I am being failed.

In addition to considering who cares, it is critical—and deeply frustrating—to consider what care upholds within the university structure. Many universities were quick to celebrate their “caring” faculty in the promotional materials they released throughout the pandemic, but the question we should ask is how that care is materially supported. Do those caring faculty have smaller class sizes or more support resources? Do the support teams across the university that enable that care to be enacted get staffed appropriately to uphold that service without burning out? The labour of individuals showing care for each other often papers over structural failures. It is individuals working long hours who make up for understaffed and underfunded units; it is individuals taking time to help navigate bureaucracy or file forms that help the faceless university processes seem human and

humane. Hannah McGregor asks all academics to consider critiques of care by Black and Indigenous scholars and think about when and where care should be refused or resisted: namely, where it props up the institution (McGregor, 2020). Care is complex: we use the word “care” to refer to things, like foster care or health care, that may be well-intentioned but that can and do enact great violence, especially among those already structurally and systemically marginalized. McGregor draws on Christina Sharpe’s [In the Wake](#) and its insistence on care as a lateral force, unmediated by the state or other power structures, and given its complexity care becomes “a problem for thought” (2016, p. 5).

McGregor also draws on Billy-Ray Belcourt and his critique of “uncritical deployments of care” (Belcourt, 2018) in a settler colonial context that sees a superficial care primarily as a mechanism for profit and for papering over harm. Care is not an unambiguous good; it is not even necessarily neutral. We must ask what our care is being deployed in the service of.

But for many of us who work in educational technologies and faculty or student support, resisting or refusing care has an immediate and harmful impact on our colleagues and students. Imagining a structure and space for thinking and teaching outside the confines of the university is critical, valuable, urgent work. At the same time, for those whose work is circumscribed by the walls of the institution, the sense of being trapped is real. I described it [elsewhere](#) as feeling caught in a Samuel Beckett story: I can’t go on (I know my care is being exploited by my institution); I’ll go on (but what else can I do?). In my own role as a tenure-track faculty member, I know I have the freedom to refuse work that many do not, while recognizing that my refusal may have consequences for my career later. But in a moment of crisis, the work doesn’t go away, and with frozen budgets, I’m acutely aware that any work I refuse lands on non-faculty staff with less institutional power than even I hold. And the people impacted – sessional faculty, students—are also disproportionately vulnerable. So what do we do?

Rethinking and Restructuring Care

What if the university valued care work in the first place?

Throughout this chapter, I have often thought (but striven not to say) that care is burdensome: care does not have to be burdensome, but it becomes so within systems that refuse to make space for it. It feels, for me, like a rejection of myself and my choices to imagine caring for my son is exclusively burdensome, but our institutional structures tell this story about our experiences for us. Looking to the language of embodiment in scholarship and pedagogy is useful here, and also telling: like the literature of radical care’s roots in Black scholarship, the literature of embodiment is deeply resonant with decolonial scholarship. Roxana Ng argues for the value of recognizing embodiment in post-secondary pedagogy, because “most intellectual encounters entail a confrontation of bodies, which are differently inscribed” (Ng, 2018). We are not, of course, the brains in jars that the university imagines or wishes us to be. Ng discusses how gender, race, ability, sexuality, and class inscribe themselves upon the body, and these factors also intersect with questions of who is seen to be a caregiver and who is called upon to do care work. Care, too, inscribes itself upon the body—or circumscribes the body—both in terms of how childbirth and elder care and other caregiving roles outside the university often involve physical or embodied acts, and also in how they frequently require caregivers to absent themselves in ways that are conspicuous. When I am simultaneously called to answer a question in a videoconferenced department meeting and wipe a pre-schooler’s bum—my pandemic home office space also being my child’s preferred play area and the home of the

potty during toilet training—my embodied self on screen is (comically, irrevocably, humiliatingly, depending on one’s perspective) inscribed as a caregiver. This has an impact on my career: we know that having children is detrimental to women’s academic careers, and we know that the pandemic has exacerbated the existing differences (Minello et. al., 2020).

The body of work on embodied scholarship and pedagogy underscores that it doesn’t have to be this way. The academic myth of the life of the mind, separate from the troubles of the body, was always designed to keep certain bodies out: a white, able, male body is neutral, default, and acceptable because it draws no undue attention to itself; other bodies are not. The disabled body, the pregnant or lactating or post-partum body, the Black, brown, or Indigenous body, the queer body: these shapes are not welcome, nor are the experiences and perspectives these bodies hold. These bodies and the university are at odds, and the tradition for these bodies is always to assimilate as best we can. But frequently, we see the common cost of those struggles to assimilate are stress, exhaustion, illness, and burnout (Bisaillon et. al., 2020). As Alison Mountz^[2] notes, “Masculinist spaces, practices, and topics articulated by participants assign value to some bodies and work over others” (2016, p. 216). At the same time, the work of caring within the university is critical; students survive and thrive because of recognized and unrecognized pastoral care work, primarily undertaken by those same bodies the “life of the mind” narrative is meant to exclude. The emotional labour of the university ensures student success, but it goes unrecognized and is a source of added stress and workload for academic staff (Laws & Fiedler, 2012). Given that some studies suggest the amount of unsupported emotional labour of academic staff now rivals or exceeds that of frontline health care staff (Berry & Cassidy, 2013), appropriate changes in the university might include recognizing this care work as institutional service or credited teaching time, valuing institutional service more highly, and providing professional development areas related to pastoral care, advising, and support work.

Conclusions

I am very tired. I don’t know when that will change. It has been a long, complex, and difficult year, with real personal costs. At the same time, when I look back over the year, I am not sure what I should have done differently. I would not withhold the care I showed. And my complicity in my own overwork and exploitation is difficult to make meaning from. There are no easy answers here, but to value care—within and without the walls of the university—as the force that sustains is perhaps the first step. As Bessette and McGowan argue in their recent reflection on affective labour and faculty development,

...affective labor exists at work, it is integral to our work, we do our best work because of it, and we need to address it and incorporate it into our conversations about workload and expectations. (2020, p. 146)

There is an imperfectly analogous concept I borrow from my reading of current research on the impact of the pandemic on health care providers: moral stress (the phrase doesn’t begin there^[3], but it is most useful to me in this context). This is phrase for the taxing experience of having to support a policy or practice that contravenes your values. For many of us, working in a new fully online teaching and learning world against the backdrop of yet more administrative austerity has meant exactly that. Perhaps the pandemic has meant using or supporting tools—e-proctoring, plagiarism tracking, learning analytics—that we know to be harmful or easily weaponized. But we are also, many

of us, marginalized within our universities while using our emotional labour to sustain the institution. This is work that taxes our sense of identity. Research on moral stress suggests that moral repair is possible, but it begins with institutions accepting responsibility and acknowledging harm (Shale, 2016). Whether that is possible begins, surely, with demanding that this work is recognized.

The university cannot love you. But it would be nice if it could see you.

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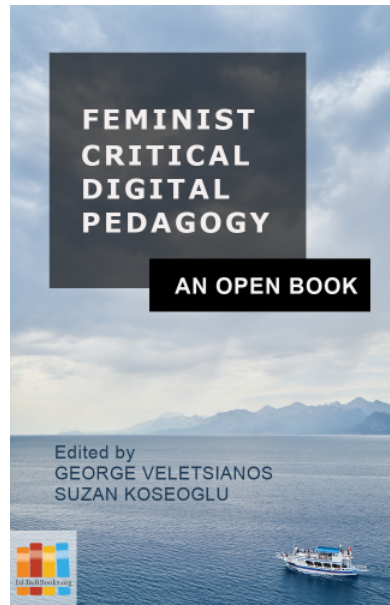
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Footnotes

[1] It is also my assertion that care is a critical component of edtech procurement. When procurement is underwritten by an institutional ethic of care philosophy—which centres on relationality, responsibility, and acknowledging power dynamics—the natural outcome is technology procurement that recognizes our fiduciary responsibility to student data and expenses. Care is a critical component of selecting appropriate educational technologies for our students, and it is all too often at the margins of the discussions that go into procurement.

[2] Mountz’s essay “Women on the Edge: Workplace Stress at Universities in North America” is a critical examination of the role that the devaluation of women’s bodies and embodied experiences has on stress and burnout. Mountz writes about the academic woman’s experience of miscarriage and infertility, and she challenges the silence around these topics in academia (considering the widespread experience of both among academic women) by talking about her own experiences. In solidarity with Mountz’s disclosure, I’m moved to note here that one toll the pandemic stress took on my body and my family was that I experienced a miscarriage in October 2020. We must make space for the stories of all bodies, when they are well and when they are suffering, within academia.

[3] Indeed, moral stress emerges from work on moral injury, which comes from scholarship on trauma and reaction in soldiers. EdTechs are not soldiers and we are not health care workers; we do not make life-and-death decisions. But we do carry the burden of care within institutions that are not structured for it, and I find moral stress useful as an anchor for thinking about the costs of care.



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