

REVIEWER'S REPORT

Manuscript No.: IJAR-57164

Title: Employment Shock, Labour-Market Inequality, and Public 1 Health after COVID-19: A Global Secondary Policy Analysis, 2020–2024.

Recommendation:

Accept as it is

Accept after minor revision...

Accept after major revision

Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality		Good		
Techn. Quality		Good		
Clarity		Good		
Significance		Good		

Reviewer's ID: Dr. Sumathi

Detailed Reviewer's Report

1. The 2026 global labor market shows fragile stability with projected 4.9% unemployment, yet faces deep structural weaknesses, including 2.1 billion informal workers and stalled job quality. While advanced economies face hiring declines of 20%–35%, emerging markets like India (+40%) and the UAE (+37%) show growth, driven by AI adoption, demographic shifts, and regional economic divergences.
2. The COVID-19 pandemic began in late 2019, with the first cases reported in Wuhan, China, in December 2019. The WHO was notified of the pneumonia-like cases on December 31, 2019. The virus rapidly spread, and the WHO declared it a global pandemic on March 11, 2020.
3. Unemployment occurs when individuals who are actively searching for work and available to work are unable to find jobs. It is a key economic indicator reflecting the labor market's health, often measured by the unemployment rate—the percentage of the labor force that is jobless.
4. Gender inequality is the unequal distribution of rights, resources, and opportunities between people based on gender, profoundly

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affecting women through restricted economic, educational, and health access. Rooted in patriarchal social norms, it manifests in pay gaps, underrepresentation in leadership, and disproportionate unpaid care work. Addressing it requires policy reform, reducing stereotypes, and promoting equal rights.

5. Social determinants of health (SDOH) are the non-medical, environmental conditions where people are born, live, work, play, and age that significantly influence health outcomes, quality of life, and longevity. These factors—including housing, education, income, and community safety—often outweigh genetics or healthcare access in driving health inequities.
6. Key words are good.
7. Abstract is awesome!
8. Tables and pictures are good.
9. Summary points can be included. Some more references can be added.
10. After those changes good to publish in your journal.