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EDITORIAL

Care and Caring: Interdisciplinary perspectives on a societal issue of global significance

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Introduction

The International Journal of Care and Caring (IJCC) commences publication with the present issue. In this opening editorial article we set out our vision for the new journal, which - as we will show - creates a timely and significant new space for critical engagement with global scholarship, policy and practice on care and caring. The article has three aims: to describe what will be distinctive and different about the International Journal of Care and Caring; to highlight our ambitions for it, including our determination that the new journal will have genuine global reach and international impact; and to explore some of the many different dimensions of research, scholarship and debate on care and caring which we hope to see further explored and developed in future issues of IJCC.

As members of IJCC's Editorial Team, each of us has contributed to the founding concept for the journal, described here. We have been guided in this by our shared conviction that care and caring is a topic of huge and growing importance. We are persuaded, too, that within care and caring there is scope for significant theoretical and empirical development, and a real need for a new journal in which international scholarly debate on care and caring, based in sound research and scholarly endeavour, can emerge and thrive. We also believe that robust evidence and scholarship have the capacity to influence policy, practice and public discourse about care and caring, and in so doing to shape a more positive lived reality of caring relations and contexts around the world.

These convictions underpin the vital and challenging agenda which lies before scholars and other researchers in the field of care and caring, in whichever part of the globe they and their studies are located. As we will explain, care and caring are central to human life and relations; associated with a wide range of emotions (spanning, for example, grief to joy, patience to exasperation, fear to security; and living and dying); and also - especially as the capacity to extend and save lives increases - have profound implications for the distribution of human, economic and other resources, in global, national and local contexts.

Together we have sought international support for the idea of a new journal on care and caring across multiple disciplines, bringing the International Journal of Care and Caring to fruition as a new journal of the Policy Press. Giving it their strong support, distinguished scholars from diverse disciplines have highlighted the unique contribution IJCC can make, describing it as 'long overdue', 'exciting', 'timely and significant', and as a development which will 'bring a new level of scholarship and attention to issues facing our humanity for the future'. They also highlight its capacity to provide 'an important international and interdisciplinary evidence base'; to become 'essential reading' for 'academics, policy makers and practitioners interested in the complexities and nuances of care and caring'; and to 'create new synergies for the rising tide of research on care and care work'.

In what follows, we outline and emphasise the journal's intended global reach and international focus, confirming IJCC's commitment to comparative and interdisciplinary scholarship and specifying some of its distinctive features (Section 1). We then turn to the journal's core remit, indicating the types of scholarship it will embrace and the disciplines and methods of enquiry it will feature (Section 2). Here we also share our perspective on some of the many different dimensions of care and caring to be addressed in coming issues of the journal: carers and their advocacy organisations; care as paid work, in both formal and grey labour markets; how care is arranged around the world, in cultural practices and formally established systems; the political economy of care and its articulation in social policies; care recipients - those supported by, or who receive, require or need care; and the emerging assistive, communications and monitoring technologies now in development for, or being used in, caring settings, and their implications for care relationships and caring realities. We conclude the article by emphasising the importance and timeliness of the journal's focus, explaining why we think 2017 the right moment to launch the International Journal of Care and Caring, and introducing readers to the content of this its first issue.

1 About the International Journal of Care and Caring

A global, international and comparative focus

The International Journal of Care and Caring is situated at the intersection of many significant global issues, whose increasing prominence is directly linked to the challenges presented by population ageing, rapid social change and increased geographical mobility. These include:

- The rising number, and increasing diversity, of family members and other close persons providing unpaid care to others, often with problematic impacts on their own health, financial wellbeing and participation in their societies;
- The consequent need, in many and diverse societies, for community-based and long term care for growing numbers of people living with long-term conditions, or with co-morbidities in older age, and for rising numbers of other disabled and seriously ill people with support needs;
- The importance of care services and supports which are affordable and deliverable in societies with differing traditions and cultures, and at different stages of economic and social development;
- The challenges of resourcing, organising and financing effective and sustainable health and care systems; of developing policies and services that support both family / friend carers and the paid care workforce; and of constructively and critically interpreting these developments using theories of social justice, political economy, intersectionality, cultural diversity and social change.

In our view, a new journal in this field must be genuinely international in scope, not least because countries around the world are experiencing accelerating pressure on their arrangements and systems for providing care for sick, disabled and older people (WHO, 2015), with the consequence that care and caring are increasingly important topics of academic, policy and public discussion and debate.

Care is still provided in many - if not all - societies as part of established relationships, particularly within families. However population ageing, lower fertility rates, increased female labour force participation, and the greater mobility of populations are now affecting most regions of the world. Under these influences, many historic cultural practices are changing fast. This global scenario seems also to be prompting shifts in beliefs and values, and the perception that familial resources need to be supplemented with care services

provided on a professional, paid or volunteer basis has gained ground in many different parts of the world (Colombo et al, 2011; Barnes, 2012; UN, 2016). In the wealthiest and most economically developed countries, arrangements for at least some care additional to that provided by families emerged some time ago as a major feature of national welfare, health and social protection systems, many of which have subsequently adapted these to include ‘cash-for-care’ or ‘consumer directed’ arrangements (Ungerson and Yeandle, 2007). More latterly, care has also become important in many countries as a traded service, operating either within formally regulated labour markets or as part of ‘grey’, unregulated, and informal systems of labour (Fine, 2007; Gori and da Roit, 2007; Anderson and Shutes, 2014).

These changes continue to introduce great complexity into caring relations. Rapidly developing private care markets are shaping new and shifting divisions and inequalities in the work of care (Brennan et al, 2012); state welfare systems increasingly ‘outsource’ the caring labour they require, relying more on private companies (Szebehely and Meagher, 2013), and sometimes draw significantly on ‘precarious’ labour (Yeates, 2009; Standing, 2009; Bettio and Verashchagina, 2012; Duffy et al, 2015); in many areas of the world families are now arranging, and privately purchasing, caring labour to support their members when support needs arise. The markets on which they draw may be mainly regulated and formal (as, for example, in Germany, Japan, South Korea and Taiwan) or have informal and undocumented dimensions (as in some Mediterranean countries). In some situations, the care workers on whom older and disabled people and their families rely may have no legally protected right to either live or work where their caring labour is provided.

These developments both reflect and contribute to global inequalities. They have already been the subject of important global scholarship on (inter alia): migrant care labour (Mahon and Robinson, 2011; Tronto, 2011; Troisi and von Kondratowitz, 2013; Anderson and Shutes, 2014); global care chains (Kofman and Raghuram, 2006); and transnational caregiving (Baldassar et al, 2007). It is evident, however, that more studies and research are needed to fully grasp the importance, range and extent of the different forms of caring labour now emerging. IJCC’s editors aim to include significant new scholarship in this field in future issues of the journal.

For some time, international agencies and supranational institutions have been turning their gaze to questions of care and caring, often conceptualising their inquiries around how ‘long-term care’ systems can be established, implemented and financed. They include the World Health Organization [WHO] (Brodsky et al, 2003; WHO, 2015); Organisation for

Economic Co-operation and Development [OECD] (Colombo et al, 2011), World Bank (Heleniak and Canagarajah, 2013); United Nations [UN], including through UNRISD¹ and UN Women (Razavi and Staab 2010; Razavi, 2016; UN, 2016); and the European Commission (EU Social Protection Committee and European Commission, 2014). In 2016 the WHO adopted a new global strategy and action plan on ageing and health in which key actions include ‘establishing and continually improving a sustainable and equitable long-term-care system’; ‘building the long-term care workforce and supporting informal caregivers’; and ‘ensuring the quality of person-centred and integrated care’. To realise such strategic policy visions, a strong base of scholarly research is required, based in studies in all areas of the world. IJCC welcomes contributions from scholars researching developments in Africa, Latin America and the Caribbean and in LDCs² in Asia and elsewhere, as there is a particular need for studies of the contexts, realities and meanings of different approaches to care and caring in poorer areas and in contexts of scarce resources and rapid social change.

Comparative analysis in scholarship on care and caring has begun to explore what can be learned by contrasting developments in different countries and in different types of welfare system. Examples include work on reconciling paid work and unpaid care (Lechner and Neal, 1999; Perrons et al, 2007; Kröger and Yeandle, 2013); comparative analysis of European long-term care systems (Ranci and Pavolini, 2013; Deusdad et al, 2016); and concepts and values in care and social policy (Anttonen et al, 2012; Michel and Peng, 2012). We intend to publish new comparative work on these and other themes within care and caring, and expect the journal to contribute to significant expansion of scholarship in this field.

Distinctive features

The International Journal of Care and Caring provides the opportunity to bring scholars and others with interests in debating and researching care and caring together to explore new evidence, share ideas and research findings on care and caring in diverse contexts, and generate new thinking and knowledge. Its primary aim is to be an academic journal of significant standing, based on the quality of its peer-reviewed scholarly and research-based articles. Articles which take forward developments in the field by making a significant theoretical, methodological, conceptual or empirical contribution will take prominence in the journal, and are welcome in all relevant disciplines.

¹ UN Research Institute for Social Development.

² Least Developed Countries. For details of this category, developed by the United Nations, see http://www.un.org/en/development/desa/policy/cdp/cdp_ldcs_handbook.shtml .

Beyond academia, the journal will also have additional distinctive features which the editors hope will ensure its appeal not only to scholars working on care and caring, but also to policymakers, practitioners and opinion formers. Our aim is to connect with those in all areas of the world who: commission, design and implement care services; are part of organisations representing carers and/or older and disabled people with support needs; work in care, advocate on behalf of care workers, or are responsible for providing care services; are practitioners and decision-makers in health and social care systems; or are policy-makers, human resources professionals or employers seeking to understand the pressures on people providing care to others alongside other daily responsibilities, and to find ways of alleviating these.

To connect with these audiences, IJCC will have a distinctive Debates and Issues section. This is designed to encourage critical engagement with policy and practice developments and to promote global dialogue and international sharing of ideas, expertise and experience about policy, practice, trends, developments and issues for celebration or concern about care and caring around the world. We hope Debates and Issues pieces (shorter items, not subject to academic peer review) will feature the thinking and perspectives of many different contributors, including carers' organisations, policymakers, trade unions, employers and others, as well as academics and researchers. To make it accessible to all, content in the Debates and Issues section will be permanently free-to-view.

IJCC's Reviews section will also include special features designed to encourage international contributions. As well as conventional book reviews, in each issue the journal will feature a review of a recent international conference in which care and caring was the main, or a significant focus, of proceedings. The editors also wish to encourage submission of longer review articles (focused on several books or publications, linked by a common topic or theme). We hope contributors of these will use the opportunity to compare scholarly contributions on similar topics, for example across disciplines, continents or varying caring contexts.

2. Care and Caring: themes and focus

Research by feminists and others, since the 1970s, has sought to remove the cloak of invisibility that has often surrounded care and caring. During this time, care has been theorised by writers in a range of disciplines, including ethicists and political scientists (e.g. Noddings, 1984; Tronto, 1993; Nussbaum, 2000; Sevenhuisen and Svab, 2003; Kittay, 2011;

Fraser, 2013; Tronto, 2013); feminist economists (e.g. Fast et al, 1999; Waring, 1999; Folbre, 2008; Himmelweit, 2008); social policy theorists (e.g. Glendinning, 1992; Daly and Lewis, 2000; Williams, 2001; Fine, 2007; Ungerson and Yeandle, 2007; Williams, 2010; Barnes, 2012); gerontologists (e.g. Twigg and Atkin, 1994; Phillips et al, 2002; Keating et al, 2003; Walker, 2005a; Scharf, 2010); sociologists (e.g. Waerness, 1984; Phillipson, 1997; Daly, 2002; Peng, 2002; Anttonen and Sipila, 2003; Saraceno, 2008) and health academics (e.g. Watson and Ray, 1988; Gaugler and Lane, 2015). Their work has created analytical frameworks used to theorise: welfare states, including welfare regime theory (Simonazzi, 2009); gender, migration, citizenship and care (Williams, 2010); the value and social organisation of care (Fine, 2007); and the economics of caring labour (Bittman and Folbre, 2004). This important body of work, mainly philosophical in orientation, nevertheless leaves considerable scope for connections to be made between its constituent theoretical fields and for more substantive engagement with detailed empirical data. We look forward to including contributions which build on this scholarship in the *International Journal of Care and Caring*.

A large body of empirical and policy-oriented work on care also exists, much of it focused on care in Europe, North America or Australasia. Primarily descriptive, statistical and evaluative, some of this work has been commissioned by policymakers, or to support advocacy on behalf of carers. It includes detailed analyses, demographic profiles and statistical presentations of carers and people needing care (e.g. Schofield et al, 1998; Young et al, 2006; Bittman et al, 2007; Yeandle and Buckner, 2007; Keeling and Davey, 2008; Fujisawa and Colombo, 2009; ABS, 2009; OECD, 2011; Carers UK, 2014; Vlachantoni et al, 2016) and evaluations and other assessments of policy and practice efforts to respond to the strains, needs and injustices some carers experience (Glendinning, 1983; Arksey, 2003; Victor, 2009; Yeandle and Wigfield, 2011; Moran et al, 2012); it often identifies the support needs of discrete groups (Glendinning et al, 2010; Hill et al, 2016). Some of this research focuses on care provided within a job or professional role (Dill and Cagle, 2010); on differences and inequalities (Abel and Nelson, 1990) and on the organisation, delivery and planning of publicly funded care (Naylor et al, 2011, 2015).

Despite this, care and caring remains rather hidden, almost secretive, terrain. Around the world, a general absence of any but the most superficial or sensational interest in the topic of care can be observed in most media, many aspects of public policy and in much debate on economics and finance. This lack of recognition and engagement also extends to some

academic disciplines, including (with honourable exceptions) economics, political science, sociology and history. Once care is seen as an essential condition of human life, however, it is obvious all humans owe their lives to the fact that someone has cared for them. How we attend to the care of others, and how we care for ourselves, are issues that will shape our lives, life courses, families, communities and our increasingly global societies. Yet care is perhaps so ubiquitous, its quality typically mundane and taken-for-granted, that it often remains forgotten, marginalised, or excluded. In politics and social policy, care can be treated as a distraction from ‘really important issues’, a free ‘resource’ to be utilised, or as an expense or burden to be minimised. In daily life, care and caring are often seen as problems or crises to be confronted or managed, or, with the expansion of marketised solutions to challenges in social policy, as opportunities for economic growth, or for business development by corporate care providers.

Remit and focus of the journal

How might the new journal go beyond this view, and make a distinctive contribution? What alternatives can a focus on the scholarship of care, and on the innovations and inspiring developments surrounding care, offer? In establishing the International Journal of Care and Caring, the editors aim to provide a forum in which these questions can be debated, new evidence and ways of thinking made accessible, and new contributions made to a fundamental re-thinking of the importance of care and caring in human affairs.

The new journal’s remit and focus includes all aspects of care given or provided to persons with disability, poor health, or with long-term or terminal care needs. It includes the paid and unpaid work of care, and the systems, relationships, policies, practices and legal frameworks which shape care and caring at local, national and international levels. Conceptually, care and caring can be situated along a set of intersecting axes which contribute to the particular challenges of analysing and interpreting empirical data in this field. Care is both a public and a private concern; it affects family members and paid workers; it concerns labour and love; involves intimate practices, technical skills and challenging tasks which must respect a care recipient’s dignity and comply with externally determined quality standards; and is delivered ‘in the moment’, but may be the product of a lifetime of interactions.

IJCC aims to be a multidisciplinary, international journal which encourages a wide breadth of focus, covering care workers as well as family / friend and ‘informal’ carers (terminology

we wish to problematise), care in both home and residential settings, and the formal and informal care market. 'Social and relational' care (for people of all ages, including children, who have care and support needs³), will be an important focus distinguishing this journal from a tendency in some others covering care, aging and disability to focus mainly on healthcare. IJCC also aims to have contributions from and about different parts of the world in each edition; this is demonstrated in our inaugural issue, which features articles and reviews by authors based in Australia, Canada, Japan, Sweden, Taiwan, the UK, Uruguay and the USA.

IJCC's editors recognise that many carers and carers' organisations reject 'informal' care as a descriptor of what carers do, unpaid, as part of family or other affective relationships, despite the widespread use of this term among researchers and scholars. In IJCC, our preference is to use 'carer' to describe those who provide care within pre-existing relationships, usually unpaid (albeit perhaps supported by an allowance or cash contribution to compensate for earnings or to 'recognise' carers' contributions). In much popular discourse, and some research, 'carer' is also used to describe those who give care to others as part of their paid work or professional role. We prefer 'care worker' as the term for this, and request contributors to IJCC to adopt this terminology wherever possible.

Overall, IJCC's aims are: to be a unique source of world-class knowledge about care, caring and carers; to create an international forum for disseminating new research on care, caring and carers; to facilitate exchange of policy and practice developments in care and caring; to reflect the interdisciplinary nature of care and carer-related research; to be accessible to a wide audience, including academics, practitioners, carers, commissioners, managers, NGOs, policymakers, and trade unions; to establish a platform for new scholarship, analysis, theories and policy evaluations on care and caring; to exploit the growing international evidence base on care, caring and carers; to facilitate the development and generation of new knowledge on care, caring and carers; and to be a mechanism for an exchange of ideas on relevant research methods and research impact.

Scholarship and disciplines

IJCC will publish contributions from a wide range of disciplines, and encourages submission of articles based on interdisciplinary research. The editors anticipate that most

³ To be accepted, articles on parenting and the care of children will need to include significant discussion of the care of children with long-term conditions, serious illness or disabilities, or to discuss childcare in comparative perspective by contrasting it with, for example, the care of people with disabilities or long term care needs.

articles submitted for peer review will feature concerns and topics which are primarily mainly social (e.g. located in family studies, community work, social care, social geography, social policy, social work or sociology); economic (e.g. arising from research and scholarship in business studies, economics, employment studies, human resource management, migration studies, political economy or work and organisational studies); philosophical (drawing on ethics and moral philosophy, gender studies, law, and equality and human rights); technological (based in studies and analyses of assistive technology, user-centred design or planning); or related to health, ageing or human development (drawn from the disciplines of demography, disability studies, counselling, gerontology, health and illness, healthcare, palliative care or psychology). To be accepted for publication in the International Journal of Care and Caring, articles will need to present new data, methods or analyses and to move the field forward, demonstrating their specific contribution in critical engagement with existing scholarship.

Dimensions of care and caring

Articles published in IJCC will make substantive contributions to the understanding of one or more of the aspects of care and caring briefly described below: carers; care work; care arrangements; the political economy of care (and its articulation in social and public policies); ethical and philosophical framings of care; the perspectives of care recipients; and the role of care technologies.

Carers

IJCC's focus on carers identifies them as people who provide support, in the context of familial or other prior affective relationships, to a person with long term care needs, experiencing frailty in old age, or with serious illness or disability. What carers 'do' in these contexts is typically 'taken for granted', sometimes seen as a 'natural' aspect of their familial role (particularly for women and, in some cultures, for spouses of either sex). It varies considerably according to cultural context and socio-economic conditions, and in many settings is under much pressure from rapid social change.

This makes it important to differentiate carers, and to analyse them in their specificity and cultural context. Some aspects of a carer's role may be predictable and normalised, while others arise unexpectedly or require negotiation (Finch, 1989). Little is currently known, however, about how care is shared (or disputed) in different cultural settings, between siblings, or more broadly within families. We may hypothesise that a carer's willingness and

ability to care will be affected by the history and quality of the relationship in which care arises, the carer's other roles and activities and their 'availability' to care (shaped perhaps by geographical location, personal, financial or other resources, including health; and other commitments such as paid work or care of other family members). Knowledge is scarce, however, on how this plays out in different or changing circumstances, on how factors shaping uptake of caring may affect care quality, and on the consequences of providing or receiving care.

Caring intensively over a long period without support is now known to negatively affect a carer's health, financial status and social integration. Some studies suggest all or some of these impacts can be mitigated by effective recognition, services and policies, and that caring can have lasting benefits for the carer (Yeandle and Buckner, 2007; Gaugler and Kane, 2015). The latter may include enhanced self-esteem and feelings of personal worth; strengthened ability to cope with grief and loss; and an enhanced sense of purpose and commitment (Kearns, 2015). Evidence of how caring may be distributed across the life course, and how it may impact carers at different life stages, also been emerging (e.g. Smyth et al, 2011; Jowsey et al, 2013). Nevertheless precisely how the particular challenges of care in different circumstances affect carers remains relatively unexplored. New scholarship which differentiates, for example, co-resident care, caring at a distance, daily, weekend and occasional care, care given in different types of relationship, and care given to people with different conditions, expectations or circumstances will be welcome in the *International Journal of Care and Caring*. Evidence on the longer term impacts of caring is still limited, with new work on this especially needed. *IJCC* also welcomes articles exploring how care is organised within primary groups and in intimate, family, household and interpersonal relationships. Consideration of whether gender roles that link women to care are universal, necessary or shifting, perhaps as a consequence of smaller family size or lower rates of marriage, is needed too. We hope contributors will address questions such as: are the conditions of caring just or sustainable? How are they changing? Are men taking more responsibility for care, and do policies or other initiatives influence this? What support do carers need, and how can this be given without encouraging the exploitation of others, for example in reliance on low paid care workers with poor quality jobs and working conditions?

IJCC also aims to publish contributions which address issues arising from the demographic and social changes set to characterise the 21st century, considering the viability and sustainability of long established patterns of care, with their heavy reliance on families

and communities (Larkin and Milne, 2015). Widespread increases in longevity and the low, or reduced, birth rates seen in many countries mean fewer carers will be available in younger generations. We aim to publish articles which explore issues such as this, including how past patterns of care have adapted to these changes and how they are altering the profile of family carers. Contributions on younger and older carers, as well as on caring in midlife, on how caring is distributed across the social spectrum and at different ages, and its effects on health, wellbeing and participation in family, working and civic life, will all also be important topics for IJCC.

Research that explores the role of different actors (social workers, care managers, employers and others) in providing support to carers at different life stages is also needed. Comparative analysis of different models of providing care, and their outcomes for care quality in different global contexts, can enhance and expand on existing scholarship. Such work may raise challenging political and social issues, as arrangements are often characterised by fragmentation, variety and complexity. We welcome discussion of new evidence on these matters of public concern, societal organisation and social justice, and encourage work on how ‘processes of care’ and the nature of caring relationships affect outcomes for carers and those they support, for example in the context of challenges in caring for people with dementia.

Care work

Care workers provide care to people with support needs in their own homes, in community settings or in residential facilities, in return for pay; typically they do not know the person(s) for whom they provide care until this work begins. In the developed welfare states, and despite some efforts to ensure care workers receive training and have the skills and attributes needed to provide good care, pressures to reduce public expenditure on care have often been accompanied by deterioration in care workers’ wages, working conditions and professional standing. Favoured policies, including ‘ageing in place’ for the old and ‘de-institutionalisation’ for those with intellectual disabilities, have led to an increase in the care work provided in the homes of older and disabled people and their families; one consequence of this is that much paid care work now takes place in otherwise private settings, behind closed doors, and in spaces not well designed for this, creating challenging working conditions and scheduling difficulties for care workers and care managers alike. In some nations, ‘cash-for-care’ payments and ‘consumer directed care’ have eroded distinctions between formal and informal, and paid and unpaid care, creating new care worker categories,

such a ‘personal assistants’ and other individually and directly recruited workers (Ungerson and Yeandle, 2007).

In countries whose care systems rely on care work, people willing to undertake these tasks are often in short supply. This is partly because the status, pay and working conditions of care jobs, in all societies highly feminised, are low; it is also because of how care work is organised and because it often lacks security, or scope for career progression. Strategies to constrain public costs of care can exacerbate this by casualising or de-professionalising paid care and creating an increasingly precarious care workforce (Vosko et al, 2009).

In many large cities, much of Mediterranean Europe and some other regions, paid care work is increasingly undertaken by migrant, temporary and/or undocumented workers in conditions of considerable vulnerability and precarity (Luppi et al, 2015). This work sometimes involves ‘live-in’ jobs, where workers reside in the household of the person cared for and may be unable to control their working hours or freely undertake other activities (Chou et al, 2015; Liang, 2011). In the residential and home care sectors, they may be recruited from overseas by care providers or their agents. Some countries (Canada, Japan and Taiwan are examples) have accorded care workers special immigration status (Bourgeault et al, 2010; Peng, 2016); in others, workers are recruited through international agencies, migrant worker networks, or families seeking private, unregulated solutions to care needs in their families - as, for example, in Italy and Spain (Troisi and von Kondratowitz, 2013) - or for themselves, as in some ‘marriage markets’ in Asian societies (Piper and Lee, 2016).

We hope contributors writing about care as paid work will explore these issues, including in countries where evidence is still limited, or has been little discussed in English language papers, and will examine the relationship between paid and unpaid, and formal and informal care. Future articles may consider, for example, whether one form of care replaces another, or if it is desirable for complementary forms of caring labour to emerge, each perhaps with its own distinctive place in modern long-term care systems. Contributions within this theme may also wish to explore the nature of care relations when care is conceptualised and delivered as paid work, and to explore relations of paid caring labour in their emotional, familial, community and intergenerational context.

As care work has become globalised, an international perspective has become essential for understanding the patterns of migration, financial transfers, family separations, emotional distances and other features evident in research on ‘global care chains’ (e.g.

Parreñas, 2000; Ehrenreich and Hochschild, 2002; Bettio and Verashchagina, 2012; Yeates, 2009; Williams, 2010). We aim to give space in IJCC to a variety of international perspectives which can ‘open the window’ on developments in care work, for example through detailed case studies of care in specific contexts and localities, or in comparisons between nations and regions, and invite scholars and other contributors to address these issues in the articles, reviews and Debates and Issues items they submit.

Political economy and social policy care perspectives

Understanding the dynamics of care and how it is arranged in disparate social and global contexts involves paying attention to the political economy of paid and unpaid care work. Gender, class and racial divisions play a central role in this, and socio-economic divisions and power relations influence who gets what kind of care, and who supplies it, under what conditions. A number of factors are critical. Markets (formal and informal) influence how care is traded or exchanged. Legal, regulatory and advisory systems, at different levels of governance (local, national and international) shape how care is arranged and organised, and its quality monitored. Moral and ethical frameworks, and systems of beliefs and values about family life, citizenship rights and obligations to others, inform decision-making and practice. These factors affect how care is conceptualised, framed and resourced at all levels; from national governments’ decisions about care policy, to how care is enacted within intimate relations in communities and families, negotiated between couples, siblings, neighbours or friends, and framed by intergenerational relations and life course events.

The concept of a ‘care diamond’, whose points depict how care plays out in interactions and tensions between major actors in the provision and organisation of care has been offered as a useful way of comparing and analysing care (Razavi, 2007). This approach focuses on interactions and dependencies between families and households (where care is typically given or exchanged as part of lifelong reciprocities, and may be an expression of love or obligation); markets (which treat care as a commodity, in various kinds of traded services); public services (which deploy pooled societal resources to fund the provision of care, using compulsory taxes on wealth, income, earnings or purchases); and voluntary, charitable or not-for-profit activities (whose impetus may be philanthropic, religious, or solidaristic).

In some established welfare states formal services have been expanded to complement and relieve carers within families – a development sometimes called ‘de-familialization’ (Mahon, 2002), a contested term, much used in debates on childcare, and the focus of ongoing scholarly debate in relation to the care of older and disabled people (Lewis and Giuliari, 2005; Saraceno, 2010; Saraceno and Keck, 2010). The globalised service economies of the twenty-first century have also overseen complex shifts in which some of the work of care has moved from the domestic context into the paid workforce and formal sphere; and sometimes back again, in a process increasingly identified by researchers as ‘re-familialization’ (Deusdad et al, 2016; Peng and Yeandle, 2017 forthcoming).

These shifting patterns of provision are closely tied to public financing of social policy expenditures, themselves reflective of political and economic struggles and the adoption of austerity as an economic doctrine. With public social provisions increasingly linked to the emergence of markets for care, the distinction between public and private markets for care may also be becoming less relevant (Fine, 2014). These developments call for new analyses of care infrastructures and of how health and social care systems are being reorganised, and for deeper understandings of the implications of shifts in relations between markets, communities and states for how care costs and contributions are distributed. We hope submissions to IJCC will address questions such as: How are care services funded? Can public expenditures on care be sustained? Is the marketisation of care inevitable? Are the costs and contributions which fall on carers and those who need care evident, equitable, or appropriate?

Care relations, care recipients and the ethics of care

Care has important relational, structural, agentic and ethical aspects, and in exploring these, and developing new understandings and analyses of care and caring, IJCC recognises the importance of building on scholarship in the study of ageing, disability and illness. While much care is supportive of, and vital for, people who are frail in late old age, seriously ill or who have mental, physical or intellectual impairments, care can also be provided in ways they may experience as oppressive, demeaning or disempowering. New research findings, and contributions to conceptual debates about the ethics of care, and the rights of those receiving as well as providing care, will therefore also feature in the journal.

These contributions may cover diverse aspects of caring relations and arrangements. In studies of care provided within families or as part of intimate relationships, focusing on

behaviours, communications or interactions may reveal ways in which these may adversely affect the autonomy, preferences and wellbeing of the care recipient, by ignoring, overriding or silencing the voice and choices of the person cared for. IJCC aims to be a forum for exploring and addressing these problems, understanding the different cultural and familial contexts in which they may arise, and examining strategies for ensuring the perspectives of care recipients are heard and responded to in these contexts.

Care can also be oppressive if the focus of the support or services provided is on control rather than empowerment, if these are designed and delivered primarily with efficiencies and cost containment in mind, or if they are inattentive to the wellbeing and self-actualisation of those who use services, or rely too heavily on unpaid care. Here debates about co-production of support, personalised care arrangements and ensuring assistance is chosen by and supportive of the older, sick or disabled person, as well as of their carer(s), are critical. They are important outcomes of the conceptual progress made since the ‘social model of disability’ concept (Oliver, 1990) and relational approaches within disability studies (Thomas, 2004) first became influential in the 1990s.

These debates have also informed scholarship on rights, recognition and values in conceptualisations of care, prompting Morris (2001), for example, to ‘reconstruct’ the ethics of care, and taking debate and scholarship about, or related to, the ethics of care forward in the work of authors based in Europe (e.g. Sevenhuisen, 1998; Leira and Saraceno, 2002; Barnes, 2012); Australia (e.g. Fine, 2007); and the USA (e.g. Tronto, 1993, 2013; Held, 2006; Kittay, 2011).

Technology and care

For many years, care has been thought of as a human activity and examined almost exclusively in terms of interpersonal interaction. Increasingly, technological solutions which offer support to older and disabled people, enabling them to live more independently (and sometimes seen as a way of addressing care gaps or reducing the costs of care, in financial or human resources terms) are emerging. In the past, the literature on technological responses to issues of caring, disability and ageing has engaged in only a limited way with social theories of ageing, although some studies have embraced social constructionist perspectives and Actor Network Theory and explored theories of the ‘domestication’ of technology. Research on how technology affects carers has shown that technology can benefit them through greater ‘peace of mind’ and lowered stress, by creating opportunities for carers to take breaks or

engage with wider social networks and may enhance some caring relationships (Magnusson et al, 2005; AKTIVE Consortium, 2013). Some older people have been shown to value assistive technology for the improved sense of security it can provide, and there are known ways in which assistive technology can support the independence and autonomy of disabled or older people, including those with cognitive, sensory, mobility or other impairments (Bayer et al, 2007; Beale et al, 2009; Hamblin et al, 2016). However recent studies suggest the potential and claimed benefits of care technologies are not yet fully realised, especially when care arrangements are complex, with different family members, workers, neighbours or friends involved in a frail older person's support (Schmidt et al, 2011). While it seems likely there is considerable scope for using technology to enhance how caring networks and communications operate, or to increase the responsiveness of health and social care systems, more robust research is needed. Comparative analysis of regional, national and other differences in how care technologies are deployed, resourced, supported and evaluated, is required, asking searching questions about the extent to which technology can enhance, supplement or substitute for human contact; its growing use (for example as a means of addressing social isolation or loneliness), and its potential in institutional settings (where those cared for are often very frail and ill or living with advanced cognitive impairment) both for delivering care with dignity and compassion and for increasing alienation and fear.

3. The International Journal of Care and Caring: a timely development

In planning the new journal, we reviewed articles on research, policy, practice and theory relating to care and caring. Papers had been published in over 80 different scholarly journals; the evidence base on care and caring spanned a wide range of disciplines, but was fragmented. The new journal will facilitate synergies between researchers, topics and themes that might otherwise lack a suitable platform, generating new knowledge and thinking in an arena ripe for further theoretical, empirical and methodological development.

As noted, carer-related research is growing worldwide and interest in it is accelerating. The challenges of meeting care needs are now high priority issues for governments, employers, policy makers, practitioners and academics around the world, as they respond to population ageing, changes in family life and labour force participation, and expectations that in the future most care of sick, frail and disabled people will be provided in the home. Care and caring, situated at the intersection of policy, practice and research, also straddle the conceptual, theoretical and practical, interleave with health and care services and

professional concerns and are an issue for practically every society and community in the world.

A major reason for developing IJCC is the need to encourage new scholarly work with an international perspective on what is so often understood or examined in its purely domestic or local context. Care is not only a topic of importance in the developed nations, where systems for organising care have been put in place; it is also a vital and pressing issue in less developed countries and some of the poorest nations in the world. This emerged strongly in 2016 at the IAGG (International Association of Gerontology and Geriatrics) conference ‘Long-Term Care Systems for Africa: Setting Agendas’ in Nairobi, Kenya (<http://www.aphrc.org/iagg/>). Detailed accounts and critical analysis of how care is organised in these contexts is much needed in the international discussion and theorisation of care, and we particularly invite scholars working in countries which feature less often in English-speaking accounts of care and caring to submit their work for consideration in IJCC.

IJCC is committed to providing a critical forum for sharing and debating this wide range of interests and perspectives on care, carers and caring, to developing a genuinely global audience of scholars and researchers across multiple disciplines, and to appealing to a wide audience of campaigners, policymakers and practitioners, as well as academics and scholars, for whom care and carers are a key focus of interest. Our perspective is that care and caring are everybody’s business, and that care issues touch, either now or in the future, the lives of every human being. Our topic gives meaning and value to lives worldwide, helping every family and community through times of strain, loss and to overcome adversity or respond to vulnerability. Care and caring have universal importance and the potential to improve our world in the 21st century; yet research shows us they are too often associated with inequality, disadvantage, oppression and social exclusion. The International Journal of Care and Caring aims to harness the energy and commitment of scholars, policymakers, practitioners and activists worldwide to build new understandings of care and caring and help them find their rightful place in world affairs, as a respected, valued set of activities, relationships and contributions guiding and shaping the development of a fairer, better world for people of all ages, abilities and nations.

In this issue

Our first issue of IJCC is, as we plan all future issues to be, international, multidisciplinary, agenda-setting, and methodologically diverse. It contains contributions we think will be

relevant, important and of great interest to our intended broad and global audience of scholars, researchers, policymakers and civil society organisations.

Issue 1 includes an incisive and thought-provoking new article by leading global political scientist Joan Tronto (University of Minnesota, USA), whose outstanding contributions to intellectual thought on care and caring have been influential for over twenty years. In *There Is An Alternative: homines curans and the limits of neoliberalism*, Tronto engages head-on with the challenging topic of how we might conceptualise and understand care in an era in which neo-liberalism seems dominant, almost all-pervasive, and to be sweeping other ideologies and policy ideas away as the values and practices of marketisation, privatisation and ‘consumer-directed’ care gain sway around the world. Her article will challenge and inspire all looking for new thinking on care and caring and we hope will prompt further contributions on the political economy of care in future issues.

In *Family Care Work: A Policy-Relevant Research Agenda*, Nicole Depasquale (Pennsylvania State University, USA), a rising star in social gerontology, and distinguished sociologist Phyllis Moen (University of Minnesota, USA) set out multiple paths for future research and new scholarship in the field of care and caring. Their article offers a mosaic of new opportunities for future work in this field, to guide and energise new multi-disciplinary and cross-national scholarship. We hope readers will take gems from the rich vein of ideas they offer, and submit new papers on linked themes which can feature in coming editions of IJCC.

In *Supporting Working Carers' Job Continuation in Japan: prolonged care at home in the most aged society*, Shingou Ikeda (Japan Institute of Labour Policy and Training) engages with issues currently facing policy-makers in Japan as it confronts the challenge of reconciling paid employment with familial caring roles among its working age population. Ikeda, who has led ground-breaking Japanese research exploring how demand for care is reshaping cultural practices and employment relations, and advised Japan’s Ministry of Health, Labour and Welfare, presents findings from recent survey-based research, linking it to newly-amended legislation on care leave, and in so doing addresses a topic of growing global interest.

In their article, *General and Proximal Associations between Unpaid Eldercare, Time Constraints and Subjective Well-being*, life-course scholar Jack Lam (University of Queensland, Australia) and demographer and statistician Joan Garcia Roman (University of

Minnesota, USA), currently working on the harmonization of American and international time use surveys, explore the potential of US time-use data for understanding how caring for an older person with support needs affects the care-giver. We hope it will prompt future contributions to IJCC from scholars using comparable data and methods, helping to build a picture of similarities and differences observable in the growing range of time-use and other relevant datasets available in different countries, progressing understanding of how caring affects carers, and encouraging international debate on methodological challenges and data interpretation.

Our final peer-reviewed article in Issue 1, Care and Violence through the Lens of Personal Support Workers, is by Canadian scholar Christine Kelly (University of Manitoba), whose interests span the politics of care and disability movements. Using qualitative data, Kelly examines a vital, if controversial, issue in care and caring – its darker, but readily evident side, in which violence may be the experience of, or need to be managed by, both carers and care recipients. In a compassionate but challenging analysis, her article invites responses about how violence and oppression can be minimised in caring contexts, and how rights to dignity, respect and safety may be supported (or undermined) through the systems and practices in which care is provided and received. We hope this too will be an issue debated in future contributions to the journal.

IJCC's opening issue carries three items in its Debates and Issues section, which will be a permanent feature of the journal. In Working Longer, Caring Harder – *the impact of 'ageing in place' policies on working carers in the UK and Sweden*, two authors - Madeleine Starr MBE (Carers UK) and Marta Szebehely (University of Stockholm, Sweden) debate the policy and economic emphasis in the UK and Sweden on extending working lives and 'modernising' pension schemes, and its consequences for working age family carers, concluding that carers in both countries are 'paying a high price' for aging in place policies. Madeleine Starr is an internationally respected expert on care and caring, honoured for her work on carers and employment and Marta Szebehely a distinguished scholar of social work, who has led many major research programmes on care and caring and advised the Swedish Government on issues of care, disability, welfare and gender.

In Transformation of the Taiwanese Association of Family Caregivers through the Long Term Care Debate for Carers in Taiwan, Frank T Y Wang (National Chengchi University, Taiwan) and Chen-Fen Chen (Chinese Culture University, Taiwan) reflect on the early years of the carers' movement in their country, and its engagement with policy initiatives and

debates. Their analysis draws on their personal engagement with and contributions to building the TAFC in Taiwan, discussing challenges which will be familiar to leaders of carers' organisations in many other parts of the world. We hope the insights and learning they share will inspire future contributions from carers' organisations in other areas of the world.

Our third Debates and Issues item, Co-design of a Carers Strategy for New South Wales: reflections on a new approach to collaborative policy making with carers, is from Australia. Provided by Helen McFarlane and Karen Turvey (respectively Principal Policy Officer, and Senior Policy Officer, Carers' Team, NSW Dept. of Family and Community Services), it shares insights from their experience of working with carers and others to develop an innovative carers' strategy for the state of New South Wales, describing the processes involved, issues arising and early outcomes of this initiative. With such strategies gaining popularity with national and other governments worldwide, especially in English-speaking countries, their insights are relevant to many international developments, and will stimulate interest, and similar contributions, based on experience in other countries.

We intend IJCC's Reviews Section to be a key source of critical engagement with, and information about, global developments in research, policy and thinking on care and caring. Our first issue offers perspectives from scholars in the USA, Uruguay and Australia on three recently published volumes. Political scientist Daniel Engster (University of Texas at San Antonio, USA) reviews *Ethics of Care: Critical Advances in International Perspective* (2015), which spans African, European and American perspectives and is edited by UK scholars Marion Barnes, Tula Brannelly, Lizzie Ward and Nicki Ward. Sociologist and regional studies specialist Karina Batthyány Dighiero (University of the Republic, Uruguay) reviews the online collection *Redistributing Care: The Policy Challenge* (2013) edited by Coral Calderón, which features contributions from many Latin American countries and engages with debates about gender, care work and time use. In our third review, of *The Sociology of Caregiving* (2014) by American authors John G Bruhn and Howard M Rebach, fellow sociologist Susan Banks (University of Tasmania, Australia) offers her critical perspective, finding much to admire, but highlighting some perceived omissions, in their wide-ranging overview of the growing, complex issues of caregiving in the 21st century in the USA.

IJCC aims to feature a conference review in each issue, and our first, fittingly, is of the 6th International Carers Conference, held 3-6 Sept. 2015 in Gothenburg, Sweden. Entitled *Care and Caring: Future-proofing the new demographics*, this conference was the sixth in a series

of conferences dating back to 1998, when the first major gathering of the international carers' movement took place in London. Subsequent international carers' conferences have met in Australia, Canada, the UK and the USA, drawing increasing global interest and sharing new research, scholarship, and policy and practice developments. The 6th conference, the first held in a non-English-speaking country, is reviewed by Elizabeth Hanson (Swedish Family Care Competence Centre) and Madeleine Starr (Carers UK) who draw on their knowledge of the conference as organisers and participants. Their review reveals the range and richness of the inspiring debates and discussions held in Gothenberg, and notes that the 7th conference will be held in Adelaide (Australia) in 2017. IJCC will have a presence there to encourage contributions and invite new or established scholars and practitioners to submit their work to IJCC, and plans to feature leading items from the Adelaide conference in future issues.

Editorial team

IJCC's editorial team comprises its Editor-in-Chief (Sue Yeandle, UK) and two Co-Editors (Yueh-Ching Chou, Taiwan and Michael Fine, Australia); together they take main responsibility for encouraging submission of scholarly articles to the journal and guiding these through peer review. Alisoun Milne and Mary Larkin (both UK) are, respectively, the journal's Debates and Issues and Reviews Editors. IJCC's Consulting Editor for North America is distinguished scholar Joan Tronto (USA). Our Social Media Editor (Jo Moriarty, UK) will support IJCC's development by encouraging online responses to IJCC, building a virtual network of contributors, and drawing global attention to IJCC's content. The IJCC Editorial team is supported by Editorial Assistant Thomas Hickman. IJCC also has a strong international Editorial Advisory Board to guide its forward strategy and is establishing IJCC Regional Editorial Groups in six 'world regions': Africa; Asia; Australasia; Europe; Latin America and the Caribbean; and North America. These groups will help ensure IJCC swiftly attracts a wide range of critical, thought-provoking articles based on global scholarship in care and caring, and extend our database of reviewers and contributors. They will raise regional awareness of the journal; encourage submissions for peer review and for the Debates and Issues and Reviews sections; recruit suitable scholars to review articles submitted; identify new, interesting or ground-breaking research IJCC might feature; and suggest books and conferences for review. One member of each IJCC Regional Editorial Group will join the journal's Management Board to further support its global perspective.

Thank you for taking a look at this new journal. We hope you share our excitement at the potential the International Journal of Care and Caring has to make a significant and lasting contribution to global scholarship and debate, and invite you to submit your work for consideration in future issues.

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