

2. Care and the analysis of welfare states

Mary Daly and Margarita León

INTRODUCTION

In this chapter, we cut through the voluminous scholarship on care to focus on the role of the state. With this lens, the overall aim of the chapter is to outline the main trajectory of the concept and its potential as an analytic framework for future research.

While care is now a widely used term and concept, it is important to clarify its meaning and core references. For the purposes of this chapter, care refers to the labour, resources, and relations involved in meeting the needs of those requiring assistance and help because of age, illness, or frailty of some kind. This understanding encompasses care for both children and adults, and it covers both the persons receiving care and those providing it. Care has arguably been one of the most original concepts in gender, welfare state, and social policy studies, especially in the sense of a concept emerging from practices and relations in real life. The associated scholarship is vibrant and diverse as well as being solidly comparative and increasingly global.

KEY FEATURES AND INTERESTS OF CARE AS A CONCEPT

In the first part of this chapter we briefly outline the main literatures within which the concept of care has developed. We then look more closely at how care has been utilized to analyse the welfare state. The two questions that guide us here are: What is care? And how has care been applied to analyse the welfare state?

What Is Care?

Care as a concept in academic work can be estimated to be some 30–40 years old. The concept has developed from a range of perspectives and roots, making it an interdisciplinary concept in key respects. Probably it is better thought of as a set of concepts rather than a single concept. When viewed from the

perspective of the study of the welfare state and social policy, we can locate its historical origins in two main sets of work: on the one hand feminist and gender scholarship regarding the position of women and the organization of life inside and outside the home, and, on the other, analyses of the development of services for older people (and to a lesser extent children). We will look at the two literatures briefly in turn.

The first set of literature arose out of feminist and gender-oriented engagement. This is not only a large but also a very broad corpus of work, focusing over time on care as it encompasses care for older people and that for children. A perspective with a broad reach was sought. For our purposes and indeed for research and scholarship a core question was: What is care and how should we conceive of it?

In one originating school of thought, care is located within the domestic and interpersonal setting. Here, the concept is used to examine the day-to-day reproductive work that goes on in households and families, including both the material activities involved and the normative and ideological processes. Both are seen to confirm women as (for the most part unpaid) carers, and to define women in a family or home context (Finch & Groves, 1983; Graham, 1983). Uncovering the nature of the caring activity itself was especially important, because it was largely hidden from view. Thomas (1993), for example, identified seven dimensions to care. These pertain to the identity of the provider and of the recipient of care, the relationship between the two, the social content of the care, the economic character of the relationship and of the labour, and the social domain and institutional setting within which the care is provided. Analyses of the content of care work served to distinguish between different types of care. Graham (1991), for example, sought to include non-kin forms of home-based care (as well as kinship-based care), and she makes the important point that defining care in terms of home-based care for family members has served to centre the analysis around (white) women's reproductive work for kin while obscuring other forms of home-based work (paid domestic service, for example) and relations of class and race.

Care as a set of activities and relations was developed in another gender and feminist-oriented literature as well. Here, it was seen as a particular way of relating to others, much wider than but also including the activities of tending to the needs of others. In this expansive vision, caring is a basic form of human interconnection set within complex relations and moral commitments (Tronto, 1993; Held, 2005). This too moved care beyond the home. Indeed, in this perspective, care's limits and foci are endless; it can be applied everywhere, from our environment and experiences to the people we live with or alongside. Fisher and Tronto's (1990) work is a classic here in defining caring as a species activity involving four phases: caring about, caring for, caregiving, and care receiving. Drawing from moral theory, philosophy, and legal theory,

this approach elucidates a vision of how individuals can ‘be’ with each other and how an ethics of care could seed profound change at a local, national, and especially global level. As well as challenging the notion of the isolated individual of liberal and social contract theory, it emphasizes the intrinsic value of care and of interdependence as the human condition rather than individualism.

In the second body of work, the concept of care emerged out of studies of health and eldercare. To answer the question of what care is, this work looked especially at the needs of older people and the responses to their needs. In order to pinpoint this focus of endeavour, the reader might consider such fields as ‘health care’ or ‘health and care’ or ‘community care’ or ‘care of the elderly’. This work remained in the shadow of health scholarship for a long time, and its evolution is part of a critique of the relatively narrow focus of health research on care in a medical setting or of care as a response to medical need. Indeed, the dominance of the health and medical perspective is part of the reason why some scholars started to use the term ‘social care’ (which is now a widely accepted term in some countries, such as the United Kingdom, although in other countries and internationally the term ‘long-term care’ demarcates the field). In a social care framing, research began to examine the needs associated with care conceived of as more than a health-related condition, and the organizational and community responses to such needs, through personal social services, for example (Sainsbury, 1977). Frailty and reduced or declining competence were at the centre here. This was a literature located in both health and public services, but it also touched on the welfare state as a system of provision for need and the administration of this provision. The difficulties of meeting need in a context of pressures such as population ageing and the growing prevalence of dementia-related conditions and declining public resources have not just been underlined, but have often been a starting point for research and study as time has gone on (OECD, 2004).

In truth, the answer to the question of what care is has been taken for granted as self-evident. This, we suggest, is unacceptable. Perhaps the most serviceable definition for the present purpose – and one that is most widely used – is that of Daly and Lewis (2000: 285), for whom care signifies ‘the activities and relations involved in meeting the physical and emotional requirements of dependent adults and children, and the normative economic and social frameworks within which these are assigned and carried out’.

How Has Care Been Applied to Analyse the Welfare State?

The application of care to analyse the welfare state has led to a very rich and vibrant body of work. Again, here, it is possible to identify a number of different strands of work but, we suggest, a helpful way of making sense of the literature is to think in terms of the care system and the state’s role in it.

There are narrower and broader interpretations of the underlying ‘system’. One of the concepts that early scholarship worked with was that of the welfare mix (Evers & Svetlik, 1993). This helped to bring together formal and informal provision into a broad-ranging understanding of the care system as spanning a range of fields and agency. From a social policy perspective, a key question was how the state engaged with different types or forms of care. This brought the service infrastructure centre stage (Jamieson & Illsley, 1990). In general, the literature on care is much more services-oriented as compared with the main body of work on the welfare state, which has tended to view the state in terms of cash transfers and income support generally. In the care literature, the evolution of particular service responses and the appropriate ‘mix’ became an enduring question posed of the welfare state (with ‘mix’ understood in a relatively broad way to encompass market-based, voluntary sector, public, and family-based provision) (e.g., Anttonen & Sipilä, 1996).

It is only a short step from this to system design and resource use. In this regard, both the longstanding elements of the system of care provision are revealed as are the innovations (Ranci & Pavolini, 2013). There is much to report in regard to the latter, as welfare states continuously reform their ‘offer’ around care. For example, among the innovations in long-term care policy, there is an increasing use of personal budgets for care to allow people to organize their own care, a focus on reablement and ageing in place, a greater use of a range of technologies, and the introduction of a support architecture (such as leaves and benefits) for informal carers. An increasingly reported trend is the general move of the state out of direct service provision, with the growing use of so-called ‘cash-for-care’ benefits (e.g., Da Roit & Le Bihan, 2019). These have the purpose of individualizing control of care and have roots in Italy and the United Kingdom; since the 1990s they have been expanded in Austria, France, Germany, the Netherlands, Spain, *inter alia*.

The feminist work has especially emphasized the matter of rights and entitlements and the political implications of the way states respond to care. From the perspective of individuals receiving or giving care, one question asked is about what states make available as entitlements and supports to people in either situation. This has sometimes been framed in terms of how care is recognized in citizenship (Knijn & Kremer, 1997; Anttonen & Zechner, 2011). What are the equivalences between the entitlements (if any) that people obtain as a result of caring compared to those accrued through employment? This has led to investigations and some comparisons of the entitlements of people who need care (typically those who are frail or vulnerable because of infirmity or age) and those who provide it. The rights and obligations of women (especially mothers, and in earlier studies, wives) have been a central topic here, in scholarship that unpacks women’s citizenship. This has led to a host of work that has undertaken a rather fine-grained analysis of the policy packages associated

with care (which, at least in European countries, typically combine interventions that provide time through leave schemes, financial assistance, and/or services to support caregivers and those in need of care).

But the studies have also moved beyond the individual level. From the start, comparative work on care and the welfare state from a feminist perspective insisted on the need to incorporate the interactions between and within the state, the market, and the family/community. Family-derived relations and obligations were seen to be especially interesting. The pioneering work of gender scholars (Lewis, 1992; Orloff, 1993) argued against constructions of welfare system typologies that were oblivious to the relevance of care in society. Much of this early work focused on the limitations of ‘decommodification’ as an indicator of welfare generosity, and argued for alternatives that would acknowledge both the relevance of the unpaid work of women for welfare state development, and the ways in which the welfare state treated women and care. In this space, the concept of familialization/defamilialization was developed. It was in origin derived from feminist work (Lister, 1994), although it is now used more broadly in comparative welfare state studies (e.g., Esping-Andersen, 2009). While it has different usages, through a feminist lens the concept seeks to theorize the role of social policy in affecting women’s dependence on the family on the one hand, and the state’s construction of family responsibilities and roles on the other. Both are measured by the degree to which policies redistribute the responsibility for and practice of care-related tasks and associated dependencies away from or to the family – for example, the extent to which the state substitutes the family as a service provider, ‘socializes’ or subsidises family-related tasks or functions, and treats family members as individuals (in terms of rights, status, obligations, and sources of support) and potential earners (Leitner, 2003). Kröger’s (2011) concept of dedomestication offers interesting insights too. The concept is understood as the degree to which policies facilitate a certain degree of personal freedom from confinement to the domestic sphere. It is intended to be complementary to the concept of defamilialization in that it attempts to measure the capacity of welfare states to help people to participate in society and not just paid work. In a more explicit gender framing, Mathieu (2016) wants to shift the weight of analysis from families to mothers, arguing that the focus has been too much on the institution of the family, and that policies can affect the gender division of care labour without shifting it from the family (e.g., paternity leaves).

As the component elements of care provision came to be identified, systematic and configurational thinking became widespread. In fact, interrelations between the state, the market, and the family proved to be a magnet for researchers and subsequent years saw work on intergenerational regimes (Saraceno & Keck, 2010), care regimes (Bettio & Plantenga, 2004), and family policy regimes (Leitner, 2003), to name just a few. A second contribution was

to use the typologies to identify trends and pinpoint emerging policy trajectories. The male breadwinner model was an analytic stalwart here, hosting many analyses that pointed out the ‘private’ arrangements of employed father/home-based mother that benefit systems help shape and persist (Lewis, 1992). From this work, the notion of the ‘adult worker model’ as the alternative arrangement was born. Jane Lewis’s contribution to this was key, naming it in the first instance and identifying a number of empirical features of the associated social policy template, such as policy’s concern with ‘work–life balance’, the flexibilization of employment, and the emphasis on care leaves for parents and fathers (Lewis, 2001). Other attempts at classifying underlying models include those of Crompton (1999) and Daly (2011). Notably, this work did not engage in producing typologies based on race or ethnic origin or, indeed, other axes of inequality.

It will be obvious that there is no singular interpretation of ‘the system’. And this is appropriate given its complexity. However, a constant limitation in studies of care has been on the one hand the lack of a shared common conceptual ground of what care means and how it can or should be applied and, on the other hand, the lack of data availability at the cross-national level. One matter that very much affects the interpretation of the system is whether care is interpreted to refer to long-term care or care for children (such as early childhood education and care), or both. Scholarship is quite diverse in this regard. The appeal of a broad version of the concept is understandable: it allows access to an ontological perspective on human life in general and the complex ethics involved, and it provides an overarching framework of analysis. There is an inherent life-course view in the more plural usage also (although this is not always explicit) which allows access to how care connects structures, processes, and relations across various points and stages of the life course (Daly, 2018). But common denominators notwithstanding, there are good grounds to differentiate care for adults from that for children. For example, the latter is far more embedded in the family than the former, and in many countries policy tends to frame long-term care very differently from that of care for children (especially in a social investment context).

LOOKING TOWARDS THE FUTURE: NEW AGENDAS IN CARE RESEARCH

New Directions in Care Research

It is incontrovertible that care as a field of research has expanded in a number of directions. Driven in key respects by the need to understand, measure, and tackle some of the most pressing problems in European societies such as declines in fertility and ageing populations, care policy has a more central

position in today's welfare states. Cross-country examinations of care policies and the outputs of such policies have also grown and improved over the last two or three decades. New datasets have emerged, such as the Multilinks database on policies related to intergenerational obligations within the family; or the International Network on Leave Policies (www.leavenetwork.org). New theoretical and conceptual approaches have been applied. National and international institutions such as the European Union and the Organisation for Economic Co-operation and Development have played key roles in promoting and funding comparative research on care policy (Mahon, 2018; Spasova et al., 2018).

One major trend is for care policies to be studied through the lenses of novel theoretical frameworks within social sciences that allow for broader and more nuanced understandings of the significance of social policy in affecting personal wellbeing and autonomy. The capabilities approach (CA) is one of these more novel approaches. In the original formulation of Amartya Sen and Martha Nussbaum (Nussbaum, 2003), capabilities are opportunities to achieve the 'functionings' needed to live a good and meaningful life. This perspective has opened up discussions on ethical concerns regarding the actual delivery of care and not just the availability of resources for care. The CA allows researchers to pose the important question of what the appropriate metric of justice is (Brighouse & Robeyns 2010). This includes perceptions of dignity and wellbeing felt by those at the receiving end of care services with clear implications for the everyday practice of social care (Pirhonen, 2014). Scholars interested in understanding the extent to which policies provide equal opportunities for children and families have also applied the CA to move beyond mere supply-side analyses (Orton, 2011; Yerkes & Javornik, 2018).

A second relatively novel orientation in care work is intersectionality, which when applied focuses on multiple inequalities and sees care as tying together race and ethnicity, gender and class. This work takes both a 'local' and a 'global' approach. It shows that the increased outsourcing of household/familial care responsibilities in a neoliberal market context has created increased social and economic polarization among women along socio-economic, racial/ethnic, and citizenship lines (Peng, 2019). There are several ways in which such inequalities are being investigated and explained. Lutz (2018) suggests 'transnational social inequality' as a concept that brings together key aspects, such as female care work as a social and gendered obligation across borders; the lack of social protection attached to care work performed by migrants; and the intersection of race and migration. Another leading idea here has been the concept of global care chains, which focuses on the flow of care-providing labour across countries and regions. This idea traces the implications for the providers (especially the individuals and their native countries) and the receivers (usually higher-income people and countries) (Hochschild, 2000; Yeates,

2011). When the lens is turned towards policy, the work examines the inter-connections between economic, social, employment, and migration policies to be considered (Williams, 2012; Michel & Peng, 2017). The perspective is much larger than the classic conception of care as domestic labour or nurture – its inherent critical international political economy approach in particular crafts an explanation centred upon power relations and clashes between nations (in their own right and in regard to how these are institutionalized in policy) and the economic and political forces of global processes and imperialism that reproduce gender and other inequalities in various forms (Parreñas, 2001; Fraser, 2016).

Another line of investigation places marketization at the centre of the analysis. Since the early 1990s at least, the care sector has been particularly affected by such development, due to strong demand pressure caused by population ageing and welfare state cutbacks (Brennan et al., 2012; León, 2014). In most countries, the development of care services ‘happened in an era of markets and often through markets’ (Gingrich, 2011: 175) and thus governments’ responsibilities towards provision were not as well defined as in other public services such as health or education. We now know that there is great diversity in what marketization means in different contexts and for different population groups, especially in both the degree of introduction of market principles and mechanisms (such as competition and consumer choice) and the way for-profit institutions are located among other types of providers (Anttonen & Meagher, 2013). This work makes it clear that there is a steady growth in the recourse to market mechanisms and for-profit providers across welfare states, although arguably these trends are at their most extreme in the liberal countries as well as the familialistic countries of Southern Europe. There is considerable critique of the turn towards marketization, and how it is rooted in both new public management philosophies and a neoliberalization of the welfare state (Gingrich, 2011). Drawing such principles into care risks commodifying it.

Lessons from the COVID-19 Pandemic

The pandemic has exposed some major weaknesses of the social care sector in many countries, especially the extremely vulnerable situation of workers in nursing homes. The slow and inadequate reaction of governments to the high risk of COVID-19 in nursing homes is at least partly related to increased marketization and the erosion of public-sector regulation (Daly, 2020; Daly et al., forthcoming). Extremely high death tolls in nursing homes have catapulted discussions about the need to reorient the care sector in the political agenda. Undefined quality standards, poor working conditions, lack of public regulation and control, and poor governance mechanisms are an essential part of the discussions.

The ‘social investment turn’ (Morel et al., 2012; Hemerijck, 2017) has also given a role to research in care, especially out-of-home care for children. Under the rubric of social investment, work–life balance and childcare policies are now strategically supported as part of a more comprehensive agenda regarding economic growth and human capital formation (Hemerijck, 2013). This new paradigm is especially interested in early education and care as an investment in the human capital of children and as an enabler of higher female employment. A growing and more critical body of research is looking at the interaction of such social investment policies with their institutional, economic, and cultural contexts. Especially in highly dualized labour markets and unequal societies, the focus on activation and human capital formation may produce discrimination against the most vulnerable groups in society, since a number of ‘Matthew effects’ – whereby the well off in society tend to benefit more from policy – might operate (Cantillon & Van Lancker, 2013). Measuring the redistributive effects of care policies, in particular services for very young children, is an important contribution to broader understandings of comparative welfare analyses and a corrective to the long-standing tendency to consider the welfare state in terms of economic transfers and labour market policy.

The recent expansion of family and care policies following the social investment paradigm (Daly & Ferragina, 2017) – even in countries whose welfare regimes are considered conservative and familialistic – has also triggered relatively new comparative work which is centred around the political dynamics behind these trends (see for instance Palier et al., forthcoming). This scholarly work can be grouped into three main strands. First, there are the studies which analyse the introduction of family and care policies to attract new voter groups in the context of secularization, cultural change, and greater electoral volatility (Morgan, 2013). In a second stream the higher presence of women in politics is considered to be a reasonable, although somehow difficult to gauge, predictor of policies that address gender issues. Third, policies that foster the externalization of care work and those that support employment-oriented family policies are also responding to pressures for labour force reskilling (Fleckenstein & Lee, 2014).

In a further iteration, the mainstream welfare state literature is slowly starting to link debates about the welfare state to the environment (Gough, 2015), although care is not always present in these debates. The key question is whether an ethic of care can help rethink the relationship between growth and welfare which would, in turn, affect the ecological transition. Growth has allowed welfare state expansion, but it has also created greater demand for welfare state spending (Büchs, 2021). The ‘relentless revolution’ of capitalism (Appleby, 2011) has created great new opportunities but it has also generated bitter conflicts, the most important of which is the threat to our

own survival. Arguments in favour of degrowth and the building of a green sustainable economy push us to question the very meaning of productive and reproductive work and the underpinnings of sustainable economic prosperity. In this respect, some renowned economists have been making the case for a fundamental change in the way in which we measure growth and progress to take into account considerations about equality, subjective wellbeing, and sustainability (Stiglitz et al., 2010). To be fair, the argument was already put forward by Marilyn Waring back in the 1980s when she analysed the roots of gender discrimination by going to the foundational practices of caring labour and demonstrating what was being missed by failing to account for it (Waring, 1988). After this seminal work, the bulk of feminist economics, including the important work of Nancy Folbre (1993), has been devoted to unveiling the ways in which the organization of social reproduction was not just unfair and inefficient, but also unsustainable.

Quests for sustainable futures inevitably need to address the question of how to organize and allocate time and resources. Ultimately, this becomes an issue of power and equality between the Global North and the Global South, between women and men, and people of different ages, classes, ethnicities, and sexual orientations. It is here that Joan Tronto (2015) proposes addressing the inequalities embedded in the handing out of care responsibilities through politics, recognizing the democratic goals of our caring practices. This is nothing new, since as we have shown earlier in this chapter, the ethics of care concept goes to the heart of notions of social justice, but it has not been realized. And the major global transformations that we face today, from the climate emergency to the rise of social inequalities, the ageing of populations, and the challenges of automation all lead to the politicization of care as a concept and critical line of analysis.

CONCLUSIONS

Although initially absent from the early systematic studies of welfare state variations, care has become a core concept and subject of study since at least the early 1990s. Thanks to this scholarship, care is today a focus of a broad and growing swathe of work in comparative social policy studies. In this chapter, we have first looked at the evolution of research on care to identify how the concept has been defined and applied and the kinds of analyses of social policy that it has led to. The second part of the chapter identified where research in this field is headed and its potential as an analytic framework. Attention has been paid to the ways in which care lies at the intersection of welfare, employment, and migration, and how the concept and its application can help our understanding of major challenges such as population ageing, the growth

of inequality, the complexity of contemporary social diversity, rapid processes of digitalization, and the threat of climate change.

Population ageing is perhaps the issue that has been more centrally placed in discussions regarding care regimes given the immediate pressures it puts on public care systems. The need to control public budgets in a context of expansionary demand is one of the reasons behind the rapid expansion of care markets.

With regard to the problem of inequality, despite and in some ways perhaps because of the mass incorporation of women into the world of paid employment, caring work continues to play a major role in gender-based inequalities in the labour market and beyond. Whilst childrearing still explains to a large extent gender pay gaps in most countries, the externalization of care work to the low-paid service sector accounts for structural intersectional inequalities. As a matter of fact, much of the precarious conditions of what during lockdown was considered ‘essential work’ actually derives from the scarce value we attach to reproductive and care labour. Hence, although discussions around care are conspicuously absent in mainstream debates concerning rising inequality, it is hard to imagine any political response, at whatever scale, that will not seriously consider the systemic undervalue of care. Likewise, discussions around care work and policies are also relevant for broader socio-ecological transformations in post-growth contexts. The ecological crisis and the process of automation are both redefining the nature of the welfare–work nexus. These two major threats produce new societal and economic dynamics that, in the words of Nancy Fraser (2016), create to different degrees different strains on care. In one way or another, all these new developments raise important questions with regard to the very definition of human progress and the links between productivity, growth, and welfare. In fundamental ways, the COVID-19 pandemic has shown us in the hard way the urgency to rethink the overall public value we grant to care. As Tronto rightly envisaged back in 1998 ‘When our public values and priorities reflect the role that care actually plays in our lives, our world will be organized quite differently’ (Tronto, 1998: 16). This is a conversation still pending in many respects but one we cannot afford not to have.

REFERENCES

- Anttonen, A., & Meagher, G. (2013). Mapping marketisation: Concepts and goals. In G. Meagher & M. Szebehely (Eds), *Marketisation in Nordic Eldercare: A Research Report on Legislation, Oversight, Extent and Consequences* (pp. 13–22). Stockholm University Press.
- Anttonen, A., & Sipilä, J. (1996). European social care services: Is it possible to identify models? *Journal of European Social Policy*, 6(2), 87–100.

- Anttonen, A., & Zechner, M. (2011). 'Theorising care and care work'. In B. Pfau-Effinger & T. Rostgaard (Eds), *Care between Work and Welfare in European Societies* (pp. 15–34). Routledge.
- Appleby, J. (2011). *The Relentless Revolution: A History of Capitalism*. Norton.
- Bettio, F., & Plantenga, J. (2004). Comparing care regimes in Europe. *Feminist Economics*, 10(1), 85–113.
- Brennan, D., Cass B., Himmelweit, S., & Szebehely, M. (2012). The marketisation of care: Rationales and consequences in Nordic and liberal care regimes. *Journal of European Social Policy*, 22(4), 377–391.
- Brighouse, P., & Robeyns, I. (2010). *Measuring Justice: Primary Goods and Capabilities*. Cambridge University Press.
- Büchs, M. (2021). Sustainable welfare: Independence between growth and welfare has to go both ways. *Global Social Policy*, 1–5.
- Cantillon, B., & Van Lancker, W. (2013). Three shortcomings of the social investment perspective. *Social Policy and Society*, 12(4), 553–564.
- Crompton, R. (1999). *Restructuring Gender Relations and Employment: The Decline of the Male Breadwinner*. Oxford University Press.
- Da Roit, B., & Le Bihan, B. (2019). Cash for long-term care: Policy debates, visions and designs on the move. *Social Policy and Administration*, 53(4), 519–536.
- Daly, M. (2011). What adult worker model? A critical look at recent social policy reform in Europe from a gender and family perspective. *Social Politics*, 18(1), 1–23.
- Daly, M. (2018). Generations, age and life course: towards an integral social policy framework of analysis. *Contemporary Social Science*, 15(3), 291–301.
- Daly, M. (2020). COVID-19 and care homes in England: What happened and why? *Social Policy and Administration*, 54(7), 885–998.
- Daly, M., & Ferragina, E. (2017). Family policy in high-income countries: Five decades of development. *Journal of European Social Policy*, 28(3), 255–270.
- Daly, M., & Lewis, J. (2000). The concept of social care and the analysis of contemporary welfare states. *British Journal of Sociology*, 51(2), 281–298.
- Daly, M., León, M., Pfau-Effinger, B., Ranci, C., & Rostgaard, T. (forthcoming). COVID-19 and policies for care homes in European welfare states: Too little, too late? *Journal of European Social Policy*.
- Esping-Andersen, G. (2009). *The Incomplete Revolution: Adapting to Women's New Roles*. Polity Press.
- Evers, A., & Svetlik, I. (Eds). (1993). *Balancing Pluralism: New Welfare Mixes in Care for the Elderly*. Avebury and European Centre.
- Finch, J., & Groves, D. (Eds). (1983). *A Labour of Love: Women, Work and Caring*. Routledge.
- Fisher, B., & Tronto, J. (1990). Toward a feminist theory of caring. In E. K. Abel & M. K. Nelson (Eds), *Circles of Care Work and Identity in Women's Lives* (pp. 36–54). State University of New York Press.
- Fleckenstein, T., & Lee, C. (2014). The politics of postindustrial social policy: Family policy reforms in Britain, Germany, South Korea and Sweden. *Comparative Political Studies*, 47(4), 601–630.
- Folbre, N. (1993). Counting housework: New estimates of real product in the US 1800–1860. *Journal of Economic History*, 53(2), 275–288.
- Fraser, N. (2016). Contradictions of capital and care. *New Left Review*, 100, 99–117.
- Gingrich, J. R. (2011). *Making Markets in the Welfare State: The Politics of Varying Market Reforms*. Cambridge University Press.

- Gough, I. (2015). Climate change and sustainable welfare: The centrality of human needs. *Cambridge Journal of Economics*, 39(5), 191–214.
- Graham, H. (1983). Caring: A labour of love. In J. Finch & D. Groves (Eds), *A Labour of Love: Women, Work and Caring* (pp. 13–30). Routledge & Kegan Paul.
- Graham, H. (1991). The concept of caring in feminist research: The case of domestic service. *Sociology*, 25(1), 61–78.
- Held, V. (2005). *The Ethics of Care: Personal, Political, and Global*. Oxford University Press.
- Hemerijck, A. (2013). *Changing Welfare States*. Oxford University Press.
- Hemerijck, A. (2017). *The Uses of Social Investment*. Oxford University Press.
- Hochschild, A. (2000). Global care chains and emotional surplus value. In A. Giddens & W. Hutton (Eds), *On the Edge: Living with Global Capitalism* (pp. 130–146). Vintage.
- Jamieson, A., & Illsley, R. (Eds). (1990). *Contrasting European Policies for the Care of Older People*. Avebury.
- Knijn, T., & Kremer, M. (1997). Gender and the caring dimension of welfare states: Towards inclusive citizenship. *Social Politics*, 4(3), 328–361.
- Kröger, T. (2011). Defamilisation, dedomestication and care policy: Comparing child-care services provisions of welfare states. *International Journal of Sociology and Social Policy*, 31(7/8), 424–440.
- Leitner, S. (2003). Varieties of familialism: The caring function of the family in comparative perspective. *European Societies*, 5(4), 353–375.
- León, M. (Ed.). (2014). *The Transformation of Care in European Societies*. Palgrave.
- Lewis, J. (1992). Gender and the development of welfare regimes. *Journal of European Social Policy*, 2(3), 159–173.
- Lewis, J. (2001). The decline of the male breadwinner model: Implications for work and care. *Social Politics*, 8(2), 152–169.
- Lister, R. (1994). ‘She has other duties’: Women, citizenship and social security. In S. Baldwin & J. Falkingham (Eds), *Social Security and Social Change: New Challenges to the Beveridge Model* (pp. 31–44). Harvester Wheatsheaf.
- Lutz, H. (2018). Care migration: The connectivity between care chains, care circulation and transnational social inequality. *Current Sociology*, 66(4), 577–589.
- Mahon, R. (2018). Through a fractured gaze: The OECD, the World Bank and transnational care chains. *Current Sociology*, 4(2), 562–576.
- Mathieu, S. (2016). From the defamilialization to the ‘demotherization’ of care work. *Social Politics*, 23(4), 576–591.
- Michel, S., & Peng, I. (2017). *Gender, Migration and the Work of Care*. Palgrave Macmillan.
- Morel, N., Palme, J., & Palier, B. (Eds). (2012). *Towards a Social Investment Welfare State? Ideas, Policies and Challenges*. Policy Press.
- Morgan, K. (2013). Path shifting of the welfare state: Electoral competition and the expansion of work-family policy in Western Europe. *World Politics*, 65(1), 73–115.
- Nussbaum, M. (2003). Capabilities as fundamental entitlements: Sen and social justice. *Feminist Economics*, 9(2–3), 33–59.
- OECD. (2004). *Long-Term Care Policies for Older People*. OECD.
- Orloff, A. S. (1993). Gender and the social rights of citizenship: The comparative analysis of gender relations and welfare states. *American Sociological Review*, 58(3), 303–328.

- Orton, M. (2011). Flourishing lives: The capabilities approach as a framework for new thinking about employment, work and welfare in the 21st century. *Work, Employment and Society*, 25(2), 352–360.
- Palier, B., Häusermann, S., & Garitzmann, J. (forthcoming). *The World Politics of Social Investment*. Oxford University Press.
- Parreñas, R. (2001). *Servants of Globalization: Women, Migration and Domestic Work*. Stanford University Press.
- Peng, I. (2019). *The Care Economy: A New Research Framework* (Sciences Po LIEPP Working Paper no 89). Sciences Po.
- Pirhonen, J. (2014). Dignity and the capabilities approach in long-term care for older people. *Nursing Philosophy*, 16(1), 29–39.
- Ranci, C., & Pavolini, E. (Eds). (2013). *Reforms in Long-Term Care Policies in Europe*. Springer Verlag.
- Sainsbury, E. (1977). *The Personal Social Services*. Pitman.
- Saraceno, C., & Keck, W. (2010). Can we identify intergenerational policy regimes in Europe? *European Societies*, 12(5), 675–696.
- Spasova, S., Baeten, R., Costa, S., Ghailani, D., Peña-Casas, R., & Vanhercke, B. (2018). *Challenges of Long-Term Care in Europe: A Study of National Policies 2018*. European Commission.
- Stiglitz, J., Sen, A., & Fitoussi, J. P. (2010). *Mis-measuring Our Life: Why GDP Doesn't Add Up*. The New Press.
- Thomas, C. (1993). Deconstructing concepts of care. *Sociology*, 27(4), 649–669.
- Tronto, J. C. (1993). *Moral Boundaries: A Political Argument for an Ethic of Care*. Routledge.
- Tronto, J. C. (1998). An ethic of care. *Generations Journal of the American Society on Aging*, 22(3), 15–20.
- Tronto, J. C. (2015). *Who Cares? How to Reshape a Democratic Politics*. Cornell Selects.
- Waring, M. (1988). *If Women Counted: A New Feminist Economics*. Harper Collins.
- Williams F. (2012). Converging variations in migrant care work in Europe. *Journal of European Social Policy*, 22(4), 363–376.
- Yeates, N. (2011). Going global: The transnationalization of care. *Development and Change*, 42(4), 1109–1130.
- Yerkes, A., & Javornik, J. (2018). Creating capabilities: Childcare policies in comparative perspective. *Journal of European Social Policy*, 29(4), 529–544.