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**Cox, R.**

*Some problems and possibilities of caring*

Ethics, Place & Environment 13(2), pp. 113-130  
(2010)

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Citation for this version:

**Cox, R.**

*Some problems and possibilities of caring*

London: *Birkbeck ePrints*. Available at: <http://eprints.bbk.ac.uk/2842>

Citation for publisher's version:

**Cox, R.**

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Ethics, Place & Environment 13 (2), pp. 113-130 (2010)

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## Some problems and possibilities of caring

### Introduction

Writing on care highlights that caring is full of both problems and possibilities. Caring for others can be a source of pleasure and fulfillment, but it can also be undervalued and denied, a source of degradation and exploitation. Care not only exists within intimate relationships but is also located within global-scale hierarchies of gender, class and race/ethnicity. Care can be problematic for those who need it, who give it and who arrange care for others, but it can also be the most precious thing in the world to them. As Fiona Williams writes, 'care is not only personal; it is an issue of public and political concern whose social dynamics operate at local, national and transnational levels' (2001 p487). Care is political both in terms of its current organization, which can support and enhance inequalities, and in terms of the possibilities it offers to counter dominant discourses of individualism, independence and competition. An ethic of care offers a way to foreground the connections, rather than the differences between people; to question the ways that different groups are valued. A focus on care reveals mechanisms which enable unequal access to resources and the vicious circles that perpetuate such inequalities.

There has been a recent burgeoning of writing on care within the geographical literature and this paper looks at two examples of 'caring' in paid domestic labour and 'ethical' consumption practices, particularly food production/consumption, to examine the possibilities and problems that conceptualizations of care present. Within the literature on food and consumption care appears to be a positive force, offering opportunities for progressive political, economic and environmental actions, linking people across the world to each other and to the natural environment (see for example, Goodman 2004, Popke 2006 and Kneafey et al 2008). Ideas from the literature on care ethics have been readily adopted by writers on alternative consumption and have proven useful in elucidating 'ethical' consumption/production. Discussions of consumption behavior have also suggested ways that people can 'care at a distance,' and so have contributed to this important question in debates on what an ethic of care would be like in practice. It is not only the case that researchers have used theorizations of care to enrich their understandings, but also, this work offers empirical examples of people acting with care in diverse and positive ways. In contrast, the example of paid domestic labour shows care to be both problematic and painful. The optimistic, radical political possibilities offered by some writers on care ethics seem to be a very long way from the lived experience domestic workers have of caring as employment and a set of moral economic relationships. An examination of paid domestic labour suggests that nearness does not necessarily make employers caring about their workers, but rather the low status of care work and care workers produces a vicious circle (Tronto 2006) where privilege enables employers to disregard the care that sustains them and their families whilst still taking advantage of its benefits. At the same time, the complicating issue of gender roles and identities means that not 'doing' care can be a deeply uncomfortable and ambivalent experience for female employers. Whilst the particular situation of paid care workers has been attended to by theorists writing on care ethics, empirical studies of paid domestic

employment from disciplines such as geography and sociology have not reached out to this literature to the same extent as studies of food consumption do. Discussions of care that are offered by the literature on care ethics would appear to be highly relevant to empirical research on paid domestic labour but to date have had little purchase<sup>1</sup>.

The paper arises as a result of my perplexity as to why ‘care’ appeared to be so different in these two areas I was researching and is my attempt to understand the different effects (and affects) care has<sup>2</sup>. My understanding comes from uncoiling literature on the ethic of care, particularly work by Joan Tronto, to see the roots that it has in analyses of the unequal distribution of care today. I argue that literature on the ethic of care has purchase and explanatory power in both situations I discuss. Examination of the organization of care (both care giving and receiving) reveals structural inequalities and so suggests alternatives to them that could be realized if care were more broadly defined and acted on. Food provision and childcare are fruitful ground for such an exploration because of their routine, quotidian characteristics. Both are things (a service or product) that are chosen and consumed on a daily basis. People involved in these forms of consumption, therefore, have to consider – or not consider – the relationships and hierarchies entangled in their choices over and over again. In addition, while both food and childcare are consumed within domestic spaces they are linked to global networks and so expose the complexities of care over distance and for ethnic/racial ‘others’.

The paper begins with a brief outline of how care ethics have been conceptualized in the literature and highlights the political potential of an ethic of care. It then goes on to look at the example of food production/ consumption to illustrate how some of these ideas have been applied to understand the behavior of consumers (and some food producers). In the next section I turn to think about the problematic nature of caring, a side which is most clearly manifest in the undervaluing of care work, both paid and unpaid. I look at the example of childcare within paid domestic employment and examine the way that the care that parents feel for children who are left with paid workers, and the care that those workers can feel for their charges, can create fraught relations between paid domestic workers and their employers, relations which are not just interpersonal but are also part of global scale hierarchies of gender, race/ethnicity and class. Here I use Tronto’s (2006) concept of ‘vicious circles of privatized care’ to understand the causes and implications of the undervaluing of childcare and its organization. I argue that comparison of these two very different experiences of care reveals the importance of adopting a broad definition of care and of understanding care as structured by social inequalities. The literature on care ethics, by offering such a definition of care (see for example Fisher and

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<sup>1</sup> I would like to thank an anonymous referee for prompting me to clarify this distinction in the way care ethics have been written about with reference to paid domestic work.

<sup>2</sup> I have been researching paid domestic employment in the UK for more than a decade and have been particularly interested in the interplay of gender, race/ethnicity and migration regimes, with the content of the work – tasks that are denigrated and appear to denigrate those who do them. This work has been supported in part by a Nuffield Foundation Social Science Small Grant SGS 00466/C (see Cox 2006). My work on food production/consumption is part of an AHRC/ ESRC funded project within the Cultures of Consumption programme (Ref RES-143-25-0005) with colleagues we worked with both producers and consumers involved in small scale food schemes that allowed direct contact between producers and consumers.

Tronto 1990), reveals the real work of care and allows care givers and receivers to be acknowledged. Studies show that for some consumers and producers within Alternative Food Networks, care is broadly imagined, can be an element of environmental and community concern and important within relationships beyond the immediate family or friends. In contrast, imaginings of care within households that employ paid domestic workers mirror the relationships of the private family, 'care' is too often understood only as a small range of acts which are themselves already denigrated and the value of the care that is given and received can easily be overlooked. Second, and closely related to this, care within paid domestic employment is located within, and organized by, unequal social structures which means that caring work will often reproduce the inequalities that actually create the demand for it. By looking at these different understandings of what 'care' can be and how it is acknowledged I suggest that we can begin to imagine what a more caring future economy could be like.

Some political possibilities of caring

Within geography a wide-ranging debate around care has emerged in recent years. While this is built on a history of research into the work of care, both paid and unpaid and in a range of settings (see for example themed section edited by Staeheli and Brown, 2003), recent debates have also included discussion of the ethic of care and the ontological status of care has been bound up with issues of ethics, morality, responsibility and social justice. Care and the spatiality of care have emerged as ethical issues of broad interest within the discipline (Popke 2006, Milligan *et al* 2007).

Much of this recent writing on care and its importance to structuring relations between people, objects and the environment has drawn on the concept of the 'feminist ethic of care'. This has its origins in Carol Gilligan's (1982) work on the development of moral reasoning in children and adults. Gilligan claimed that women adopted an ethic of care based on relatedness and responsiveness to the needs of others (see also Larrabee 1993).

Gilligan's work has spawned debates in a range of disciplines far beyond child development and philosophy (see Larrabee 1993). Within these debates Joan Tronto (1993, 2006, Fisher and Tronto 1990) has written extensively on the ethic of care and the role of care in society. She argues that if we think about care as something more than just the work that supports vulnerable others, then care can be used as a basis for re-thinking the moral boundaries which currently preserve inequalities of power and privilege whilst 'degrading "others" who currently do the caring work in our society' (1993: 101, see also Tronto 2006). In order to think differently about care it needs to be understood as something which involves everyone. Fisher and Tronto (1990: 4) define 'caring' as:

'a species activity that includes *everything that we do to maintain, continue, and repair our 'world' so that we can live in it as well as possible*. That world includes our bodies, our selves and our environment, all of which we seek to interweave in a complex, life-sustaining web' (emphasis in original).

As Lawson (2007 p3) puts it ‘care ethics begins with a social ontology of connection: foregrounding social relationships of mutuality and trust (rather than dependence). Care ethics understands all social relations as contextual, partial attentive and responsible’. Tronto (1993) is careful to point out that, although the range of care is broad, not all human activity can be characterized as ‘care’. Care involves making the concerns and needs of others (and not necessarily, or only, human others) a basis for action, it therefore has political implications and offers a challenge to dominant thinking which favours individualism, competition and environmental degradation (Mann 2002).

This definition of caring as a ‘species activity’ is broad and it moves us away from thinking about ‘care work’ as such, to focus on the activities of all people and the care that is done for everyone (and everything) and how that is unequally distributed. Tronto (2006) suggests that if we recognise four phases of care: to care about, to care for, to give care and to receive care, we can more readily see the care that all of us are dependent upon. Both Lawson (2007) and Tronto (2006) argue that ‘care’ must be understood as something that everyone is and can be involved in, and that everyone needs. By recognizing that we are all recipients of ‘care’, we expose and begin to appreciate our interdependence and reject notions of care that situate it in the private family or intimate relationships alone. Rather, care is a social responsibility and should be recognized as such. Care, then, is not merely disposition but must be understood as *practice* (Tronto 2006; Lawson 2007). A focus on care thus constructed then forces us to think about real needs and to consider how these needs should be met. That in turn, as Tronto (2006) highlights, prompts deeply political questions about what / who is valued in society and the way that resources or services are distributed (see for example Staeheli and Brown 2003, Williams 2001).

Some of the most appealing of the emerging literature within geography engages with the political possibilities of care ethics, arguing that a disposition towards care could undermine the competitiveness and individualizing processes of neoliberalism and draw attention to the interdependence that shapes all our lives (see for example McDowell 2004, Jarvis 2007, Lawson 2007). Victoria Lawson (2007) argues that caring has come to the fore in recent academic debates because of societal shifts that have extended market relations into the caring realms of our lives. Increasingly relationships and activities that were imagined to be beyond the market have become subject to the discipline of neoliberalism and these changes have gone hand in hand with discourses of increased personal (rather than public) responsibility for many areas of life. As a result new geographies of inequality have arisen that ‘reflect the changing realities of who has access to care and who does care work’ (2007 p2). The increase in academic interest in care, ethics and responsibility has produced work which puts an ethic of care at its centre and offers optimistic and radical possibilities for future forms of politics.

### Care and the alternative food system

One of the areas in which these ideas have been most effectively applied is in discussions of consumption in general and food production/consumption more specifically. As

Popke (2006) has commented in his review of care ethics, there is now a burgeoning literature on ethical trade and issues of consumption. While this work has not been exclusively about food consumption, nor has it been entirely uncritical of care ethics, discussions of food production/consumption have been particularly productive in showing care to exist beyond the private home and intimate relations, making links between care ethics, the natural environment and non-human others, as well as thinking about caring relations with distant and unknown humans.

One of the debates surrounding the ethic of care and its desirability has been about the extent to which it is possible to care for distant and/or unknown others. Some proponents of a feminist ethic of care saw its particularity and basis in face-to-face personal relationships as both necessary and as strengths of the position (Smith 1998). Tronto (1987) however, has highlighted the fact that while there are some things and people that we care more about than others – normally those that are physically, emotionally and culturally closer to us, an ethic of care could become a justification for any set of conventional relationships that include some people and things while excluding others. David Smith (1998) has discussed this question in detail asking ‘how far can we care?’ and concluding:

Only if ‘we’, in the privileged parts of the world, can empathize with less fortunate others elsewhere, and strongly enough to motivate much more equal provision of the means of caring, will something like a universal ethic of care have any chance of challenging the combination of ethical hedonism and resurgent parochial self interest into which much of the world appears to be sinking. No less than an overarching conception of the good incorporating care for others is required, and this will need all the emotion as well as the reason that can be mustered in its support.

Thus, an ability to care in universal, rather than particular, ways is not just desirable but also necessary for the success of any political challenge that care ethics may make to neoliberal self-interest (Mann 2002, see also Barnett 2005 for discussion of the ethics of deciding ‘how far’ to care).

Consumption is an arena in which it has been suggested people can care for others - both close and distant - and it is, therefore, an important arena in which to examine ‘how far’ people can and do care. At the simplest level, the act of carefully seeking out and selecting goods for other people is often an act of love (Miller 2001) and movements in ethical consumption, such as fair trade, can demonstrate the ability of consumers to think about the lives of people from whom they are emotionally and physically removed but related through goods which are produced and consumed (Goodman 2004, Popke 2006). Thus consumption behavior shows that caring can go beyond the local. It demonstrates with immediacy the ‘radical intertwining of our lives with those of distant strangers.’ (Corbridge 1993 p463 quoted in Lawson p6; Smith 1998).

It is often through food production/consumption practices in particular that people can be characterized as acting with an ethic of care and a politics of responsibility. ‘Ethical’ trade initiatives (including fair trade) claim to take the needs and lives of distant others in to account and to allow consumers to understand themselves as connected to those distant

others through the food that flows between them and the emotions it invokes (see for example, Goodman 2004 and Popke 2006 for an overview). In addition food production connects with the natural environment and animal welfare issues allowing consumers and producers to think about, and care for, non-human others and the natural environment as well as about unknown, and perhaps distant humans (Kneafsey et al 2008).

Claims surrounding the caring nature of ‘ethical’ consumption and questions about the possibility of caring at a distance are illustrated by the literature on alternative food systems. These are loosely defined as schemes, projects or enterprises that exist outside the mainstream agri-industrial food complex often with goals other than profit maximization and allowing some kind of connection or contact between food growers and eaters. They include allotment clubs, farmers’ markets, Community Supported Agriculture schemes, direct sell internet schemes and some publicly funded initiatives to reduce food poverty and increase healthy eating amongst others (see for example, Maye et al 2007; Feagan 2008; Kneafsey et al 2008).

In work with colleagues (see Cox *et al* 2007 and Kneafsey *et al* 2008), we have identified care as important within a range of alternative food schemes, both as a source of happiness and fulfillment – for growers and eaters – and as providing support for what can be quite marginal enterprises. Participants in these schemes displayed care for their families, communities, natural environment (both in general and its particular local expressions) and for unknown others to whom they felt connected through their food. Producers were able to comment on the importance of connection with consumers and the way this then linked to care for the local community and environment. One organic box scheme producer commented:

*When you are on your own a lot, and working with the boxes you don’t actually get to see anyone that you don’t already see everyday like family, so you end up grovelling around in the mud and you think ‘well why am I doing this?’ And it’s not until you go off the farm and speak to people, and they say ‘thanks’ that you get real meaning, it gives you a sense of satisfaction. Positive feedback gives you the strength to go on.*

In return he knew that his customers cared about the success of his business and their local and wider environment, when asked why people stayed with the box scheme he commented:

*I think actually when they put it down on paper, what they tell me is it’s because it’s local, whenever possible it’s ours and it’s fresh, so it cuts down on food miles, yeah and it’s the localness and I suppose yeah, the fact they’re helping someone local. So it’s food miles and local really.*

These comments suggest both a reciprocity of care between grower and eater and the ways that simple acts like food consumption can be situated within frameworks of care for a wider world. Wells and Gradwell (2001) have characterized Community Supported Agriculture, one form of Alternative Food Network, as ‘caring-practice’ in terms of the treatment of the natural environment, resources, other growers and shareholder members

and this can be true also of other methods of food production. Similarly, in his discussion of organic growers in the US Midwest, Stock (2007) draws attention to the notion of stewardship, in the sense of caring for the land and thus for the people affected by its health. The farmers he worked with demonstrated an 'inherent understanding of their role as protecting and ensuring the health of human beings, including family members, community customers and, in a larger, global sense, the world, by trying to work towards the education of new farmers and customers' (Stock 2007 p95). Their work in caring for the soil can be seen as a moral act, in that their practices are attempts to remake what they see as a 'flawed system' based on instability and injustice.

Research on food production/consumption gives positive illustrations of ideas from care ethics which contrast starkly with the example of private domestic childcare that I explore below. First, it confirms that caring can go beyond intimate relations and include unknown and non-human others as well as the natural environment. This work suggests that (some) people choose to think deeply about others and other landscapes/environments to whom they are connected and to act in a caring way towards others whether they are known to them or not. Second, the literature portrays care within food production/consumption as a positive force, something which is broadly understood and which links people across the world with each other and with the natural environment. Third, these links offer opportunities to challenge the ideals of the hegemonic economic system. This portrayal suggests that it is not only possible to act and to organize economic activity on the basis of care ethics, but also that this is taking place and providing fulfillment to those involved.

In contrast to this I now move to look at an example of an activity which shows a much more problematic face of care. An examination of paid childcare reveals that when work identified as 'care' is considered we find disregard for known and nearby others; negative cycles that reinforce inequalities rather than positive challenges to individualism and systems which exploit the love and labour of the least advantaged rather than offering fulfillment to all.

#### Some problems of caring in paid domestic employment

The problems of caring that arise in an examination of paid domestic work are a result of its place in entrenched global scale hierarchies and in the provision of highly privatized forms of care. Paid domestic work in general and private domestic childcare in particular, is becoming increasingly common phenomena in the UK and other Western economies (See Cox 2006, Lutz 2008, Zimmerman et al 2006 for examples). Publicly funded childcare in communal facilities is now often replaced by private care in an employer's home, provided by a nanny, au pair or housekeeper. Workers providing this care are often migrants, disadvantaged in terms of race/ethnicity, citizenship, gender and class. Privatized childcare, therefore, exists as an arrangement and interaction between people who are positioned quite differently within these global hierarchies. Together, the existence of these hierarchies combined with highly privatized forms of care, exacerbate inequalities, distribute care unequally between people with different resources and



different statuses and allow the most privileged to experience 'privileged irresponsibility' whilst ignoring the needs of care workers (Tronto 2002).

Care work is structured along the lines of class, gender and ethnic/racial privilege, with those who are relatively privileged receiving care from those who are less so. Early feminist work on caring in the home consistently showed the importance of care activities to the production of gender inequalities. When paid forms of care are considered the organization and distribution of care can clearly be seen to be structured by race/ethnicity and class as well as gender (Graham 1991). As Tronto (1993) argues the question of who cares for whom marks the intersections of gender, 'race' and class in the relations of power in our society. These power relations of care can be seen in inequalities at many scales and nowhere are they more clearly displayed than in the organization of paid domestic labour. At the global scale these inequalities feed the migration of many hundreds of thousands of domestic workers who move from poorer to richer countries each year (see below). At the household and interpersonal scale they are manifest in the relations between paid carers and their employers.

Paid domestic labour involves the employment of individuals, normally but not exclusively women, to carry out domestic work within the home. This can be for pay in the form of wages or for other forms of remuneration, such as board and lodging (see Anderson 2000). The tasks that domestic workers do could all be described as 'care': cooking, cleaning, shopping, looking after children, nursing elderly family members or generally organizing household activities. And, whilst there are specific differences in the form these activities take in different parts of the world, the vast majority of domestic workers carry out work that is considered unskilled and is commonly carried out unpaid by household members (again, normally women) in poorer homes.

Whilst all the tasks that domestic workers do constitute care for their employers, I am going to concentrate here on examining childcare. This is both because childcare is a very important part of many domestic workers' duties and because of the particular difficulties it appears to entail. Within the literature on paid domestic work childcare emerges as highly problematic in both practical and emotional terms and at interpersonal and international scales. Empirical studies of privatized childcare do not grapple with the political potential of the ethic of care, nor do they celebrate optimistically the possibilities of a world (or an academy) more closely focused on care, as some of those in alternative food research seems to. Rather, this literature reveals the intense personal and political problems of caring. Whereas some work on care in institutional settings has used the notion of care ethics to critique moves such as welfare reform (Popke 2006) this approach has been absent from empirical studies of paid domestic labour. Yet the understanding of care that is outlined in the care ethics literature, in Joan Tronto's work in particular, is useful in understanding the nature of care in paid domestic work.

#### Caring for other people's children

Much of the literature on paid domestic labour has focused on the relations between paid childcarers, their employers and the children that they care for. This literature reveals the many problems that arise within these relationships, and how uncaring they can be.

The contradictions and tensions involved in paying for domestic labour are most clearly apparent when the function of that labour includes care. The political fiction of labour power is strained to breaking point – can one pay a care worker for her labour power and be unconcerned with whether she is a “caring person”? Can one pay a person to “be” caring? Can money really buy love? (Anderson 2006 p228)

And, if it can, how much does it cost? As one mother put it, ‘You want someone who puts the children before herself, but to find someone for the right amount of money is not so easy’ (Rubenstein 1993, quoted in Tronto 2006 note 9). It could be argued that care is *the* point of friction in paid domestic work: the love of parents for their children leads to anxiety, frustration and guilt which in turn can result in unreasonable and exploitative behavior towards carers. Added to this the love migrant domestic workers feel for their own children, and the care they want to provide for them, both drives and frustrates their migration projects, becoming an element in their relationship with employers and the children they are paid to care for.

The particular relations that exist between individual domestic workers and their employers are structured by some of the most profound forces in our society. Gendered ideologies within society cast childcare as women’s work and particularly the work of mothers. Mothers who chose not to do this work (for whatever reason) are often subject to profound feelings of guilt (that they are not ‘proper’ mothers) as well as feelings of anxiety about the welfare of their children while they are cared for by others - feelings which are fed by the social assumptions that mothers are the most appropriate and safest carers, as well as by a lack of government regulation of the private childcare sector in some countries (see Uttal 2006) - and frustrations at their inability to balance home and paid work both practically and emotionally. As Uttal (2006 p223) puts it ‘ the organization of work, regulatory neglect, and mothering ideologies, create a volatile mixture – one whose only predictable outcome is confusion, worry, and doubt for individual parents.’

This guilt, anxiety, confusion and frustration can be intense and this is the ground on which the relationship with the paid domestic worker is built. These emotions are particularly strong, not because they are produced by individual desires or interests but because they are produced by social forces. They carry the weight of gender inequality in society as a whole, not just the organization of tasks within a single family. The domestic worker is employed to solve this impossible conundrum whilst being herself a product of it and often experiencing frustrations and anxieties about the care of her own children. The result, unsurprisingly perhaps, is that relations between domestic workers and female employers can be fraught, complex and ambivalent (see for example Pratt 2003, 2004). As Cheever (2003 p37) states:

We love our children passionately, and for me, at least, leaving them – for a week, or even for a day - is the hardest thing I’ve ever had to do. That makes the person who takes care of them in my absence both indispensable and somehow an agent of separation and doom – much more than a simple employee.

Gregson and Lowe (1994) argued that amongst their sample of dual-earning nanny employers it was common for mothers to create relations of 'fictive kin' with nannies. Nannies were talked about by employers as 'daughters', 'sisters' and, in one case, as a 'wife'. These relations were a result of the deep gratitude employers felt towards their nannies for enabling them to negotiate the demands of combining paid work and parenthood. Other studies suggest, however, that the ambivalence employers feel may manifest itself in hostile behavior towards domestic workers (such as jealousy and anger), particularly if the domestic worker develops a close relationship with a child who is being cared for.

#### Loving other people's children

For a number of reasons outlined below, care workers develop emotional attachment to the children they care for. This attachment, which is in part a result of the work that they are doing and the conditions in which they are doing it, can cause parents to feel jealous and to act to reduce the attachment that the care worker and child feel for each other, or to take advantage of the worker's feelings to increase workload. Employers may want domestic workers to care for children as if they were their own, but they do not want those workers to feel as if the children were their own or for their children to love their carers too much. This situation is complicated further when the care workers have left their own children to take on work caring for other families.

Anderson (2000) has argued that care as emotion and care as labour are difficult to separate and paid childcarers are rarely able to distinguish between the work that they do caring for someone and an emotional attachment to them. It is not only the case that acts express our care for people but also that labour may engender care, particularly when care for children is involved. It is through the daily routine actions of caring for a child that a relationship develops.

It is not uncommon for domestic workers to grow to love the children they care for deeply and many studies of paid domestic workers report this emotional element of their work (see for example, Anderson 2000, Hondagneu-Sotelo 2001, Hochschild 2003, Parrenas 2006). For some domestic workers being able to care for charges is the saving grace of the job, giving them an emotional commitment and interest that makes the work something more than drudgery. However, emotional attachment is also reported as a problem, a source of pain for workers and a site of potential conflict with employers (Cheever 2003). Anderson (2000) reports that experienced domestic workers may refuse to work as child carers or may deliberately limit the time they spend with each family so that they do not become too attached to those they are caring for. The reasons for doing this can be painful to learn:

I cared for a baby his first year ... he loves you as a mother, but the mother was jealous and I was sent away. I was so depressed then, seriously depressed. All I wanted was to go back and see him.... I will never care for a baby again, it hurts too much. (Julliette from Côte d'Ivoire, working in Parma, quoted in Anderson 2000 p119)

In this case the care worker was separated from her charge because the mother was jealous of their closeness, and this has been reported by other studies of paid domestic work (see for example, Cheever 2003).

The converse of this is that parents can recognise the commitment that workers will have to children to whom they have an emotional attachment and use this as leverage. Nannies posting comments to the web site 'isawournanny.blogspot.com' show that the pain of leaving a child that you have been caring for can be intense and will be avoided even if working conditions are bad:

*I drew the line when I was reprimanded for folding her husband's boxers the "wrong" way. The part of walking away isn't easy at all... there's rent, car payments, bills to cover. Not to mention the pure heartache for those who truly love our charges... Not a day goes by that I don't think of her [the child she was caring for].... Sometimes we deal with the crap to not deal with the heartache (Anonymous, isawournanny.blogspot.com, January 14, 2008, quoted in Baker 2008 p 9).*

Another nanny joining in the same on-line debate added.

*[Original poster] probably loves the little baby she takes care of and it's hard to leave. I hated starting with new families, having to earn trust, getting past all the weird stuff in the beginning. I guess what I am trying to say is that once you fall in love with their child its hard to leave, and they know it and take advantage of you. (Anonymous, isawournanny.blogspot.com January 16, 2008, quoted in Baker 2008 p 9)*

These quotes suggest that employers can rely on the strong feelings that can develop for cared for children and therefore pay less heed to the pay, working conditions and treatment of domestic workers they employ. Rather than needing to ensure that domestic workers are happy and so will stay with them, employers depend on the emotional content of care work to keep domestic workers if they want to. The result for the workers is lower pay and poorer working conditions if they stay or intense pain if they do decide to change jobs to improve their position, a clear example of Lawson's (2007) claim that emotional connections are sites of power that themselves create social relations.

The attachment that domestic workers feel towards the children that they are paid to care for can be even more powerful if they have left their own children many thousands of miles away in their home countries. Many women in poor countries see their best chance of caring for their own children and improving their future opportunities to be in leaving them to be looked after by others while they migrate to carry out care and domestic work for families in richer places. Sri Lanka and the Philippines are the most important sending countries in numerical terms, but domestic workers also travel from Africa, South and Central America to work in Europe, North America, the Middle East and Far East, as well as in relatively wealthy urban areas closer to their own homes (see for example Momsen 1999, Anderson 2000, Chang 2000, Parrenas 2001, Ehrenreich and Hochschild 2003, Pratt 2004, Zimmerman, Litt and Bose 2006).

While some women who are separated from their own children avoid taking jobs which involve childcare, others will deliberately focus their attention on their charges and ‘pour their love’ (Parrenas 2006 p59) into them in an attempt to fill the gap made by their longing for their own children (See also Hondagneu-Sotelo 2001, Hochschild 2003). As one of Parrenas’s interviewees explained (2006 p59):

The only thing you can do is give all your love to the child. In my absence from my children, the most I could do with my situation is give all my love to that child.

And Hochschild (2003 p23) reports a domestic worker as saying ‘I give [employer’s child] what I can’t give my children.’ Parrenas’s interviewees also reported that providing the best love and care for the children they are paid to look after could help ameliorate the guilt they feel at leaving their own children and soothe the pain of separation. However, this dedication to their charges may also include an element of resistance, resulting from the class and race/ethnicity inequalities that are bound up in the intimate relations between migrant domestic workers and employing families. Hondagneu-Sotelo (2001 p40) suggests that domestic workers can indulge in the rhetoric of ‘comparative mothering’ as an outlet for ‘seething class resentments’. They may portray their care and attitudes as superior in contrast to the substandard mothering provided by their multiply privileged employers.

Hochschild (2003) has characterized this flow of care, from Third World women to their charges in rich, First World households, as a form of resource exploitation, similar to the extraction of natural resources that took place under European colonialism. She writes (2003 p27):

Today’s north does not extract love from the south by force: there are no colonial officers in tan helmets, no invading armies, no ships bearing arms sailing off to the colonies. Instead we see the benign scene of Third World women pushing baby care carriages, elder care workers patiently walking, arms linked, with elderly clients on streets or sitting beside them in First World parks. Today, coercion operates differently. [...] in the main the new emotional imperialism does not issue from the barrel of a gun. Women choose to migrate for domestic work. But they choose it because economic pressures all but coerce them to.

She uses the idea of a ‘care chain’ to suggest that emotions as well as care workers are transferred from poor to rich countries leaving ‘care deficits’ behind them (Hochschild 2000, see also Zimmerman *et al* 2006b for a counter argument). This is perhaps an extreme example of Tronto’s (2006) argument that care is given by the poor and disadvantaged to the rich and privileged. As Lawson (2007 p5) comments, the marginalization of care is deeply political: ‘It bolsters our contemporary world order of privilege, which rests on (careless) unequal relations across the globe.’ The idea of ‘care chains’ or flows also relates strongly to Tronto’s notions of ‘vicious circles’ of care which enable the more privileged to access greater amounts of care and to use these to increase their own advantage (see also Tronto 2002). This is most clearly measurable in terms of childcare – better care can increase health, life expectancy, success at school and

lead to increased participation in Higher Education – but it is also true for adults who can increase the time they spend in status raising activities– paid work, networking – when they are freed from caring work. When domestic workers migrate over thousands of miles to provide care for families in the North these vicious circles reinforce privilege at a global scale.

#### Care, care ethics and power relations

In circumstances as painful as those described above it is hardly surprising that the literature on paid domestic work does not present care as a site of possibilities. Rather once paid care takes place ‘spaces of the home [...] become fraught sites of gendered power and interdependence.’ (Lawson 2007 p3, see also Milligan *et al* 2007). However, the literature on care ethics can aid understanding of the organization of paid domestic work and allow us to see the political nature of care work. As Lawson (2007) has argued we need to take seriously the ways that social relations are produced through emotion and the ways in which emotional connections are also sites of power. Caring can involve flows of power when the carer exercises control over the cared for but, as Lawson admits, the cared for can also exercise control over carers and nowhere is this more clearly seen than when the cared for are privileged relative to their carers (see also Mann 2002). Parents desperate for solutions to ‘work life balance’ problems can turn their frustrations and feelings of guilt on the very people they employ to solve those problems with the full weight of their class, ethnicity and citizenship privileges.

Despite the political potential revealed by writing on the ethics of care, and the evidence of caring practice, as discussed in the example of food production/consumption above, commentators acknowledge the very real problems and inequalities that surround the distribution of care today. The political optimism of writing on care ethics is not inspired by the current state of affairs in care work (that is in activities both paid and unpaid that are traditionally defined as caring), but rather reflects on the low status of caring to understand how care is placed within society and how that position could be challenged. Much of the research on care work focuses on the marginalization of care givers, showing how caring activities are de-valued, underpaid and disproportionately carried out by the relatively powerless in society (Tronto 1993, 2006; McDowell 2004; Lawson 2007; Milligan *et al* 2007).

Care ethics can be helpful in understanding the fraught nature of care, not only because of the work that has been done to show why care work is undervalued but also because care ethics insist on ‘the centrality of social relations and emotions for understanding our world’ (Lawson 2007 p4). Social relations are produced through emotion. Researching care relations allows us to more deeply understand the operation of power and the production of inequality. Therefore, when thinking about domestic workers, a conceptualization of care based in power relations not only exposes why domestic workers can be treated so badly despite their important work, but also reveals where power lies in society by looking at how care relations are organized. As Tronto (1993) argues, analyses of care such as this expose the mechanisms by which ignorance of all the care being provided serves to prevent the relatively privileged from noticing the needs of others.

If it is defined too narrowly, i.e. as care for dependent children or other family members, a focus on care also risks reinforcing inequalities in two ways. First, it can emphasize women's traditional roles, thus weakening their standing in the public sphere. Second, it can result in vicious circles in which access (or lack of access) to care reinforces social and economic inequality. Graham (1991) has commented that feminist work on care too often focused on home based and unpaid care, thereby giving insights into the ways that gendered relations and gendered identities are constructed within families but overlooking the class and 'race' based inequalities that structure care work that is done for pay. Tronto (2006) would add to this that it is not just that we need to understand the full range of sites and types of care that take place, but also that we need to elucidate the very different resources available to different people to carry out care and the implications of these differences. She argues that inequalities in access to care produce measurable outcomes that affect people throughout their lives, maintaining the privilege of those with the greatest resources available to them. One way in which this happens is through the 'competitive caring' that is encouraged under individualized systems of care: 'In a competitive society what it means to care well for one's own children is to make sure they have a competitive edge against other children' (Tronto 2006 p10, see also Tronto 2002). When this competitive care is combined with the imbalances in the resources available to different people to accomplish care it becomes clear that individualized, family-based care perpetuates inequalities.

The low status of care means that, in general, caring is distributed along unequal lines. The most privileged do least and the most disadvantaged do most. Some individuals are able to gain what Tronto (2006) describes as 'privileged irresponsibility' (p11) to excuse themselves from basic caring responsibilities because they have 'more important' work to perform. The shape this privilege takes can be that it is not noticed, discussed or remarked upon, just assumed to be right. This can clearly be seen for the traditional male breadwinner, for whom Tronto (2006 p12) comments 'care work invisibly and efficiently performed was the privilege of his role.' His responsibilities to care were met by provision of a pay check and stopped there. Similarly, those able to pay others to perform caring may imagine that their caring responsibilities have been met and they can get on with 'more important' things. But, as Anderson (2000, p20) neatly puts it '[t]he very hiring of a domestic worker lowers the status of the work she does – the employer has better things to do with her time' (see also Cox 2006). Thus 'privileged irresponsibility' is both a cause and effect of the marginalization of care work.

## Conclusions

This paper has looked at two contrasting examples of care in the social science literature. It has outlined the radical political possibilities of an ethic of care and shown how these have been illustrated in discussions of alternative food provisioning to demonstrate that care can be an organizing principle for some consumption and production behavior and that care can reach beyond intimate relations and out to unknown and non-human others. In comparison, the organization of care work is revealed to be 'uncaring', based on

inequalities and riven by practices that ensure the most privileged receive the greatest amount of care whilst the low-status work of caring is pushed on to relatively disadvantaged groups. An examination of paid domestic employment – a form of paid care work that takes place in the intimate space of the employer’s home – illuminates the ways in which emotional relations and social relations intertwine. The relations between domestic workers and their employers are not just those of carers for the people they look after, sometimes with great love and thoughtfulness, they are also relations between people who are multiply disadvantaged - in terms of gender, class, ethnicity and citizenship - and people who are relatively privileged, in at least some of these hierarchies.

In examining these two examples I have tried to hold steady, and do justice to, two, seemingly contradictory visions of care. The care for others, the environment and the world as a whole that we are joyously urged towards in calls for a focus on care ethics, and the real, lived experience of caring as a job that is demeaned, denied and works to perpetuate the very inequalities that create it. But these are not such separate versions of care, rather they are part of a coherent whole; a whole within which care (for many different sorts of others as well as for our most beloved) is a source of personal pleasure and a political good, as is revealed in discussions of alternative food provisioning. Yet the work of care – activities that are identified, labeled or acknowledged as care – are too often marginalized, their importance denied. The discussion of Alternative Food Networks and the centrality of care to relationships (between producers, consumers and others) within them, perhaps suggests a way that care and respect can exist within economic relationships and between people whose interests may be seen as competing.

The current low status of caring activities and the need for an ethic of care within society are intimately related. The marginalization of caring is a reflection of ideologies which promote individualistic imaginings of the self and competitive relationships with others, denying our profound interdependence on other humans and the non-human world. By understanding how and why care is undervalued we can begin to reveal the true extent of caring that takes place. Tronto (2006) argues that rather than seeing care as something which is done for vulnerable ‘others’ we need to see ourselves as care receivers and to recognise the amount of care that supports all of us in our daily lives. This has the benefit of breaking down the ‘othering’ of those who are dependent on care and who can have the loathing of care givers (including those funding publicly subsidized care) projected on to them. ‘Until we recognize that we are “care receivers all” there can be no change in the ways that we think about care and no basic change in how care is undervalued’ (2006, p15-16). Bonnie Mann (2002) has extended such thinking to argue that our inability to recognize our dependence upon each other is reflected in an inability to acknowledge the extent of human dependence on the Earth and in attempts to seek tyranny over it. She writes ‘Our inability to care for one another in our intersubjective relations (and here my “we” extends beyond nations and cultures) constitutes a [...] moral failure – but here we do not simply fail each other, we fail one another *in relation* to our dependency on the planet’ (2002 p358 emphasis in the original). Thus recognition of caring relations and of interdependency is intertwined with care for the Earth as whole. If we accept that we are dependent on others we are better able to acknowledge our



collective dependence on the Earth, we are able to undercut ideologies of competitive caring and unsympathetic disregard for others (most broadly conceived) and this is what appears to be happening amongst the 'most caring' food schemes. Producers and consumers are able to see their actions, not only in relation to each other, but also as part of a wider natural and social whole. This brings to the fore the commonalities between people and reveals competition to be to the detriment of all.

To begin to work towards a world that recognizes these commonalities and interdependencies we need both a broadening of our understanding of what care entails and an understanding of care as located within and organized by hierarchical social structures, the comparison of care within alternative food provisioning and paid domestic labour highlights why these two elements are essential. First, a broad definition of care, as suggested by Fisher and Tronto (1990), enables the real work of care to be revealed and the givers and receivers to be acknowledged. Within Alternative Food Networks, care is situated in broad frameworks of environmental and community concern which reveal its importance in structuring relationships beyond the immediate family and also offer opportunities for connection and fulfillment. In contrast, care within paid domestic employment mirrors the relationships of the private family, 'care' is too often reduced to a small range of acts which are themselves already denigrated and the value of the care that is given and received can easily be overlooked. Second, and closely related to this, care within paid domestic labour can be clearly understood as located within, and organised by, unequal social structures which mean that caring work will often reproduce the inequalities which themselves create demand for it. Care within alternative food provisioning can be organized against these hierarchies, rather than within them, and can allow producers and consumers (or other groups) to identify the needs they have in common and their interdependence, rather than striving to compete. This is not to say that the world of Alternative Food Networks is entirely moral, or free from the ravages of capitalism, nor is it to imply that there is never a competitive element to caring choices of food – when parents select organics for their children's health, for example. Rather, the point is that the literature on 'ethical' food sourcing reveals that both consumers and producers can act with care, broadly defined, at least some of the time, and by doing so they offer a glimpse of how we might move towards a more caring economy.

By understanding the place of care within social inequalities, in structures of gender, class and race/ethnicity and as something quite antithetical to neoliberal emphases on personal responsibility and individual achievement (McDowell 2004, Jarvis 2007), we begin to address the invisibility and low status of care work. A move towards an ethic of care would indeed present a challenge to these structures, stopping the vicious circles of competitive caring that perpetuate social inequalities (Tronto 2006, Lawson 2007). And, it is also the case that challenges to these inequalities – fights against gender and ethnic divisions and class disparities, opposition to neoliberal agendas – are also possible routes towards a more caring world (Smith 1998, Hochschild 2003), routes which open up daily and offer myriad possibilities for caring.

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