The Adult Worker Model Family, Gender Equality and Care

The Search for New Policy Principles, and the Possibilities and Problems of a Capabilities Approach

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Acronyms

CA  capabilities approach
EC  European Commission
EES  European Employment Strategy
EU  European Union
OMC  Open Method of Coordination

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Summary

There is evidence that policy makers in most Western welfare states are moving away from a set of assumptions about the contributions that men and women make to families based on the notion of a “male breadwinner model family”, toward a new set of assumptions, based on an “adult worker model family”. The traditional male breadwinner model assumed that men would take primary responsibility for earning and women for caring. It did therefore make provision for care work, albeit at the price of women’s economic dependence on men. How care work is to be accommodated in the new model—in which all adults, whether male or female, parents or not, are assumed to enter full-time work—is a major issue.

In this paper, Jane Lewis and Susy Giullari begin by examining this shift in policy assumptions at the level of the European Union. Policy makers are increasingly assuming that the work of care will move to the formal, paid sector, in line with the more general shift in emphasis from “passive” to “active” welfare and the wish to promote women’s labour market participation. But policy makers’ assumptions are outrunning the pace of social change in many Western countries; for the most part, women are far from having achieved economic autonomy.

The authors go on to argue that there are real limits to the pursuit of a full adult worker model based on the commodification of care. Care work is often passive, involving, for example, the oversight of a child’s playtime. Furthermore, there is little sign of any reduction in the amount of informal care that is needed, or in the value that women in particular attach to providing it. But this raises difficult issues in respect of gender equality. In particular, it begs consideration of the terms and conditions on which the shift in policy assumptions toward the adult worker model is being made, and especially about the way in which care work is valued and shared.

The authors next consider the possibilities offered by the capabilities approach to address these issues. In their view, this offers a promising basis on which to address the issue of care—not least because gender equality is of central concern to both Amartya Sen and Martha Nussbaum, who have played the leading part in developing the approach. The key advantage of using the capabilities approach to address the problem of gender equality in relation to paid work and care is that it provides a universal equality model rooted in the recognition of human diversity.

The capabilities approach insists that individuals be in a position to make “real” or genuine choices, which in turn allows a strong case to be made for valuing care, such that it is made practically possible to choose it. In addition, the approach also has the potential to justify policies that promote the sharing of care between men and women. In other words, it is possible to justify state support for care work and to argue that it is impossible to have real freedom to choose care work unless care is given a monetary value.

But the kind of interdependence that care relationships involve is difficult to deal with in a capabilities framework. Furthermore, unequal power relations between men and women result in a distortion of that interdependence, such that the choices men make constrain those of women. Gender equality requires that care be shared at the household level, as well as between the collectivity and the individual. Indeed, sharing care work between men and women also increases the possibility of women choosing to engage in some form of political participation.

Thus Lewis and Giullari argue that care must be conceptualized as both a “legitimate” choice, which the capabilities approach helps to do, and as a necessary human activity, which in turn provides the basis for arguing that it must be shared between men and women. This is essential if women’s freedom to choose is to be equal to that of men. However, to “force” men to share care work runs counter to the moral qualities that have been identified as characterizing genuine care. Thus the authors argue that positive incentives for men to care must be built into the kinds of measures that are required to underpin the “real” choice to care: time to care, cash
for care, care services and the regulation of working hours. The authors recognize that the task of devising social policies that promote real choice for men and for women in respect of paid and unpaid work poses huge difficulties. But from the point of view of human flourishing and welfare, it is impossible to choose not to care or not to work.

At the time of writing in 2003, Jane Lewis was Barnett Professor of Social Policy, and Susy Giullari was British Academy Fellow, in the Department of Social Policy and Social Work, University of Oxford, United Kingdom. Ms. Lewis is now Professor of Social Policy at the London School of Economics and Political Science, and Ms. Giullari has left academia.

Résumé

Il semblerait à certains indices que, dans la plupart des Etats providence occidentaux, les responsables politiques sont en train d’abandonner les hypothèses liées à l’idée de “famille modèle de l’homme, soutien de famille”, avec ce qu’elles impliquent quant aux rôles respectifs des hommes et des femmes dans la famille, pour poser de nouvelles hypothèses, liées cette fois-ci à la “famille modèle de l’adulte actif”. Dans le modèle traditionnel de la famille, on partait de l’hypothèse qu’il incombait essentiellement aux hommes de gagner de l’argent et aux femmes de prendre soin des membres de la famille. Les soins à dispenser étaient donc pris en compte, bien qu’au prix de la dépendance économique des femmes par rapport aux hommes. Comment faire entrer les soins dans le nouveau modèle, dans lequel tous les adultes, hommes et femmes, parents ou non, sont censés travailler à plein temps? Le problème est de taille.

Dans cet essai, Jane Lewis et Susy Giullari commencent par examiner ce changement d’hypothèses politiques au niveau de l’Union européenne. Animés par le désir d’encourager les femmes à entrer dans la vie active, les responsables politiques partent de plus en plus de l’idée que le travail des soins incombe au secteur organisé et rémunéré et suivent en cela l’évolution générale de l’aide sociale “passive” à l’aide sociale “active”. Pourtant, dans de nombreux pays occidentaux, le rythme du changement social est plus lent qu’ils ne l’imaginent en posant leurs hypothèses. Les femmes, dans leur grande majorité, sont encore loin de l’autonomie économique.

Les auteurs font valoir que la concrétisation du modèle de l’adulte actif, qui s’appuie sur la marchandisation des soins, se heurte à des limites bien réelles. Les activités de soins sont souvent passives, par exemple lorsqu’il s’agit de surveiller les jeux des enfants. De plus, rien n’indique que la quantité de soins informels nécessaires soit en baisse ou que la valeur que les femmes attachent à ces soins soit sur le déclin. Mais, dans la perspective de l’égalité des sexes, cela pose des questions épineuses. Il importe en particulier d’examiner les conditions dans lesquelles s’opère le changement d’hypothèses en faveur du modèle de l’adulte actif, et surtout la valeur attachée aux activités de soins et le partage dont elles font l’objet.

Les auteurs étudient ensuite les possibilités qu’offre l’approche des capacités de traiter de ces questions. A leur avis, cette approche permet d’aborder la question des soins de façon prometteuse, notamment parce que l’égalité des sexes est une préoccupation centrale à la fois chez Amartya Sen et chez Martha Nussbaum, à qui l’on doit en grande partie cette approche. L’approche des capacités, appliquée au problème de l’égalité des sexes, au travail rémunéré et aux soins, a surtout l’avantage d’offrir un modèle universel d’égalité qui a pour origine la conscience de la diversité humaine.

L’approche des capacités veut que les individus soient en mesure de faire de “vrais” choix, ce qui permet d’avancer des arguments solides en faveur d’une valorisation des soins telle qu’il devient possible d’opter pour eux. Elle permet aussi de justifier des politiques encourageant hommes et femmes à partager les activités de soins. Autrement dit, il est possible de justifier l’appui de l’État aux activités de soins et de faire valoir l’impossibilité d’avoir la vraie liberté d’opter pour ce genre de travail tant que les soins ne se voient pas attribuer de valeur monétaire.
Mais le genre d’interdépendance qu’impliquent les rapports de soignant à soigné est difficile à traiter dans un cadre de capacités. De plus, des rapports de force inégaux entre hommes et femmes faussent cette interdépendance, de sorte que les choix que font les hommes limitent ceux des femmes. L’égalité des sexes demande que les activités de soins soient partagées au niveau du ménage, ainsi qu’entre la collectivité et l’individu. En fait, le partage de ces activités entre hommes et femmes augmente aussi les chances de voir les femmes choisir de s’engager dans une forme ou une autre de participation politique.

Ainsi Jane Lewis et Susy Giullari font valoir que les soins doivent être conceptualisés à la fois comme un choix “légitime”, ce que l’approche des capacités aide à faire, et comme une activité humaine nécessaire, ce qui permet ensuite d’affirmer qu’elle doit être partagée entre hommes et femmes. Cela est essentiel si l’on veut que la liberté de choix des femmes soit égale à celle des hommes. Cependant, “forcer” les hommes à partager les activités de soins va à l’encontre des qualités morales jugées caractéristiques de soins dignes de ce nom. Les auteurs expliquent donc que les incitations qui doivent encourager les hommes à participer aux activités de soins doivent être intégrées aux mesures requises pour que les soins puissent être une “véritable” option—les conditions étant que chacun puisse y consacrer du temps, soit rémunéré pour cela, dispose de services et que les horaires de travail soient réglementés. Les auteurs reconnaissent que l’élaboration de politiques sociales permettant aux hommes et aux femmes de faire un vrai choix en faveur d’un travail rémunéré ou d’un travail qui ne lui pose d’énormes difficultés. Mais qu’il s’agisse de bien-être ou de prospérité, il est impossible de choisir de ne pas prendre soin ou de ne pas travailler.


Resumen

Existen datos probatorios de que los responsables de la formulación de políticas en la mayoría de los estados benefactores del occidente están abandonando el conjunto de supuestos sobre los aportes que el hombre y la mujer hacen a la familia basados en el concepto del “modelo de familia donde el hombre es el sostén de familia” y están adoptando una nueva serie de supuestos a partir de un “modelo de familia de adultos trabajadores”. El modelo tradicional del hombre como sostén de familia suponía que éste tendría a su cargo la responsabilidad principal de generar los ingresos, mientras que la mujer sería la encargada del cuidado del hogar. En consecuencia, bajo este modelo se tomaban las precauciones pertinentes para la labor doméstica, si bien ello implicaba que la mujer dependería económicamente del hombre. La forma en que el trabajo doméstico ha de insertarse en el nuevo modelo (en el cual se supone que todos los adultos, ya sean hombre o mujer, padres o no, trabajan a tiempo completo) es un aspecto importante.

En su documento, Jane Lewis y Susy Giullari comienzan por examinar este cambio de supuestos en el contexto de la Unión Europea. Los responsables de la formulación de las políticas suponen cada vez en mayor medida, que el trabajo doméstico se desplazará hacia el sector remunerado formal, acorde con el cambio general de énfasis de la previsión social “pasiva” a la previsión social “activa” y el deseo de promover la participación de la mujer en el mercado laboral. Sin embargo, tales supuestos están adelantándose al ritmo del cambio social que se vive en muchos países del occidente; en su gran mayoría, las mujeres se encuentran aún muy lejos de haber alcanzado su autonomía económica.

Las autoras sostienen que existen límites reales al logro de un modelo integral de trabajador adulto basado en la “comodificación” del trabajo doméstico. El trabajo doméstico es por lo general pasivo y entraña, por ejemplo, la supervisión de las actividades recreativas de los hijos. Más aún, existen pocos indicios de una reducción de la cantidad de cuidado informal que se
requiere, o del valor que la mujer en particular adscribe a la prestación de ese servicio. Esto, no obstante, plantea serios problemas en relación con la igualdad de género. En términos más específicos, obliga a considerar los términos y condiciones en que se está gestando el cambio de los supuestos hacia el modelo de adulto trabajador, y en particular sobre la forma en que el trabajo doméstico se valora y comparte.

Posteriormente, las autoras abordan las posibilidades que ofrece el enfoque de las capacidades para examinar estos aspectos. En su opinión, este enfoque constituye una base prometedora para tratar el tema del trabajo doméstico por distintas razones, entre las que destaca el hecho de que la igualdad de género es un tema de interés fundamental tanto para Amartya Sen como para Martha Nussbaum, principales postulantes de este enfoque. La principal ventaja de utilizar el enfoque de las capacidades para abordar el problema de la igualdad de género en relación con el trabajo remunerado y el trabajo doméstico, es que ofrece un modelo universal de igualdad sustentado en el reconocimiento de la diversidad humana.

El enfoque de las capacidades sostiene que las personas han de tener la posibilidad de elegir de forma "real" o genuina, lo que a su vez permite formular un argumento sólido a favor de la valoración de la labor doméstica, de forma que en la práctica resulta posible escoger esta tarea. Además, el enfoque puede justificar la adopción de políticas que promuevan la distribución del trabajo doméstico entre el hombre y la mujer. En otras palabras, es posible justificar el apoyo del Estado al trabajo doméstico y argumentar que es imposible gozar de una verdadera libertad para escoger el trabajo doméstico a menos que éste reciba un valor monetario.

Pero el tipo de interdependencia que implica las relaciones de cuidado resulta difícil de tratar en un marco de capacidades. Más aún, la asimetría en las relaciones de poder entre el hombre y la mujer se traduce en una distorsión de esa interdependencia, de forma que las elecciones que hace el hombre limitan aquellas de la mujer. La igualdad de género estipula que el trabajo doméstico debe compartirse entre los miembros de la familia, así como entre la colectividad y la persona. En efecto, compartir el trabajo doméstico entre el hombre y la mujer aumenta además la posibilidad que tiene ésta de llevar adelante algún tipo de participación política.

Lewis y Giullari sostienen que el trabajo doméstico debe entonces conceptualizarse como una elección “legítima”, lo que el enfoque de las capacidades contribuye a hacer, y al mismo tiempo como una actividad humana necesaria, lo que a su vez refuerza el argumento de que debe compartirse entre el hombre y la mujer. Este aspecto es esencial si se pretende que la libertad de elección de la mujer sea igual a la del hombre. Sin embargo, el “forzar” al hombre a compartir el trabajo doméstico va contra las cualidades morales que se han señalado como características de un cuidado genuino del hogar. De allí que las autoras argumenten que los incentivos positivos para que el hombre comparta el trabajo doméstico deben incorporarse al tipo de medidas que se requieren para apuntalar la elección “real” de participar en el trabajo: tiempo para cuidar del hogar, pago por el trabajo realizado, servicios de trabajo doméstico y regulación de las horas de trabajo. Las autoras reconocen que la tarea de idear políticas sociales que fomenten la elección real para el hombre y la mujer respecto del trabajo remunerado y no remunerado plantea enormes dificultades. Pero desde el punto de vista del crecimiento y el bienestar del ser humano, es imposible optar por no cuidar el hogar o no trabajar.

Cuando redactaron el presente trabajo, en 2003, Jane Lewis era profesora “Barnett” de política social y Susy Giullari era “British Academy Fellow” del Departamento de Política Social y Trabajo Social de la Universidad de Oxford, Reino Unido. La Sra. Lewis se desempeña actualmente como profesora de política social en la Escuela de Economía y Ciencia Política de Londres, mientras que la Sra. Giullari ha cesado sus actividades académicas.
Introduction

There is now agreement in the literature that the male breadwinner model family, in which men took primary responsibility for earning and women for the unpaid work of care, has been substantially eroded (Crompton 1999; Lewis 2001a). There is also substantial agreement that the actual patterns of family formation and dissolution and labour market participation have changed. However, there has been, if anything, a more rapid shift still in normative ideas about the contributions that women should make to families, and in the goals of social and labour market policies. There is, of course, substantial variation between countries in the degree of change in social trends, policy assumptions and policy development. But given the steady (and in some countries dramatic) rise in female labour market participation together with large-scale family change, which has resulted in a rapid increase in lone-mother and single-person households, policy makers may feel justified in making assumptions regarding increasing individualization, in the sense of increasing self-sufficiency. However, part-time employment for women is extremely common in most Northern and Western European countries, which alone is sufficient to undermine any such simple assumption. How care work is to be accommodated in this new model is also a major issue, but one that has often been subordinated to economic and labour market concerns and hence has received only partial acknowledgement in policy making.

The traditional male breadwinner model made provision for care work, albeit at the price of women’s dependence on men; women’s caregiving was implicitly recognized to be part of the “package”. Just as the profoundly unequal gender divisions of paid and unpaid work were central to the male breadwinner model family, so gender equality remains an issue that is central to the new adult worker family model. The balance of the contributions men and women make to households in the form of cash and care is changing, but much more for women than for men. Women tend to have paid work added to their existing responsibilities for care, while men in most Western countries have decreased the amount of paid work they do and increased their care work only relatively slightly (Gershuny 2000). Indeed, in the adult worker model family it is usually assumed by governments and policy experts that the work of care will increasingly move to the formal, paid sector, which helps to account for the secondary place accorded to care on the policy agenda. But in fact the balance between paid and unpaid work that is achieved by the individual varies enormously between men and women and impacts on their welfare throughout the life course.

In large part, the change in the ideas of policy makers at European Union (EU) and nation-state levels about the way in which adult family members should behave results as much from a desire to promote this new adult worker family model as from changes in the social reality. This in and of itself creates problems, for when a policy is based on an “ought” rather than an “is”, it usually poses dangers for those affected by it. This was true of the old male breadwinner model, which, by assuming women’s economic dependence on men, tended to deny women social citizenship entitlements in their own right. An adult worker model may in its turn both assume that women can be more self-reliant (for example, in respect of pension provision) than is realistic and ignore the fact that they continue to do the bulk of unpaid care work (Lewis 2000, 2001a, 2002).

There have been a variety of reactions in the academic literature to the shift toward an adult worker model family. Some have argued that women’s “moral rationalities” are at variance with the new model and that many want to, and do, put the work of informal care first (Duncan and Edwards 1999; Barlow and Duncan 2000). This position is in some respects bolstered by Hakim’s (2000) argument that only a minority of women want to be and choose to be “career women”. Others have argued that because the shift toward an adult worker model family is part of a much wider trend toward emphasizing the importance of responsibilities rather than rights, and of so-called “active” rather than passive “welfare”, it is impossible to oppose (Orloff 2002). The issue then becomes the terms and conditions on which the shift to the new model is undertaken. Many feminists have, after all, long argued in favour of women’s financial independence. But the nature of the choices women and men face and the pursuit of gender equality depend on the extent to which policies address the issue of care work as well as on the position of women in the labour market. Choice is socially “embedded” and “genuine choice” or “real
freedom to choose” in respect of the balance of paid and unpaid work at the level of the household (and hence gender equality) will involve not only a rebalancing of paid work between men and women, but a complicated rebalancing of unpaid work between the market, state, men and women. A mother who wishes to take up a good job offer may well hesitate if she can find only poor quality (formal or informal) care for her child. Choice has become a central value in the restructuring of welfare states (Jenson and Sineau 2001), but this example signals the central difficulty in ensuring real or genuine choice for women, which in turn impacts on gender equality.

Something that is missing from the debate is a discussion of the principles on which a move toward the adult worker model should be based, especially in regard to the issue of care work. Yet policy makers usually operate on (often implicit) assumptions as to what is “good” and desirable, especially in the field of family policy (Kaufman 2002). The first part of this paper explores the very different ideas framing the shift to an adult worker model family, at the European Union and nation-state levels. These ideas tend to be dominated by economic considerations, which means that the importance attached to the choices of the individual are considered in relation to economic goals. In addition, when gender equality is acknowledged it is often defined in a particular, partial and instrumental way: in respect of the importance of labour market participation, but not care work. This also serves to limit genuine choice. Of course, the intentions behind policies often have remarkably little to do with outcomes. However, ideas are important both in determining the way in which the problem gets defined, those issues that actually make it onto the political agenda, and how the policies that are advocated get justified (for example, Stone 1997; King 1999). The recent literature on welfare state restructuring has increasingly stressed the importance of normative discourse and the role that political ideas and justifications play. Feminist policy analysis has long argued that normative discourse in the form of assumptions about the contributions men and women make to the household has had a powerful effect on the social policy-making process.

In the case of the shift toward the adult worker model family and the associated issue of care, the extent to which different parts of the “package of issues” are recognized by different countries and by different policy documents within the same level of government (particularly at the EU level) is striking. We review the nature of the policy discourse at the EU level, together (more briefly) with the kind of policy logics that exist at the level of the nation-state, in order to illustrate the shift in thinking about the contribution that women in particular should make to families, and go on to suggest that there are real limits to the pursuit of a full adult worker model based on the commodification of care. If this argument is accepted, and given that care work is necessary for human flourishing (particularly, but not exclusively, in respect of young, old and disabled people), it means that it must be made possible to choose to care. This in turn raises issues about the recognition and valuing of care, and about the way it is shared by men and women, and by the household and the collectivity. In our search for firmer principles to inform policies, we examine the possibilities offered by the capabilities approach (CA) conceptualized by Amartya Sen and Martha Nussbaum; they have explicitly addressed the issues of both gender equality and care. We suggest that the emphasis placed by the CA on the individual’s real freedom to choose something he or she considers to be worthwhile to do or to be provides a substantial basis for the recognition and valuing of care work, as well as providing a means of countering the more rank instrumentalist concerns expressed at the level of EU policy making. However, gender equality also requires care to be more equally shared between men and women, which is more difficult to encapsulate with a capabilities approach. In societies

\[1\] The reasons why the father of the child would not hesitate, or would be less inclined to do so, are much debated between those who assume biological essentialism (which underpins much of the classical literature, for example, Parsons and Bales (1955), Becker (1981), also Gilligan (1982), and those who insist on the power of socialization—which underpins most of the feminist literature, for example, Oakley (1981). New variants of the arguments have come to the fore following observations that some lone mothers put the obligation to care before paid employment for reasons that include structural variables (Duncan and Edwards 1999), while Hakim (2000, 2003) argues that lifestyle choice alone is the main explanation.

\[2\] See, for example, Cox (2001), F. Ross (2000) and Schmidt (2002).

\[3\] It is almost a quarter of a century since Hilary Land published her path-breaking article on the importance of the way in which the idea of the family wage underpinned social security policies (Land 1980).

where the position of men and women is unequal, it is possible that the exercise of men’s freedom to choose between work and care serves to limit women’s choices. This raises in an acute form the old issues of how to reconcile choice and equality and what kind of state intervention can be justified.

**Conceptualizing the Adult Worker Model Family at the EU Level**

The trend in Western welfare states has been toward a reworking of the relationship between social provision and employment, with the emergence of what Goodin (2001:39) has called “a new constellation of work-and-welfare variables”. Policy makers have sought to shift the emphasis from rights to responsibilities, and from so-called “passive” to “active” welfare, such that claimants on the welfare system are “encouraged” into work and the work is made “to pay” (Lodemel and Trickey 2000). Gilbert (2002) has characterized these trends in terms of a series of shifts from social support to social inclusion via employment, from attention to measures of decommodification to ways of securing commodification, and from unconditional benefits to benefits that are heavily conditional on work or training. The relationship between employment and social provision has always been central to modern welfare states (Supiot 1999); what is striking about this reworking of the relationship is the way in which it has been couched in gender-neutral language. It is now assumed that women as well as men will be “citizen workers”.

**Linking social to economic policy**

At the EU level, employment growth has increasingly been seen as a key social policy goal for the Commission, because it is viewed as the means of promoting social inclusion, a position shared by European social democrats (Vandenbroucke 2001, for example) and by many (mainly American) writers to the right of the political spectrum (most notably Mead 1986). Adult labour market participation has been seen as the way of increasing economic competitiveness; the 1993 White Paper of the Commission on growth and competitiveness was the first major policy paper to make this case, and also identified the formal care sector as a source of new jobs (EC 1993). But implicit in these two positions was a looming tension between the idea of the wage as the best form of “welfare” and the inevitably more “flexible” employment regime that is necessary for increasing competitiveness. Recent policy documents of the Commission have sought to address this tension by setting out a clear agenda for “more and better jobs” through the expansion of the knowledge-based economy (EC 2003a).

Nevertheless, many commentators have argued that social policy goals are in fact subordinate to the goals of economic integration policy, that is, to competitiveness and macroeconomic stability (for example, Scharpf 2002; Kleinman 2002). The European Commission’s Social Policy Agenda published in 2000 sought to strengthen “the role of social policy as a productive factor”, pointing to the economic benefits of health and education expenditure, of protection against a range of social risks, and of measures to facilitate adaptability in the labour market (EC 2000:5). In this approach, social policies are justified in terms of the social investment that is necessary to sustain competition and growth. In respect of the employment policies that are central to EU-level policy, social protection has also been invoked to play an important “support role”. Nearly a decade after the 1993 White Paper, the European Employment Strategy (EES) expressed what had become the dual commitment to more and better jobs and macroeconomic stability. Guideline 10 of the EES states the need to: “exploit fully the employment potential of the full range of the services sector to create more and better jobs”, while guideline 12 states the need to “set a target for gradually reducing the overall tax burden...a target for gradually reducing both the fiscal pressure on labour and on non-wage labour costs, in particular on relatively unskilled and low-paid labour” (Council of the European Union 2002:L60/66). Indeed, the notion of “better jobs” seems to depend heavily

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5 For a critique of this active/passive dichotomy, see Sinfield (2001).
6 The issue of compulsion is controversial in European countries compared with the United States.
7 The relationship between economic and social policy is a long-standing preoccupation of social policy analysts (Bulmer et al. 1989).
on a “high level of social protection, good social services available to all people in Europe, real opportunities for all and the guarantee of fundamental and social rights” (EC 2000:13), rather than good quality jobs per se, at least for new (often female) entrants at the low end of the labour market in the short to medium term. The employment policy guidelines for 2002, echoing an Organisation for Economic Co-operation and Development policy paper published in 2000 (OECD 2000), also stressed the need to reform tax and benefits systems in order to avoid unemployment and poverty traps, and to “make work pay” (Council of the European Union 2002). Similarly the EES guidelines argue for the need to make work pay through “a policy mix of preventive actions, application of sanctions...effective surveillance” (Council of the European Union 2002). The key adaptation strategy for achieving the new work/welfare relationship was thus conceptualized as one of flexibility and security.

Furthermore, the new expression of linkage between economic and social policy has been paralleled by the adoption of a new form of governance—the Open Method of Coordination (OMC)—which abandons “harder” instruments like “directives” in favour of committing member states to common objectives, while leaving national governments free to determine how to make progress toward them. Government by some combination of common standards and performance indicators is one way, perhaps the only way, that states can hope to reconcile welfare ends and market means. However, as O’Connor (2003) has observed, the implementation of policies to do with the care of children have had more conspicuous success in terms of implementation in member states when governed by directive (as in the case of parental leave)9. Certainly, a recent court case shows that there is no established right to childcare (Gabriele Gruber v. Silhouette International Schmied FmH and Co.; see European Court of Justice 1999).

The implications for gender equality

In respect of female workers, the discourse of social inclusion on the basis of employment has been folded into the need to promote gender equality, an idea that has often taken a central position in key policy documents. In other words, the social/economic policy divide is subsumed under the goal of gender equality. This should not be a surprise in that historically the commitment to gender equality in the workplace was virtually the only reference to social policy in the Treaty of Rome, and was always part of the economic need to secure “an equal playing field” for trading purposes (Meehan 1993; Hoskyns 1996). However, the history of the treatment of gender equality in respect of paid and unpaid work at the EU level has been complicated, as might be expected in a multi-tiered pattern of governance (Leibfried and Pierson 2000). Ross (2001) has shown how the bodies concerned with social policy making at the EU level worked with very different meanings of “reconciliation” in respect of policies to do with work and family. The fact that parental leave was made an individual entitlement in Council Directive 96/34/EEC of 3 June 1996 owed something to those actors (mainly in the European Childcare Network) who insisted that the reconciliation of work and family should encompass gender equality, rather than just providing a means for women to enter employment. Hantrais (2000) has remained optimistic about a shift in emphasis at the EU level from equal pay and treatment to a more equal sharing of paid and unpaid work between men and women. Indeed, the proposal for new EES guidelines has recognized the need to extend the idea of gender equality to the unpaid work of care, stressing the importance of addressing the “equal share of care and household responsibilities” and of encouraging the “take-up of parental and other leave schemes by men” (EC 2003b:15). This continues the earlier emphasis placed on reconciliation as encompassing gender equality between men and women in the household as well as in the workplace.

But, it is by no means certain that the new form of linkage between economic and social policy, with its associated shift toward an adult worker model family, and new form of soft governance using the OMC will provide more than a token space for a commitment to gender equality in paid and unpaid work. According to the Employment and Social Affairs Directorate, this equal op-

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8 This has been particularly clear-cut at the nation-state level in the case of the United Kingdom; see Newman (2001).

opportunities strategy is in turn “motivated by social justice, but is equally driven by economic reasons” (Larsson 2000). The emphasis is on active welfare—on the new relationship between work and welfare—and on social policy as a means of promoting this. The strategy starts with employment and there is increasing evidence to suggest that policies that address care are assessed and promoted primarily according to whether they promote an adult worker model family.

Over the last decade the Commission has increasingly stressed the importance of the effective use of women’s skills in a competitive, knowledge-based economy (EC and Council of the European Union 2002), and has received academic backing for its position. Women have been seen as an untapped labour reserve. Reports to the Portuguese Presidency in 2000 (Ferrera et al. 2000) and to the Belgian Presidency in 2001 (Esping Andersen et al. 2001) favoured higher female labour market participation as a means of increasing both competitiveness and the tax base of the continental European social insurance welfare states. The European Commission has set a target of 57 per cent for female labour market participation in member states by 2005, and 60 per cent by 2010 (EC 2002b, 2003a). The Commission has called in addition for “reforms of means-tested benefits so that each member of the household has an incentive to work” (EC 2002a).

However, these expectations of labour market participation further complicate the “better jobs” goal of the Commission. First, there is the issue of who has been most likely to fill the more “flexible” jobs that are created. As Rubery et al. (1998) have argued, flexible employment in the sense of part-time work or short-term, more precarious employment can be seen as a way for women to enter the labour market, or as a type of employment that women find very hard to escape. Feminist social policy analysts have long pointed out that historically women have found it difficult—within the assumptions of the male breadwinner model family—to get “commodified” (Langan and Östner 1991). In the recent transformations of the work/welfare relationship in Western welfare states, women have often found themselves occupying the more “flexible” jobs. Thus, the “Dutch miracle” was largely the product of women’s entry into relatively short-term, but secure, part-time work (Visser and Hemerijcke 1997). In Spain during the 1990s, the dramatic increase in the labour market participation of women in their 20s and 30s was in full-time but short-term contract work. In the Dutch case, it is possible to argue that flexi-security has been achieved (Goodin 2001; van Oorschot 2002), but the part-time nature of women’s employment means that the trend toward the adult worker model in that country is best represented as “partial individualization” resulting in a one-and-a-half earner model family (Knijn 2004). In Spain, women disproportionately lack employment security. In other words, gender equality is far from being achieved in the labour market, which makes any easy assumption of progress toward a fully individualized adult worker model dangerous (Lewis 2001a; Hakim 2003), and in some member states flexi-security also remains a distant goal for women in particular.

Furthermore, in the recent economic strategy documents of the Commission, there has been relatively little reference to the problems raised by the need to reconcile family and work responsibilities. Indeed, there is increasing evidence from recent EU documents and from the work of academic policy advisors that the extension of the “citizen worker” strategy to women is part of the dominant competitiveness and growth agenda. Of course, parental leave has been used to promote female labour market exit, as has been the case in Germany, and gender equality, as has been the goal in Sweden (Moss and Deven 1999; Bruning and Plantenga 1999). And it is significant that recent EU-level employment policy documents have put more emphasis on the provision of formal childcare services, which have been shown to be less equivocal in their positive effects on rates of female labour market participation (Bradshaw et al. 1996; Gornick et al. 1997). Guideline 18 of the EES asks member states to “design, implement and promote family-friendly policies, including affordable, accessible and high-quality care services for children and other dependants, as well as parental and other leave schemes” (Council of the European Union 2002:L60/69). In 2002 a benchmark for childcare was set, whereby by 2010 at least 33 per cent of children under three years of age and at least 90 per cent of children between three and the mandatory school age should have access to childcare (EC 2003a).
The academic arguments put to EU-level bodies since 2000 in favour of the adult worker model have tended to assume the desirability of a “de-familialization strategy” whereby care work (for children and adult dependants) is commodified and put into the public, formal arena (Esping Andersen et al. 2001, 2002). A 2001 Discussion Paper issued by the Swedish Presidency acknowledged that “it will take some time before women’s labour market participation matches that of men. … Unless compensated for, this will leave women at a disadvantage in terms of social protection” (EC 2001:4). While thus implicitly acknowledging the problem of the unequal division of care work in the family and its impact on women’s labour market position, the recommendations of this document were confined to measures to promote female employment, in keeping with its focus on women’s employment as part of the “engine of economic growth”. In the hierarchy of policy goals, adult labour market participation, primarily as a means of promoting economic growth and competitiveness, comes first. Thus different degrees of recognition of gender equality exist in different kinds of EU policy documents. The overwhelming emphasis has been on gender equality defined in terms of increased female labour market participation. In practice, in those countries where women’s employment has increased the most dramatically over the past decade, there has been a tendency for women to enter more “flexible” forms of employment. Thus gender equality defined in terms of individualization and labour market participation has not managed to deliver “better jobs” in the sense of equally secure, equally well-paying jobs, to both men and women. Rather, in the case of women, “better jobs” have tended to be defined in terms of the extent to which provision is made for reconciling work and family responsibilities, and all too often the focus in respect of these policies has been on women alone, rather than on men and women.

The economic productiveness and competition goal has been accompanied by a “work first” strategy for women and an emphasis above all on the de-familialization (and commodification) of care work via the provision of childcare services. Differing amounts of emphasis have been placed on the provision of cash transfers (for example, for parental leave) as well as care services as a means to achieve more female labour market participation, but very little attention has been paid to the pursuit of gender equality in respect of unpaid work at the household level. It is also significant that the principle of gender equality is deployed in EU-level documents in such a way as to eclipse the equally difficult issue of “choice”. The economic imperative to increase female employment has resulted in some extraordinarily instrumentalist arguments. Thus high female labour market participation rates are required for the health of the economies of EU member states and the EU social model, and are justified in terms of achieving “gender equality” (Esping Andersen et al. 2002). The de-familialization of care work necessarily follows, and there is no further discussion of gender inequalities in unpaid work. Nevertheless, very different ideas about the desirability of “choice” in regard to the performance of unpaid work exist, both at the level of national governments and among people, and the willingness to undertake informal care work is unlikely to become less important in the future.

New Family Models at the National Level

It is useful to outline in broad terms the principles informing the policy logics that underpin different adult worker models at the national level. Only the United States and the Scandinavian countries have models based on the assumption that men and women will be fully engaged in the labour market. However, these models work in very different ways. In the case of the United States, the obligation to enter the labour market is embedded in a residual welfare system that often borders on the punitive, whereas in Scandinavia it is supported by an extensive range of care entitlements in respect of children and older people. The position of lone mothers—a border case for the study of social policy (Kiernan et al. 1998)—is particularly instructive in this respect, because as a group these mothers focus the problem of combining unpaid care work and employment. Since 1996, the United States has treated these women as citizen workers, mandating a work-first policy and imposing time-limited benefits. Employment rates for lone mothers are high in the United States; the push factor is strong. But employment rates are higher still in Sweden and Denmark and lone mothers’ poverty rates are much lower than in the United States, be-
cause they still get as much as one third of their income from state transfers (Lewis 1997). The Scandinavian model treats women as workers, but then makes allowance for difference, grafting on transfers and services in respect of care work for partnered and unpartnered mothers alike. Hobson (2004) has described the Swedish variant as a “gender participation model”, focusing as it does on promoting gender equality in employment and providing “supports” via cash (for parental leave) and services (in the form of care for children and elderly dependants). Thus, the United States operates a fiercely gender-neutral, equality-defined-as-sameness adult worker model, with very few supports for care work, although the market provides good access to affordable (but not necessarily good quality) daycare services for children. Recent American feminist literature is replete with references to the “care crisis” (Hochschild 1995) and to family stress. Scandinavia operates what is in practice, but not in name, a gender-differentiated “supported adult worker model”, with high penetration of services for the care of children and elderly people and cash transfers in respect of parental leave. As a result, moderately high proportions of women work (long) part-time hours, exercising their right to work a six-hour day when they have pre-school children, as well as leaving the labour market for up to three years if they have two children in rapid succession. As a result, the Swedish labour market is the most sexually segregated in the Western world. Swedish women have more choice about combining work and care, but at the expense of equality in respect of vertical and horizontal labour market segregation. Despite its long historical tradition of full-time work for women, Finland introduced a flat-rate homecare allowance in 1990 (added on to parental leave) in respect of the care of children under three, which is offered as an alternative to public daycare. Salmi (2000) has argued that this effectively brings Finland closer to the more mixed continental European norm; employment rates for women have actually fallen since 1990. The introduction of the “daddy quota” in the Scandinavian countries, whereby men are obliged to take part of the parental leave allocation (usually a month) or lose it altogether was aimed at promoting greater gender equality in unpaid work, something that would also begin to tackle labour market inequalities (Leira 1998). However, the daddy month has been recently abandoned by the new Danish right-wing government, because of the way in which it explicitly tries to change behaviour in the private sphere of the family, which is felt to place restrictions on (men’s) choices. Thus, the development of the adult worker model in the Scandinavian countries shows the extent to which the politics of choice are interwoven with those of gender equality.

Other Western European countries have moved substantially toward assuming the existence of an adult worker model family, but in practice still operate a mixed model of “partial individualization”. Thus the Netherlands and the United Kingdom have changed the nature of entitlements for lone mother families, such that women with school-age children are encouraged to seek employment, the main motive being the wish on the part of governments to limit cash transfers to this group. However, incentives to partnered women to enter the labour market are ambiguous. In the United Kingdom, the operation of means-tested social assistance provides an inbuilt disincentive to partners of unemployed men to enter the labour market. Reform of the tax/benefit system such that low-paid jobs are subsidized via tax credits have served to extend the hours of part-time work, but mothers in the United Kingdom (and the Netherlands) continue to work relatively short part-time hours. The United Kingdom has opted to move toward a “supported” rather than an “unsupported” adult worker model, but much more attention has been paid to investing in childcare services, which are more likely to result in women’s employment, than in cash transfers, which are more likely to result in women “choosing” to stay at home to care (Lewis 2003). In the Netherlands, part-time work is still explicitly the preferred way of reconciling work and family for men and women in terms of the policy discourse and

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10 It is of course possible to conceptualize “gender difference” as biologically based. Needless to say, we do not (see Scott [1988] for a discussion of gender, equality and difference).
11 See also Korpi’s (2000) typology of family policy, which is based on the extent to which family policies promote female employment.
12 Equality-as-sameness has a long historical tradition in the United States and has been supported by feminists, who in the early twentieth century were not inclined to support even basic legal recognition of care work in the form of maternity leave (Wikander et al. 1995). There are, however, tax allowances for childcare.
revealed preferences (Knijn 2004). In Germany too, providing women (but not men) with the “choice” to work or care is high on the political agenda (Ostner 2004).

It is possible to discern ideas about what is appropriate for women to do in respect of work and care in all these models. In some countries the desire to promote an adult worker model family is stronger in respect of some groups of women (particularly lone mothers) than others. The point is, first, that policy makers in different countries operate with different assumptions about the contributions that men and women do and should make to families, and second, that choice in all these models is profoundly structured by social policies. In the United States and Scandinavia it is assumed that adults will be in the labour market, but in Scandinavia sufficient “policy supports” in the form of cash compensation for care are provided to permit women to choose to care, such that these countries operate a “one-and-three-quarter-earner model”, whereby women work long, part-time hours. To the extent that the “policy supports” are gender neutral, men are also permitted to choose to care, but labour market segregation means that men are likely, as in other countries, to be in better paying jobs and, again as is the case elsewhere, to experience work cultures that are often unsympathetic to care leaves. In the United States, women can choose to work (as mentioned above, there is an ample supply of affordable, but not necessarily high quality, childcare), but it is much harder to choose to care (especially when the real fall in male manual workers’ earnings is also taken into consideration). In the United Kingdom and the Netherlands, the pendulum shift in the treatment of lone mothers—from mothers to workers—has affected the behaviour of this group of women, and in these countries and in Germany recent increases in social expenditure on care have been focused on service rather than cash provision, which is known to promote women’s employment rather than mothers “choosing” to stay at home to care.

Care, and the Limits of an Adult Worker Model Strategy Based on the Commodification of Care

The key issue underlying the goal of making further progress toward a full adult worker family model within existing policy approaches is thus, above all, how far it is possible to de-familialize and hence “commodify” care. This in turn begs questions about the nature of care work. It also raises issues about gender equality, for both the gender-neutral and gender-differentiated-with-supports models are focused in the main on women only.

The commodification of care can take place in the formal and informal arenas, with very different implications for de-familialization. Ungerson (1997) argues that the different kinds of cash payments for informal caregivers and care receivers introduced across welfare states indicate a general trend toward the commodification of informal care but obviously do not amount to a clear-cut de-familialization of care strategy. Still, payments for care can differ in relation to the distinction between formal and informal care—some payments may not be used to pay for relatives—and indeed this distinction is sometimes also differently drawn between child and adult care, and between countries.14 If care is commodified and put in the formal arena either through the provision of cash subsidies to purchase care on the market, or by directly providing public child and elderly care services, the scope for de-familialization is clearly widened. Yet we shall argue that such a commodification strategy nevertheless results in incomplete de-familialization, because it is not possible fully to commodify care. This is not to follow those who argue that care should not be commodified, because the marketization of care jeopardizes the affective dimension of care (for example, Noddings 1984). Rather, as Folbre and Nelson (2000) argue, the full commodification of care is not possible.

In the late 1980s, Italian feminist scholars argued that the concept of doppiapresenza (double presence) was better able to capture the significance of what Balbo (1987) called women’s “ser-

vicing work”, than the already established concepts of “dual burden” or “double shift”. Doppia
presenza stresses the interdependence of public and private that characterizes the vast majority
of women’s lives, and the continuity of presence in both spheres that is required for servicing
work (Balbo 1987; Bimbi 1989). Balbo’s metaphor of “crazy quilts” articulated the pivotal role
that women’s servicing work plays in the fragmented provision of goods and services that
characterizes late capitalist societies:

To conceptualise the content of servicing work is not easy: part of it consists of
the daily core of producing goods and services for survival…part of it consists
of the organizational work…the keeping in touch with the many outside
agencies which deliver services, the sorting out, the piecing and patching, and
the creation of orderly patterns (Balbo 1987:51).

But most of all, Balbo stressed the emotional dimension of need:

Unless something is added to material goods in order to link them to what a
specific individual expects or wants, personal needs are not satisfied. Some-
one has to see to it that problems are quickly taken care of, and emergencies
dealt with. … Being there to wait, to listen, to respond; to attend to the needs
and desires of others; to worry when difficulties are anticipated; to deal with
one’s own sense of guilt when problems are not successfully resolved: this is
servicing. And it is best done if it is not even seen (Balbo 1987:53).

Thus Balbo’s work also suggests strongly that, given the complexity of social needs, it is not
possible fully to commodify care. Showstack Sasson (1987) has also argued that needs for social
care are complex, highly differentiated and constantly changing, which means that it is not fea-
sible to create a system of public services that is capable of satisfying them completely. Care is
more than a task; it involves emotional labour and relationship (Finch and Groves 1983). Care is
also active and passive, involving physical and non-physical presence (Land 2002). The concept
of doppia presenza incorporates these elements of passive care and non-physical presence, which
show up in the uneasy accounts of mothers who report that they are thinking simultaneously
about their jobs and about whether their children are being looked after properly. The interac-
tion between the passive and active dimension of care suggests that the shift from “passive” to
“active” that has underpinned the reworking of the work/welfare relationship is particu-
larly disadvantageous for women who have caring responsibilities, and makes the valuing and re-
warding of care even more difficult.

Folbre and Nelson (2000) show that there has been a rapid expansion of commodified care ser-
vices in the United States, and Daly (2001) has also argued that care services, public and private
market), have been an area of expansion in what has otherwise been a period of retrenchment
in European welfare states. Buying services enables carers to focus on a smaller number of per-
sonal and emotional caring activities, which cannot be commodified. Nevertheless, family life is
increasingly characterized by what Beck-Gernsheim (2002:91) has called “the divergence of
tempos and abodes”, by which she means the increasing spatial and temporal fragmentation of
family life. Greater flexibility with regard to working time and place interact with the increas-
ingly busy and uncoordinated lives of adults and children in terms of time and space. The de-
mand for the organizational and personal dimension of care work identified by Balbo is there-
fore increasing. Thus even with a measure of commodification, there is reason to suppose that
more investment of time and energy in care work will be required, and current evidence sug-
gests that mothers will be expected to provide it.

There is a further source of informal care, usually by female relatives, especially grandmothers,
and friends. It is often convenient and flexible, active and passive. Relatives and friends can be
asked to step in when formal care fails, or to fill the gaps between commodified, formal care
and (nuclear) family care. Indeed, welfare state restructuring has tended to demand more rather
than less by way of informal care of this kind. Devolution and marketization, the twin strategies
for restructuring services in European welfare states, have both produced more mixed econo-
mies of care and more fragmentation, which has meant increased reliance on kin, in particular. For example, in the United Kingdom, where formal childcare provision has been substantially increased since 1998, the variety of forms and providers of care that have been created by complex supply-side and demand-side funding streams mean that parents must put together “packages” of care and rely on relatives to plug the gaps (Lewis 1998, 2003). Depending on the quality of relationship, relatives and friends are also likely to provide a more personal and emotional form of care. United Kingdom evidence suggests that childcare by relatives is highly valued (La Valle et al. 2000; Meltzer 1994).

Thus the commodification of care work in the formal arena neither fully substitutes for women’s caring work, nor does away with their need to rely on the informal care provided by relatives and friends. United Kingdom evidence also indicates that contrary to common assumptions, cash and in-kind payments for childcare provided by kin, mostly grandmothers, are relatively frequent, and increase the ability and willingness to care.15 Land (2002) concludes that the formal care (for money) versus the informal care (for love) dichotomy that underpins current government policy thinking in the United Kingdom, particularly in relation to childcare, is misleading and unhelpful. Still, even if payments for childcare were to be used to pay relatives, adding such a partial commodification of informal childcare to more formal strategies of commodification would not amount to an adequate strategy for fully de-familializing care, and is additionally at odds with the EU policy agenda on “active ageing” (EC 2002a). This policy ignores the significant role that relatives, particularly grandmothers, already play in supporting their daughters’ employment, as well as the opportunity and health costs that they bear as a result of it. Recent United Kingdom evidence echoes much earlier United States work and indicates that there is a risk of overload for those women caught between the responsibilities of work, and care for grandchildren and elderly family members (Money et al. 2002; Brody et al. 1981).

The partial commodification of informal care also needs to be understood in the context of family obligations. Given the strong role that the complex, normative idea of reciprocity plays in kin obligations (Finch and Mason 1993), partial commodification of childcare is likely to entail in-kind reciprocal care, and to impose an obligation to “return the favour” later in life. There is yet another kind of informal care that is outside the “family” sphere: the care provided by neighbours, friends, “families of choice”, and by single parents’ networks. We know very little about this, but what little we do know indicates that childcare “swaps” seem to characterize this kind of informal care, which means that care continues to remain a family responsibility (D’Ercole 1998; Giullari 2003).

Policy makers seem to have interpreted major social trends in respect of family and labour market change as providing evidence of increasing individualization, which has in turn bolstered their views as to the feasibility as well as the desirability of the adult worker model family. This is particularly clear in respect of the sea change in policies toward lone mothers, such that all Western countries are now treating them more as citizen workers than citizen mothers (notwithstanding the strength of a parallel debate in the English-speaking countries about a “crisis in parenting”16). Academics have certainly emphasized the importance of a shift from a “community of need” to “elective affinities” and “families of choice” (Beck and Beck-Gernsheim 2002; Silva and Smart 1999), but they have also stressed that this does not amount to a process of atomization. Evidence indicates that obligations and practices of mutual support and care continue to bind people together.17 The wish for a life of one’s own induces a search for elective interdependency, with fair, equally balanced relations of support, in which both parties aim to satisfy their need for support and belonging while preserving their autonomy (Giullari 2003). Thus policies that assume a trend toward full individualization in the labour market and the commodification of care neglect the complexities of care relationships, and may actually impede the goal of increasing female employment.

16 The American feminist literature has drawn attention to the stress caused by the long-hours culture for men and women in that country, but in the communitarian and “family values” literature there is a hankering after a more traditional family model (Etzioni 1993; Poponee 1993).
17 Finch and Mason 1993; Lewis 2001b; Smart and Neale 1999.
Care is embedded in personal relationships of love and obligation, and in the process of identity formation. An early analysis of care highlighted the conflation of care as exploited labour (with significant opportunity costs), and care as love rather than mere tending, a key part of women’s identity:

Caring is experienced as a labour of love. Unlike the labour contracts negotiated through the cash-nexus, caring is a work-role whose form and content is shaped (and continually reshaped) by our intimate social and sexual relationships. … The experience of caring is the medium through which women are accepted into and feel they belong to the social world (Graham 1983:30).

The obligation to care and the performance of care work is experienced differently by men and by women (see, for example, Ungerson 1987). This is not to argue for a position of biological essentialism (as does Gilligan 1982), or to suggest that paying for care necessarily destroys relationship and undermines identity. But, it is only when care is recognized as conflating labour and love, as a key process in female identity formation embedded in a gendered normative framework of obligations, and as relationship between informal carers and between carer and person-cared-for, that it becomes possible to understand why the commodification of care is too weak a strategy to address gender inequality in employment and care.

It is also a strategy that poses problems for the issue of choice. Women experience stronger pressures to care than do men. Finch and Mason (1993) found that the negotiation of kin responsibilities, including those involving care, continues to be determined by gender, albeit indirectly. They argue that kin develop cumulative commitments over time through their history of relationship and reciprocity. Because women are more likely not to be in full-time work and to need childcare, they are also more likely to develop cumulative commitments to care for kin, and in the process of so doing, develop an identity and a reputation as a carer. This in turn serves to weaken their negotiating power, because, having established such a reputation, they are less likely to have “legitimate excuses” not to care. It should not be surprising therefore that many women express the wish to “put care first”. In addition, the experience of caring can bring positive emotional and relational rewards, and may well be preferable to a low-paid, low-status, insecure job. It may, indeed, be preferable to look after one’s own children rather than taking a job looking after other people’s (in the manner envisaged by the 1993 European Commission White Paper on growth and competitiveness, mentioned above) especially in a country such as the United Kingdom, where wages for childcare workers are extremely low. Revealed preferences to undertake informal care work are thus embedded in the following.

- The choice sets available to particular mothers, dependent on level of education and the conditions of employment that is available.
- Assumptions about what is the “proper thing for women to do”, which exhibit cultural variation. Thus, in the Netherlands, policies to treat lone mothers as citizen workers have met considerable resistance from both the mothers and from the social workers charged with implementing the policy at the local level (Knijn and van Wels 2001). Duncan and Edwards (1999) have concluded that women operate according to a moral rationality that distances them markedly from strategies to promote the commodification of care, and that this is in turn embedded in particular structures of economic opportunity in communities, in normative assumptions about the “proper thing to do”, and in constructions of identity.
- Assumptions about what is the “proper thing for men to do”: the long-hours culture of the English-speaking countries contrasts hugely with the increased recognition of the desirability of men caring for children in the Scandinavian countries (although this trend is much more dominant in the public than the private sector).
- Choices are socially embedded, which draws attention to the importance of structures designed to achieve gender equality.

In contrast, the adoption of the adult worker family model at the policy level has been based on an instrumental approach to gender equality and care. The assumptions are that individualiza-
tion is equally possible for men and for women, and that this can be achieved by de-familializing care, primarily by commodifying it.

The problem is that care cannot be fully de-familialized or commodified, because it is passive as well as active, because it is emotional and relational, because the pressure for women to care is stronger than it is for men and is a part of gendered identity formation, and because the fragmentation that has resulted from welfare state restructuring has increased the need for family and informal care. Thus we need to make a case that (first) enables the recognition of care work as something that is worthwhile and necessary, which in turn necessarily involves valuing it. Human beings need care—it is a human activity—which means that we must also consider the way in which care work is shared in societies, both between men and women at the household level, and between the individual and the collectivity. The current policy debates tend to treat care work as something that has to be reconciled with employment for women, and which can be addressed via commodification, whether through cash payments of some kind (through the tax/benefit system or directly to carers) so that carers may purchase care on the market, or through the provision of public sector care services. Such policies are poorly developed compared to the other major social services (health and education) in most countries. But if it is in any case not possible to commodify all care work, then the issue of how it is shared, not just between individuals and the collectivity, but also between men and women at the household level, must also be addressed.

The Possibilities and Problems of the Capabilities Approach

The work of Amartya Sen and Martha Nussbaum on the “capabilities approach” (CA) is promising ground for establishing a basis on which to address the issue of care, not least because gender equality is of central concern in the work of both authors, and Nussbaum (2000, 2003) also devotes a lot of attention to care. There are important differences in their approaches, including their approaches to gender equality, but the work of both authors serves to shift attention from inequalities in resources, outcomes and preferences, to inequalities in capabilities, that is, to the “real freedom” that a person has to be and to do what she has reason to value.

This notion of individual freedom is pivotal to the CA, which recognizes that genuine freedom must be underpinned by, while also making important distinctions between: the resources available to a person (means); what she is and does (functionings); the personal, social and environmental factors that affect her ability to transform means into functionings (conversion factors); and the combination of being and doing that she has the real freedom to achieve (her capability set). Sen recognizes that inequalities in resources are a crucial dimension of gender inequalities, but concludes that

the question of gender inequality in the advanced societies—no less than in developing countries—can be understood much better by comparing those things that intrinsically matter (such as functionings and capabilities), rather than just the means like primary goods or resources. The issue of gender inequality is ultimately one of disparate freedoms (Sen 1992:125).

A further crucial distinction is made in the CA between well-being freedom and agency freedom (Sen 1985). Sen (1985) argues that the outcome measure of well-being has major limitations because it fails to address the pivotal and distinctive part that agency plays in a person’s life. He argues that it is important to take account of agency above and beyond the role that it plays in securing well-being. Indeed, agency freedom may actually run counter to a person’s well-being, but must be conceptualized as intrinsically important regardless of whether it increases or decreases well-being, because of the importance that is attached to the individual’s “real freedom”

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18 We would like to acknowledge the very helpful comments and advice that we have received on this part of the paper from other members of the EUROCAP project.

to choose: “The well-being aspect of a person is important in assessing a person’s advantage, whereas the agency aspect is important in assessing what a person can do in line with his or her conception of the good. The ability to do more good need not be to the person’s advantage” (Sen 1985:206, emphasis in original).

Sen offers the example of diving in to save a drowning person, which may involve giving up doing something important for one’s well-being, such as eating one’s lunch, getting wet, or risking one’s life. A similar logic can be applied to the case of a woman who foregoes paid employment to undertake care work, in order to comply with her own conception of “the good”. Advocates of the capabilities approach would argue that her capabilities set should enable her to choose to care as well as to choose not to care. The well-being outcomes of her choice are therefore not of ethical concern. Capabilities rather than means or functionings become the lens through which policies are to be designed, implemented and evaluated.

There is another fundamental reason for making a distinction between well-being freedom and agency freedom, which Sen (1999) stresses in Development as Freedom. In making agency freedom central, Sen argues that the real freedom of individuals is the motor of development and social change, rather than economic growth per se. This has major implications for gender equality, because the equal empowerment of women to be and to do what they have reason to value becomes necessary in order to achieve social change and economic development. The recognition that Sen accords women’s agency in achieving social change parallels the increasing interest in the question of individual and collective agency in work on gendered citizenship, and on gender and the development of welfare states more generally.

The capabilities approach, particularly in relation to gender equality, has been criticized for the importance that it attaches to the individual’s agency freedom—in the manner of neoclassical economic theory—rather than to equality of resources or outcomes. Given the persistence of demonstrable “group inequalities” between men and women, Phillips (2001) has concluded that a more traditional equality strategy is better able to achieve gender justice. However, the CA insists that individuals be in a position to make real or genuine choices, which in turn allows a strong case to be made for valuing care (such that it is made practically possible to choose it). The CA also has the potential to justify policies that promote the sharing of care between men and women, because it acknowledges that “real” freedom of choice requires substantial underpinning (via the conversion factors). In the next section we argue that the recognition the CA gives to the diversity of individuals’ choices and to the wherewithal for their realization is crucial to valuing care. But care is relational, and the kind of interdependency that care relationships involve is much more difficult to deal with in a capabilities framework. Furthermore, unequal power relations between men and women result in a distortion of that interdependence, such that the choices men make constrain those of women. We therefore go on to suggest that real gender equality of capabilities in respect of the choices about care and employment must rest additionally on ensuring that care work is shared between men and women, which in turn requires specific legislative underpinning.

**Gender equality of capabilities: Recognizing and valuing care**

The capabilities approach makes gender equality a central concern; argues that this requires equalizing the real freedom of individuals to choose the functionings (“beings” and “doings”) they have reason to value; and celebrates the pivotal role that women’s agency plays in eradicating gender inequality and in furthering social and economic development. In this section, we elaborate the way in which the CA enables care work to be recognized as a legitimate choice for all individuals, and to be valued such that it is possible to choose it.

The notion of human diversity is central to the CA and the acknowledgement that human beings differ in regard to the value that they attach to different beings and doings is important for the rec...
ognition and valuing of care. Claims based on universality, equality and justice have all too often been modelled on the male norm, and have resulted in the exclusion and subordination of women’s claims. In addition, the capabilities approach recognizes functionings that relate to non-market as well as market settings, and to political, social and family life as well as economic life. The concept of functionings also serves to break down the being/doing (passive/active) dichotomy that has bedevilled the understanding of care (as we pointed out above, passive care cannot be commodified). The CA makes it possible to make a case for the recognition and valuing of care but, as we will show below, more has to be done to reconcile the idea of individual agency freedom with gender equality in respect of sharing care between men and women.

Sen and Nussbaum differ significantly in terms of the way in which they make the case for individuals to achieve equal agency freedom to choose the functionings they have reason to value. Nussbaum (2003) argues for the compilation of a list of the core, fundamental capabilities necessary for human flourishing, which must be guaranteed in order for a society to be just. In the absence of such a list she argues that the capabilities approach fails to provide guidance on the content of social justice. This is particularly problematic for gender justice, because the most influential accounts have been constructed using male norms (Okin 1989). In respect of valuing care, Nussbaum’s approach appears at first sight to be more useful than that of Sen, who leaves the construction of the capabilities set open, and with it, the possibility of excluding care. But care is not explicitly included in Nussbaum’s list either, unless it is taken to be part of “capability for affiliation”, which includes “showing concern for other human beings”. The fact that care is not identified as a key capability, despite Nussbaum’s concern with gender justice, is symptomatic of the problem of drawing up a core list of capabilities that are universally applicable. The central problem of “who defines the list” remains.

In contrast, in Sen’s approach, the recognition that real agency freedom requires the inclusion and participation of diverse voices in the definition and selection of capabilities is crucial. As Robeyns (2003) notes, Sen stresses that capabilities sets are context dependent, and that their legitimacy is dependent on democratic processes of inclusion and on who is involved in their definition, valuation and selection. Bonvin and Farvaque (2003) go further and argue that the individual’s capability for voice—that is, her capability to determine the meaning, selection and worth of different capabilities—is a necessary step for the conversion of formal rights and entitlements (which may be conceptualized as part of the individual’s resources) into capabilities. Thus Sen leaves the definition of capabilities open, insisting instead on equal agency freedom for men and women in choosing the functionings to be included in the capabilities set, which, if it can be achieved, is a more gender sensitive and gender equal path to the recognition and valuing of care.

The capabilities approach does recognize that, in practice, women’s agency is restricted. This is important, not least because the preference theory commonly used by neoclassical economists takes no notice of the way in which preferences are socially embedded. The CA recognizes both the importance of individuals’ diverse preferences and that they are formed in the context of unequal conditions, which means that preferences are likely to be adaptive. If women are to exercise real freedom to choose there must be equal freedom on the part of men and women to choose between alternatives (for example, between work and care). Thus agency freedom requires underpinning: real freedom of choice has to be guaranteed independently of the utilitarian gains that individuals with different preferences might make. It therefore follows that real freedom to choose paid work and to choose care work requires that a comparable value be attached to care. This is important because utilitarian preference models are often invoked to justify why care work does not need monetary reward. In the final analysis, neoclassical economic theory relies on biologically essentialist explanations as to why more women care than do men,

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22 Peter (2003) notes that there is a significant ambiguity in Sen’s treatment of women’s situated and restricted agency, an important point that we address below.
23 This is also the most common criticism of Hakim’s (2001, 2003) discussion of preference theory.
arguing that the motivation for care rests on the emotional and relational benefits that care work provides for women, which make the low monetary value that is attached to it immaterial (Folbre 1995; Folbre and Nelson 2000). The tendency to define the work of care as passive also helps to justify the low value attached to it. Thus the fact that care work is devalued regardless of whether it is carried out in the formal or informal sector (Ungerson 2000) is not of ethical concern within preference theory. Yet it has long been argued by feminist analysts that the value attached to particular activities is affected by who does them. The activities of the less powerful are devalued (for example, Bradley 1989).

Thus the CA enables us to argue that it is impossible to have “real freedom” to choose care work unless care is given a monetary value. But in and of itself, this is not enough to secure equal freedom for men and for women to make choices about care and employment. The CA recognizes this when it argues that in order to have real freedom to choose functionings, different individuals will require different kinds and amounts of resources (which is why equality of resources is in and of itself an insufficient condition for the achievement of chosen functionings). People may have different capacities to gain access to the same resource, and different potentials for converting resources into chosen functionings. Thus Sen (1999) has argued that poverty is best conceptualized in terms of capability deprivation resulting from the “coupling” of disadvantages deriving from lack of income and “conversion” difficulties. Resources are important in the capability approach; if care is unpaid or low-paid, women are at risk of capability deprivation. Nevertheless, the notion of personal, social and environmental conversion factors allows us to see that even if the same amount of income is given to a man and to a woman, the woman’s freedom to choose employment and care is still going to be unequal to that of a man. Her effective freedom to choose may, for example, depend on her physical characteristics. Pregnancy and childbirth will require special nutrition and health care, while the pregnant woman’s freedom to choose employment and care requires the right to not be dismissed from work and the provision of maternity leave.

Conversion factors are also social, and as Robeyns (2001) argues, it is this part of the CA that enables an argument for the correction of those structural inequalities between men and women that affect women’s ability to transform means into functionings; for example, the reference back to biological differences between men and women that result in employment discrimination against women. The gendering of social rights (Lister 1997) remains a key factor in the gendering of capabilities. Thus Browne et al. argue that “social rights are to be understood as part of the process of ‘institutionalising capabilities’” (2002:5). The entitlements that are needed by people wishing to choose care, both care and employment, or employment are quantitatively and qualitatively different. To choose employment and care, an individual requires either more money to pay for childcare or affordable childcare services, as well as a right to reduced working time and paid time to care. But real agency freedom also requires that there be a genuine choice to reject alternative functions. A carer may wish to choose full-time care, with the possibility of returning to the labour market at a future, specified date. In other words, a carer should be as free as a non-carer to choose to work. Clearly this requires anti-discrimination legislation, the right to return to the same job, and the offer of retraining. It also requires rights to income based on caring, at a sufficiently high level to secure the effective freedom to choose care. If a full-time carer is to be able also to choose to be politically active, then access to care services (currently often confined to working parents) is also required. Gender equality in capabilities for paid work and for care highlights the need for a combination of a variety of social entitlements, and brings to the fore the issue of time as well as money. It thus makes manifest the biases and limitations of the current policy trend that focuses on wages as the best form of welfare, active labour market policies, and care services aimed at the de-familialization of care.

The key advantage of using the CA to address the problem of gender equality in relation to paid work and care is that it provides a universal equality model rooted in the recognition of human diversity. It thus offers a way of recognizing and valuing care which does not get bogged down in the equality/difference debate. This is a major advantage, given that “care-centred thinking”, as much as neoclassical economic thinking, has tended to be biologically essentialist, stressing the
importance of gender difference as much or more than gender equality (for example, Noddings 1984). Using the CA, equality is conceptualized in terms of the equal substantive or real freedom to choose paid work and/or to choose care, and is applied to all universally. Real freedom to choose would require the attachment of a comparable resource value to care, independent of different preference gains. Through the capabilities lens, it is possible to identify the different personal and structural differences that result in women’s unequal freedom to choose paid work and care, and also to identify the conditions and diversity of resources, in terms of both quality and quantity, that are required to underpin women’s equal capability for paid work and for care.

In addition, Sen’s capabilities approach stresses that real agency freedom requires the inclusion of diverse voices in the definition and selection of functionings to be included in the capabilities set. The stress that is put on the equal empowerment of women in this respect means, first, that there is the possibility to identify the worth of care work, rather than insisting as current policy and policy analysis tends to do that gender equality inheres in equal opportunity to enter the labour market. Second, by requiring the capability for voice and by arguing that policies should be designed, implemented and evaluated on the basis of the real freedom that a person has to be and to do what she has reason to value, the CA exposes the democratic deficit of the instrumental approach that has informed the shift to the adult worker model.

However, in what follows, we argue that a conceptualization of gender equality in terms of individual agency freedom is not so immediately helpful when it comes to the sharing of care work between men and women at the household level. Indeed, this issue brings to the fore the tension between the individual’s real freedom to choose and gender equality of capabilities. We have argued that care is a core human activity and cannot be fully commodified. If this is so, then gender equality demands that care be shared at the household level. Furthermore, care is relational and creates interdependence between the giver and receiver, which in turn creates interdependence between the capabilities sets of individuals. Gendered power relations in households and the stronger pressure that women experience to undertake care mean that women tend to do more unpaid work (and give more care) than do men. Thus women’s agency freedom to choose between employment and care work is unequally restricted by the needs and choices of others. This brings us to the point where we must argue that in order for women to enjoy equal real agency freedom, men’s freedom not to choose care must be addressed. We do not advocate curtailing individual freedoms in order to deal with this, but rather make proposals that take account of relational interdependence in the democratic process of defining and selecting the functionings to be included in the capabilities set. This means that unlike Sen and Nussbaum, we attach importance to the evaluation of inequalities in group functionings and maintain that these, as well as inequalities in individual capabilities, are of ethical concern.

**Gender equality of capabilities: The problem of sharing care**

Many commentators have focused on the importance the CA attaches to the individual’s agency freedom and the extent to which this differs from the neoclassical economists’ emphasis on individual choice. Robeyns (2000, 2001, 2003) argues that the CA rejects ontological individualism (which conceives of individuals as atomized), in favour of an ethical individualism (which simply maintains that what matters for the purpose of evaluation is the individual), and also suggests that feminists should embrace this important distinction. We agree that the freedom and well-being of the individual, rather than that of her family or community, is particularly important for gender equality. Women’s poverty, income levels, control and consumption of resources have long been hidden behind the categories of household and family (Glendinning and Millar 1987), and a focus on individual well-being becomes even more pressing in the context of the shift toward the individualized adult worker model.

The rejection of ontological individualism is key to conceptualizing and assessing gender equality. Nelson (1996) has argued that within economics, Sen’s approach comes closest to ap-
preciating that individual agency is constituted through social relationships and thus requires material underpinnings, while Robeyns (2000, 2001) argues that the CA’s rejection of ontological individualism is most evident in its acknowledgement of the importance of social conversion factors. We endorse these arguments, and yet through a care lens we show that the CA remains based on a notion of a dependent, but also separate and self-interested self. We would add that a capability approach that takes gender equality seriously, departing from ontological individualism, requires recognition of the self as autonomous and interdependent, capable of making choices out of concern and responsibility for others, as well as for one’s self.

In the first place a rejection of ontological individualism implies the recognition that an individual’s capability to exercise agency freedom actually depends not only on the freedom to choose to give or not to give care, but also on the receipt of care. On this crucial point Nussbaum’s approach is more promising than that of Sen.

Nussbaum addresses care explicitly: “Any real society is a caregiving and care-receiving society, and must therefore discover ways of coping with these facts of human neediness and dependency that are compatible with the self-respect of the recipients and do not exploit the caregivers. This, as I have said, is a central issue for gender justice” (2003:51).

Thus she argues both that a core list of capabilities needs to be underpinned by the notion of the person “as both capable and needy” (Nussbaum 2003:54), and that “care for physical and mental dependency needs will enter into the conception at many points, as part of what is required to secure to citizens one of the capabilities on the list” (Nussbaum 2003:55). In making a case for care as a universal human need, Nussbaum recognizes that agency requires nurture, which allows for a strong argument for valuing care.

Yet this conceptualization is limited because it does not enable us fully to recognize that women’s agency freedom is unequally restricted by their caregiving. Nussbaum (2003), like Kittay (1999), approaches the issue of care from the perspective of the dependent—the person-cared-for—rather than the carer, which perhaps explains why care is conceptualized more as a universal human need, than as a central human activity. It is difficult to address directly the needs of those giving care within such a perspective. However, reconciling the demand for autonomy by both the carer and the person-cared-for is described as a central dilemma in the literature on care.\footnote{Besides the argument that individuals are both “capable and needy” begs for the recognition that human beings need, receive and give care. Care, like paid work, is a central human activity that has to be done, and, as we have shown above, it can neither be fully de-familialized nor fully commodified. It follows that a person’s real freedom to be and do what she has reason to value is not simply dependent on social entitlements or procedural justice, or even simply on her nurturing by others. It also depends on the needs and actions of others. In other words, the capabilities sets of individuals are interdependent (Basu and Lopez-Calva 1999), and such interdependence is particularly acute at the household level (Iversen 2003). A child’s capabilities are dependent in large measure on her mother’s choice to care or not to care for her, while her mother’s and her father’s capability to choose to engage in paid work or political activism are dependent on each other’s choices to care or not to care for their child.}

Sen’s (1990, 1999) cooperative-conflict bargaining model implicitly recognizes the interdependence of individuals’ capabilities sets at the household level, acknowledging as it does that individuals are dependent on others for maximizing their well-being.\footnote{According to this model, individuals engage in cooperative solutions because they have much more to gain from cooperative than conflicting solutions, albeit the different fall-back positions result in those cooperative solutions that benefit the more powerful the most.} However, care hardly appears in Sen’s writing. While he argues that perceptions of self-interest, contributions and legitimate claims are important to the cooperative-conflict model, he goes on to suggest that it is greater labour market participation that will increase women’s exercise of agency freedom and autonomy.
defined in terms of their ability to discern and secure their well-being vis-à-vis others. A woman’s employment will result in “a clearer perception of her individuality and well-being” and “a higher perceived contribution” (Sen 1990:144). Even from a self-interested bargaining agent perspective, this solution is problematic, because it ignores that care is a central human activity that cannot be fully commodified and thus, unless both highly valued and shared at the household level, inevitably lowers the perceptions of the contribution that women make.

In addition, Sen’s account of women’s low perception of self-interest ignores that women’s agency is situated in relationships of care, and therefore that concern for others needs to be taken seriously as an expression of autonomy (Peter 2003). In common with individualistic bargaining models, Sen’s CA is incapable of acknowledging the kind of relational interdependency that care entails: the self remains a dependent and yet separate agent that enters in cooperation solely to maximize his or her welfare. But caring is relational, and understanding the interdependency of the individual’s capabilities set at the household level requires the self to be conceived of as relational and as constituted in concrete relationship, whose well-being is connected to that of the other(s) involved and thus cannot be broken down into individual benefits and costs (Held 1993). Each individual’s autonomy is connected and dependent on mutual concern and responsibility: “Autonomy is more than choice and self-sufficiency. It involves accountability to others as a component of moral responsibility” (Porter 2001).

Agency is also unequally restricted along gender lines largely because men can be concerned about their relationships without being constrained by the undertaking of care work. For the most part, caring remains “the proper thing to do” for women, and their freedom to choose functionings remains restricted compared to that of men. It is women who experience a stronger pressure to care, as a result of gendered processes of identity formation (Graham 1983) and normative frameworks of obligations. Choices are made in the context of gendered inequalities in power relations, in all their economic, political and discursive manifestations. These skew the interdependency of men’s and women’s individual capabilities sets at the household level, because their negotiating positions are affected by group-dependent constraints and opportunities (Folbre 1994). If we maintain, as both Sen and Nussbaum do, that agency freedom requires that the real freedom to achieve the same capabilities set must be available to all, then, given the interdependence that characterizes care relations, it would seem to us that the key issue is not how to make women more self-interested but rather how to promote conditions that foster responsibility for sharing care between men and women, and that enhance women’s agency freedom by making men more accountable for their responsibility to care for others. But this is particularly difficult within the CA.

Genuine choice is affected by the issue of unequal power relations, which distort the interdependence of men’s and women’s capabilities sets. The absence of attention to power has been a common criticism of the CA and was raised in a recent issue of Feminist Economics, which was devoted to the work of Sen (Sen et al. 2003; Hill 2003). In response, Sen agreed that it is impossible to address the issue of gender equality without addressing the issue of power asymmetries, and further argued that this concept is present in his work on gender (Sen et al. 2003). The problem, he suggested, has mostly to do with his limited use of the word “power”, and his use instead of terms such as capabilities, agency, empowerment and freedom. However, all these terms pertain to power as a generative concept rather than to power as domination. Feminist writers engaging with the issues of individual and collective agency argue that an important distinction needs to be maintained between generative power and power as domination (Lister 1997; Siim 2000): “People can be, at the same time, both the subordinate objects of hierarchical power relations and subjects who are agents in their own lives, capable of exercising power in the generative sense” (Lister 1997:40). Siim’s comparative study tracing the impact of women’s agency on social and political citizenship shows the importance of engaging with a

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27 Agarwal’s (1997) empirical evidence as to women’s covert strategies of resistance suggests that they are also self-interested, which leads her to argue that Sen should focus on the constraints or restrictions on their agency, rather than on raising their consciousness.

28 Olson (2002) also assumes that gender inequality results from women’s lack of cultural capability.
dynamic notion of power, which neither underestimates women’s individual and collective agency, nor denies the persistence of male domination. The CA enables us to make a strong case for the empowering of women’s capabilities for voice (as we argued above). But it is also important to acknowledge that gender inequalities in political presence and power undermine women’s capability for voice in the definition and selection of capabilities, which means in turn that the issue of how to share care is also less likely to be raised.

Indeed, the recognition that real freedom of choice is undermined by unequal power relations highlights the importance of both valuing and sharing care. In this respect Tronto’s (1993) argument for an ethic of care makes a strong political case for the valuing and sharing of care. She denies any notion of innate or moral differences between men and women, and argues that the denial of interdependence and the devaluation of care help to maintain relations of subordination:

Disdain of ‘others’ who do caring (women, slaves, servants) has been virulent in our culture. This dismissal is inextricably bound up with an attempt to deny the importance of care. Those who are powerful are unwilling to admit their dependence upon those who care for them. To treat care as shabby and unimportant helps to maintain the positions of the powerful vis-à-vis those who do care for them (Tronto 1993:174).

A more equal division of care work between men and women in the household is more likely to increase women’s economic power than attaching a material value to care work (necessary though this is), because it is unlikely that any government will ever attach a high enough value to such work (in the informal or formal sectors) (Bojer 2002; Lewis 1997). Sharing care work between men and women also increases the possibility of women choosing to engage in some form of political participation. Thus a more equal gender division of care work at the household level serves to increase women’s collective economic, political and discursive power (which in turn makes it more likely that material value will be attached to care).

Robeyns (2000, 2001) argues that, because Sen offers an open approach to the construction of capabilities sets, it is possible to further develop his approach and to supplement it with gender-sensitive theories to account for gender-specific constraints on women’s choices. Thus it should be possible to recognize that the interdependence of individuals’ capabilities sets and the impossibility of fully de-familializing and commodifying care results in women’s restricted agency. However, this does not go far enough in terms of addressing the problem of how care is to be shared. Equality of real agency freedom means that undertaking necessary and central human activities cannot be conceived solely as opportunities and enabled as individual choices. Care has to be done—it is a central human activity—which is why conceptualizing it as an opportunity or a choice (as in the capabilities approach) does not succeed in meeting all the issues that arise from it. More fundamental still, is the way in which the CA makes agency freedom of the individual pivotal, which poses the challenge of how to also acknowledge the extent to which care involves interdependence, and the way in which women’s agency freedom is effectively restricted by the choices that men make, which are part of the unequal power relations in households.

**Conclusion: Principles to Underpin Policies that Promote a Gender Equality of Capabilities**

We would argue that care must be conceptualized as both a “legitimate” opportunity/choice (which the CA helps us to do), and as a necessary central human activity, which in turn provides the basis for arguing that it must be shared between men and women. This is additionally necessary if women’s agency freedom is to be equal to that of men. It is very difficult to reconcile the agency freedom of the individual with (gender) equality and justice, and this is a key area of disagreement between Sen and Nussbaum. Nussbaum (2003) goes so far as to argue that

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29 Lister 1997; Phillips 1993; Young 1990.
gender justice and equality justify the curtailing of male freedoms that impinge on women’s liberties and opportunities, giving the example of men’s freedom sexually to harass women in the workplace. Yet as Boyer (2002) also notes, she does not apply this reasoning to the gender division of labour: “For me, as for Rawls, it is wrong for the state to mandate the equal division of domestic labour or equal decision making in the household...it just seems an intolerable infringement of liberty for the state to get involved in dictating how people do their dishes” (Nussbaum 2000:279–80). Since men’s free-riding on women’s care work is also highly problematic, Boyer (2002) concludes that men’s freedom not to care must be curtailed through compulsory care leave.

Of course, compulsion, sanctions and penalties (see also Taylor-Gooby 1991) run the risk of causing resentment, and they threaten the moral qualities of attentiveness, responsibility, competence and responsiveness that characterize genuine care (Tronto 1993). The argument we have put forward about care suggests that it is inherently relational. This means that the individual’s autonomy and interdependence must be recognized. Ultimately, it is only when all persons are conceived from the start as autonomous and interdependent—that is, as someone who needs, gives and receives care (Fraser 1997; Lister 1997; Tronto 1993)—that gender equality in respect of agency freedom can be embraced. We all need others to care for us in order to develop agency freedom, and gender justice therefore requires that this necessary human activity be valued and shared. Gasper and Staveren (2003) have argued that the dominance of the value of the individual’s agency freedom within the CA needs to be balanced by attention to the values of justice and care. They suggest that capabilities should be conceived of as opportunities and skills, which makes it possible to make a more attractive case for the sharing of care on the basis of both justice and personal development, resulting in the redistribution of freedom-like capabilities to women, such as economic independence, and care-like capabilities to men, such as responsibility.

However, conceptualizing the gender redistribution of paid work and care in terms of redistribution of opportunities and skills may not be sufficient given that the interdependence of men’s and women’s agency freedom is skewed by unequal power relations. As Phillips (2001) has argued, it is impossible to ignore group inequalities of this kind. Inequalities in “group functionings” (for example, the fact that women persistently do more care work than men) signify gender inequalities in capabilities (unless of course we assume that the distribution of preferences between men and women is rooted in sexual difference), and gender justice requires that note be taken of them. This is why it remains crucial that care be conceptualized as a necessary human activity that requires sharing, as this is also a strategy for confronting unequal power relations between men and women. In this respect it is difficult to ignore the ethical importance of group functionings in relation to care and employment. In addition, the issue of gender inequalities in control of resources needs to be addressed. But, unlike Phillips (2001), we would argue that the idea of equality of capabilities remains important, and that once the rationale for addressing men’s freedom not to choose care is accepted, the idea of personal and structural conversion factors, which is central to the CA’s notion of positive freedom, can be stretched to address gender inequalities in control over resources. In other words, a less powerful individual needs more resources to be able to choose the functionings that she values out of her capabilities set.

The capabilities approach can therefore justify the kind of measures required to make a real choice to care in respect of time to care, cash for care, care services and the regulation of working hours and so on. Such measures can be justified on the basis that they are needed in order to permit the individual to make a real choice. In practice, they have usually been invoked to enable individuals (usually women) to choose to add work to care (the supported adult worker model common in the Scandinavian countries and discernible in some, but not all, EU-level policy documents) and they rely primarily on sharing care between (women in) households, on the one hand, and some form of paid provision, on the other. However, we have argued that care must also be shared between men and women at the household level, and that it is necessary to recognize the importance of interdependence and unequal power, as well as the individual’s agency freedom to achieve this. On this basis, it is possible to advocate positive incentives for men as individuals to
engage in care alongside the reform of the male employment model, involving both policies directed at men as individuals, such as the Scandinavian “daddy leave”, and policies directed toward male workers as a group, for example in the form of reduced working time (a shorter working week and the regulation of overtime). In short, this requires a radical transformation of the male employment model, which has continued to inform the shift to the adult worker model. The logical end of the argument presented here is a universal carer/worker–worker/carer model (see also Lister 1997, 2003), which requires a commitment to provide time to care and affordable, accessible, high-quality services, as well as cash for care.

The task of devising social policies that promote real or genuine choice for both men and women in respect of paid and unpaid work poses huge difficulties. Both employment and care are necessary for human flourishing. Care is not just “a good thing”, it is crucial to the welfare of the person-cared-for; employment is not just “a good thing”, it is crucial to the welfare of the adult (and likely to become more so as governments assume the capacity for self-provision will increase). From the point of view of human welfare, it is impossible to choose not to care or not to work. In this sense, to choose between them has the hallmarks of tragedy as much or more than opportunity, which makes it all the more important seriously to address the policies that play a part in structuring people’s choices.
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