Chapter 4

[title]Care as Ethic, Care as Labor

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As the name suggests, *care* lies at heart of Early Childhood Education and Care (ECEC). However, the nature and status of this care has been the subject of both discomfort and contestation. In considering the low- or non-paid nature of early years work, widely circulating discourses about the low-skilled nature of early years provision, and the rendering of the very young to a quasi-natural and not-yet-fully-human state, it is not surprising that ECEC has at times been designated as less valuable and less important than formal schooling. Such assessments have not been left to fester in their own circular logics, however, but have been widely contested in academic, advocacy, and professional literature. Efforts to elevate the status of early years provision have been pursued through the addition of the seemingly more important element of education to childcare in formulations such as educare and ECEC. Pseudoneurological evidence about the importance of the first 1000 days has been mobilized to advocate for increased attention to early years provision (Bruer 1999, Edwards, Gillies, and Horsley 2015), often framed within the neoliberal terms of human capital development. Care itself has also been reclaimed from the dustbin, with attention to its social worth bolstered normatively and politically through attention to a feminist ethics of care (Langford et al. 2017, Davis and Degotardi 2015).

In the discussion that follows I suggest that an ethics of care offers promising directions for highlighting the importance of ECEC as well as the types of relationships that can be fostered both within and by ECEC. However, in the current context of global capitalism, characterized by increasing geo-political inequities and state retrenchment from social reproduction in the name of

neoliberal austerity, an ethics of care approach is likely to fall prey to or even reproduce the very problems it seeks to address without explicit politicization of key questions. What is lost or gained through invoking the concept of care, rather than other concepts? What are the social relations in which ECEC is embedded and involved in reproducing? Put simply, who cares for whom and who is recognized as providing care? How is care bound up (potentially simultaneously) with processes of accumulation, oppression, and solidarity?

These are not new questions, but they have made surprisingly little impact on discussions of ethics of care in ECEC to date, which have focused on professional identities, including surveillance and governmentality (Davis and Degotardi 2015, Gibbons 2016); the relationship between education and care (Gibbons 2016, Langford et al. 2017); relationships between parents and educators (Brooker 2010); and the place of care in producing hope, possibility, and social value (Taggart 2011). In this literature, an ethics of care has demonstrable value for reconceptualizing self and other through relational frames of interdependence. However, hiving care off from the political economy does little to challenge the unequal terrain in which these relations are lived. A different body of work takes up questions of the class relations and emotional labor involved in ECEC (Colley 2006, Rosen, Baustad, and Edwards 2017), but it can be critiqued for reducing caring relationships to those of exploitation and subordination. In many ways, this literature reflects a broader schism between treatments of care as a moral orientation to others and the world and that which considers the labor relations that lie at the heart of the political economy of care (Mahon and Robinson 2011).

These two bodies of work are not necessarily incompatible, but they do reflect disciplinary divides and differences in scalar attention. What is incommensurate, however, are variations in the political orientations that underpin theories of care, including those that might

constitute themselves as feminist. These range from the gendered essentialism embedded in maternalist approaches (Ailwood 2007) to the individualism, categoricalism, and reformorientation of liberal thought, through to those with an anti-capitalist orientation that emphasizes relations of power, dispossession, accumulation, and emancipation.

In what follows, I make three key points. First, if we retain care as a key mobilizing concept, this is best conceptualized as a broad, multifaceted set of practices rather than a valorization of the emotional and intimate over and against those practices that are messy, menial, and repetitive. This more expansive understanding provides the basis for understanding the links between various acts of care, attending to the geopolitical conditions under which care labor takes place, and its links to capital accumulation in transnational contexts. This also, and here lies my second point, provides the analytic tools to counter the social stratification of such labor, which often maps on to gender, class, 'race', and immigration status. Asking who does what sort of care labor likewise enables consideration of children's potential caring contributions, in contrast to much of the literature that positions children as the recipients or even objects of care. Third, I make the case for a consequentialist approach that keeps front and center questions as to the effects of diverse caring practices and caring landscapes. This necessarily implies bringing global political economic traditions together with an ethics of care. While these three points do not exhaust areas of concern, I suggest that they are particularly crucial for developing a robust and critical feminist ethics of care that is up to the task of considering the ways in which lives are made and made worth living (Narotzky and Besnier 2014) in ECEC.

[head]Valorizing Care?

Since the 1970s, there has been a proliferation of work highlighting the importance of care both as a way of understanding the interdependent character of human life and as a form of ethical

action and grounds for contextually located moral and political judgment. This has countered a persistent equation of maturity and professionalism with autonomous rationality and acts of justice as therefore about maximizing self-interests in an often-competitive contest of rights, both of which are emblematic of liberal political thought. Such assumptions, argues Geoff Taggart (2011, 85), continue to populate common understandings of ECEC, where "the suggestion of a need to go 'beyond caring'" is premised on linkages "between caring and female irrationality or anti-intellectualism."

In contrast, ethics of care theorists argue that ethical decision-making and action is centrally about building and sustaining relationships to ensure that no one is "left alone or hurt" (Gilligan 1982, 59). While early ethics of care scholarship has been widely critiqued for essentializing care in maternalist terms (i.e., used in reference to women's activity) and parochially situated in close personal relationships, most notably in the mother-child dyad, more contemporary theorists have countered such problems through efforts to widen and politicize care ethics. This is often through an explicitly feminist lens that centers on responsibilities toward others. Joan Tronto (1993), for example, has argued that while there is much to be learned from care work, which continues to be highly gendered, an ethics of care is a more generalized form of moral activity that is not limited to women's practices. She makes the case that "the ethic of care entails a basic value: that proper care for others is a good, and that humans in society should strive to enhance the quality of care in their world 'so that we may live in it as well as possible" (Tronto 1995, 143). On this basis, care becomes a framework for making political decisions cognizant of people's needs, the socio-cultural and institutional and political contexts in which care occurs, and power and inequalities in care relations.

Taking up an ethics of care for early childhood, Rachel Langford and colleagues (2017) argue for the "revalorization" of care. They suggest this can helpfully contest the bifurcation of care and education, where care has largely been relegated to a supporting position for education, which is in turn treated as having greater importance. Revalorizing care in such a way both recognizes its centrality to human life, and thus eliminates deficit treatments of dependency, and counters the mind–body dualism at the heart of liberal distinctions between care for the body (in ECEC) and education for the mind (in compulsory schooling). These are certainly laudable goals, and I concur with the proposal to think otherwise about affective labor and interdependence given their implications for ECEC and the status of children (about which more later).

The risk here lies in what exactly is meant by *care* in these invocations and what is rendered absent. It is precisely such concerns that prompt Rhacel Salazar Parrenas (2012) and Eleonore Kofman (2014) to argue *against* the turn to care in the effort to recognize and raise the status of all those activities we engage in to make lives and make lives worth living. Three crucial things happen in the turn to care. First, the various tasks involved, which include emotional labor as well as physical or 'menial' labor that is either routine (e.g., cooking, cleaning, and feeding) or non-routine (e.g., provision of remittances, laundry, handiwork) become disconnected. In this act of separation, care is often taken as a reference to fulfilling intimate and loving emotional engagement as opposed to the dirty and repetitive labor involved in making lives. For instance, in seeking to valorize care as being about the mind as much as the body, Langford and colleagues (2017, 315) are at pains to explain that it is "more than basic custodial activities." However, phrased in this way, it suggests that "custodial activities" are not only distinct from, but also seemingly inferior to, other aspects of care.

The separation of these various activities in Kofman's account means that the "dirty work" is often pushed on to lower status workers, such as those coming from migrant and/or impoverished backgrounds, freeing the (relatively) privileged to engage in more valued caring practices. Such stratifications of laboring bodies are apparent in ECEC contexts where there are often sharp divisions between professionalized educators and teaching assistants, as well as in quasi-familial settings where the labor of migrant domestic workers frees up parents to engage in the more prized activities of reading bedtime stories or to love bomb¹ their children (Rosen and Newberry 2018). Such distinctions also have analytic consequences, indicative that scholarship is complicit in the process of valuing certain bodies and certain practices as a result of the way that concepts are defined and applied. Drawing on census data to compare the demographic distinctions that occur when care is conceptualized in the more limited terms of face-to-face nurturance as opposed to the broader set of tasks described above, Mignon Duffy (2005, 79) puts this in strong terms: "A theoretical focus on [care as] nurturance privileges the experiences of white women and excludes large numbers of very-low-wage-workers."

In their discussion, Langford and colleagues make it clear that caring activities are embedded in relations of power and inequality. Indeed, this important point is one that animates much of the contemporary literature on care (Bowlby 2012). Yet, it becomes difficult to contemplate such inequities or the potentially exploitative and subordinating characteristics of caring labor at the same time as seeking to valorize care. This is again a symptom of the reduction of care to acts of fulfilling nurturance, and the absenting of the more menial and dirty aspects of such labor. Perhaps more significantly here, it reflects slippages between the

¹ As advocated by psychologist Oliver James, this involves creating a short term "special emotional zone" with a child away from any regular daily routine and "bombing" them with love and fun. https://www.theguardian.com/lifeandstyle/2012/sep/22/oliver-james-love-bombing-children

conditions and practices of care and care as a more generalized framework for moral decisionmaking, where care may be advocated as a moral good regardless of the conditions under which it manifests.

[head]The Potentials of Social Reproduction Theory

Given the problematics of valorizing care, or indeed centering analysis on care, Kofman (2014) argues persuasively that the concept of social reproduction has greater analytic purchase for understanding the concrete labor, and often love, that goes into making lives (and see also Parrenas 2012). Indeed, social reproduction theory is having somewhat of a renaissance, as many social theorists agree that the widespread turn to cultural explanations in the 1990s is insufficient to explain the heightening inequalities and material deprivations that have followed the 2007–8 financial crisis and ensuing "global slump" (McNally 2010). More than a Bordieuan understanding of the production of the *habitus*, social reproduction refers to the processes through which the material conditions and social relations necessary for capitalist production, consumption, and accumulation are constituted. In the more specific form that Kofman takes up, social reproduction refers to "life's work" (Mitchell, Marston, and Katz 2003), all those activities that go into daily regeneration and generational replacement, put simply: grocery shopping, feeding, cleaning, putting to sleep, socialization, and other caring labor.

With its roots in feminist anti-capitalist perspectives (e.g., Marxist and socialist feminism), social reproduction theory emerged as an effort to understand women's subordination in capitalist societies. Social reproduction theory focuses on labor that is excluded politically, spatially, legally, and discursively from consideration within a wage calculus, in the sense that women's need to eat, rest in decent shelter, clean themselves, and renew themselves in loving relationships remain shadowy or invisible when salaries are determined. These needs are

"outlawed" (Kelsh 2013) and privatized, typically in highly gendered ways within the family where women's potential capacity to give birth is over-extended to the broader realm of social reproductive labor and then naturalized (McDowell 1986). Yet, this labor is both socially and biologically necessary. It embodies, therefore, a set of crucial contradictions in its necessary accomplishment. Taking ECEC as a case in point, the increasing demand for service sector workers in advanced capitalist countries has been accomplished in part through the growing presence of women in the workforce (Gottfried 2012)², yet this has reduced the amount of time women have to contribute to generational replacement, including care for young children. Formal provision of ECEC can be seen as both a fix for capitalism's contradictory short- and long-term interests (for service workers in the immediate term and generational replacement for the future) and a demand from women burdened³ by a double-day of wage labor and unwaged caring labor in contexts of increasing retrenchment (Rosen, Baustad, and Edwards 2017).

A crucial difference lies in capitalism's drive to accumulate. This includes expansion and efforts to addressing its periodic crises, such as that prompted by the easy available of cheap credit and massive build-up of personal and national debt in the neoliberal period prior to 2008 (Dowling and Harvie 2014, 874). From capital's perspective, new sources of profitability are sought through shifting constellations of state and supra-state governance structures, capital, families, and civil society. For instance, there has been a spatial expansion of the sites in which social reproductive labor is accomplished (Kofman 2014). States may intervene to set up public ECEC programs, develop immigration policy to incorporate migrant domestic labor, or create the

² This is not to suggest that service work necessarily requires women workers, simply that this sector has been both constructed as highly feminized (or filled with migrant workers in the racialized division of labor).

³ My use of the term "burden" here is to highlight the unequal distribution and valuing of this labor. As I go on to discuss later in the chapter, children cannot be reduced to "burdens" but are often compatriots in the labor of social reproduction (Llobet and Milanich 2018) and parent–child relationship are often simultaneously experienced as fulfilling and loving, at the same time as requiring financial, physical, and emotional resources.

conditions for market provision. The latter is evident in the UK's prioritization of private early years provision, with local authorities mandated to develop their own provision only in the last instance. Social reproduction is a site of direct profit-making through for-profit provision and indirectly benefits capital and the state as the direct financial costs are shouldered by families. Costs for ECEC in the UK can amount to 33.8% of a family's net income.⁴ Capital's increasing transnational mobility also allows it to increase profits through an untethering from situated responsibility for social reproduction such as through national taxation systems (Katz 2001). The primary point here is that social reproduction theory provides the analytic tools to investigate linkages between care and capital accumulation.

A newer body of social reproduction scholarship moves away from the homogenizing and reifying focus on women's social reproductive labor to highlight that capital accumulation through social reproduction is highly differentiated. In pointing out that social reproduction is "stratified," Shellee Colen (1995) argues that the same labor is not equally valued and rewarded. This can be seen in global care chains, as care labor is transferred from more privileged families to less privileged migrant workers, who in turn transfer their caring responsibilities in home countries to members of their extended family, with care losing value as it moves down the chain (Parrenas 2012, Hochschild 2000). Social reproduction is also stratified in its accomplishment, with some groups facing more material and normative barriers to ensuring such life sustaining activity than others, and some groups are simply not deemed worthy of care. Drucilla Barker (2012, 588) argues that social reproduction can also be understood as an arena of social exclusion, where "young children of European ancestry are the most deserving.... The children and elderly in the sending countries simply fall out of sight like the abandoned children in the

⁴ This is according to data from the OECD report *Society at a Glance* 2016 available at <u>http://dx.doi.org/10.1787/888933404933</u>. The average amongst OECD countries is 15%.

favelas and slums of the world, the impoverished elderly and sick, and all others who lack the resources to prosper in a globalized, neoliberal world." Here I would stipulate that in a globalized world, children of the wealthy may have far more in common with their peers from other countries than with those from impoverished families in their own countries, and therefore the necessity of refraining from reifying a North–South binary should be recognized. For instance, the cost of ECEC can be prohibitive in the UK, but it is particularly so for families living on a low income. These families are particularly hard-hit by state retrenchment from ECEC services, such as the halving of funding for *children's centres* in the austerity climate following the global financial crisis of 2008.⁵

In my own work, I have also been concerned with the ways that social reproductive labor not only links children and women but also differentiates and stratifies them (Rosen and Newberry 2018, Rosen 2017, Rosen, Baustad, and Edwards 2017). Women and children have often engaged together in household-based reproductive tasks, in large part due to the feminization of both social reproduction and childhood. However, the global rise in attention to ECEC has led to shifts in expectations as to where and how children and women are expected to spend their time, energy, and labor. In countries such as Indonesia (Newberry 2014) and Brazil (Rosemberg 2005), women are expected to voluntarily provide the labor required to maintain ECEC programs often mandated by the World Bank. They often do so willingly, galvanized by notions of feminine altruism, sacrifice, and concern for their communities.

Children, on the other hand, are expected to attend such ECEC programs. Much of the literature treats children as the *objects* of social reproductive labor in ECEC, burdens on their mothers due to the labor and financial costs involved in the provision of such care *and* the

⁵ https://www.theguardian.com/society/2018/mar/20/sure-start-funding-halved-in-eight-years-figures-show

increased labor required in the household due to children's absence for ECEC and schooling. Children, in these accounts, are identified as the clear benefactors of "Education for All" and similar global initiatives (Rosen 2017, and for examples see Dobrowolsky and Jenson 2004, Molyneux 2006). In contrast, Jan Newberry and I make the case that children are *also* involved in social reproductive labor, both in households and ECEC (Rosen and Newberry 2018). In ECEC, such labor involves not only daily sustenance but also the quality enhancement of exploitable labor power. In neoliberal ECEC, provision of care takes the form of human capital development tied to national competitiveness and capitalist profit (Rikowski 2000, Langford et al. 2017).

While this may appear as conflicts between women and children, benefits accrue to capital and the state in the form of reduced costs of social reproduction. But this also promises increased profits through the presence of low-wage surplus labor subsidized by women's volunteerism (Newberry 2014) and, in the longer term, increased profitably through enhanced labor power. Yet, as we note, and in keeping with (Barker 2012), not all children are deemed worthy of ECEC and their participation in reproductive tasks may be appropriated immediately rather than in the longer term. Importantly here, social reproduction theory helps make sense of questions about differentiation, stratification, and accumulation linked to the labor of making lives.

[head]Theorizing Care with and through Social Reproduction

Regardless of whether we take up Kofman's challenge to jettison care and replace it with social reproduction, it seems to me that the challenge offers some important warnings about the risks of efforts to valorize care and the challenges of taking up an ethics of care that is not adequately

framed within the discussions of the global political economy. In the ensuing discussion, I discuss what such a theorization of an ethics of care might look like.

If we are to retain care as a key mobilizing concept, it is best conceptualized as a multifaceted and often contradictory set of practices, inclusive of those that are affective, fulfilling, messy, menial, and repetitive. Fisher and Tronto (1990, 40) provide such a definition of care as all those activities undertaken to "maintain, continue, and repair our world [including our bodies, our selves, and our environment] so that we can live in it as well as possible." In keeping with Kofman's warnings, such an expansive definition provides the basis for understanding the links between various types of activities involved in making lives worth living, including in ECEC.

This expansive understanding also allows care scholars to look across the various sites and modes in which ECEC is provided, a move that is to be welcomed if we are to understand the various interlinked contexts in which care occurs. Current literature tends toward focusing on national provision within formally regulated institutional settings. Yet this encompasses only a small range of sites where early years provision takes place, which include public institutions, market-based provision, home-based care, programs in the voluntary sector (Rosen, Baustad, and Edwards 2017), and migrant domestic labor in household settings. Most obvious in the case of the latter, it is necessary to move away from methodological nationalism to account for the transnational character of care in ECEC. This includes the movement of care workers; the transnational families and ECEC networks they are embedded within (Baldassar and Merla 2014); flows of ECEC policy and markets across national borders (Penn 2011); and the often clashing ways that local variations of care are understood and practiced. In short, this broad conceptualization keeps in focus the breadth of ECEC sites and ways it is organized.

Such a broad focus also calls attention to whom is doing what sort of caring work, if this is recognized as such, and in what ways it accorded value. I have already discussed this in relation to the addition of stratification to understandings of social reproductive labor. This has been essential in countering the naturalization of care as women's domain and considering the ways that variations in caring labor map on to gender, class, 'race, and immigration status. But here I also gesture to the importance of the question as to who does what sort of care labor in relation to children. For keeping this as an open question prompts and enables consideration of children's potential caring contributions, understood in the broader sense of tasks of making and sustaining lives.

Tronto (2011) again is instructive here in her insistence that care is defined by its reciprocity: everyone provides and receives care. "While the typical images of care indicate that those who are able-bodied and adult give care to children... it is also the case that all able-bodied adults receive care from others, and from themselves, every day.... Except for a very few people in states that approach catatonia, all humans engage in caring behavior toward those around them" (Tronto 2011, 164). Yet, this point is often lost in the ECEC literature (and scholarship on gender and family that focuses on advanced capitalist countries) where care is assumed descriptively and normatively to be an adult activity. The influence of attachment theorising in ECEC is noteworthy here as it has been widely interpreted as a dyadic relationship between educator and child in which care is undertaken by the educator (Pearson and Degotardi 2009). Discussion and debate in ECEC scholarship are important but largely adult-centric in their formulation of care: critiques are leveled against policy formulations that position ECEC educators as a providing remediation in the face of inadequate parental care (James 2012) or that highlight the impact of neoliberal and exploitative conditions in which educators strive to

provide quality care (Andrew and Newman 2012, Dahlberg and Moss 2005). In the bulk of ECEC literature, young children are largely reduced to a state of fundamental dependency on adult care, albeit within important efforts to resist the equation of dependency with a less-than-human status (Langford et al. 2017).

Children, in so far as they are recognized as being more than simply the object of care, are treated as learning to care, engaging in non-normative activity, or as providing care as a form of long-term, generalized reciprocity. Care in families, for example, is characterized by "the expectation that the giving of care must ultimately be reciprocated" although this can happen at "different times and to varying degrees across the life course" (Baldassar and Merla 2014, 7). Such an understanding is exemplified in the idea of a generational contract, where parents care for children who return that care as both age. In other words, children are understood to be available to care for their parents when they themselves are adults. In liberal and welfare regimes where care is organized, in part, in public or market-based sectors, generalized reciprocity may take the form of contributions to social programs (including ECEC) that create the conditions where care can be provided for different people over time.

However, a small body of literature indicates the limits of viewpoints that normatively and empirically constitute children solely as recipients of care. Needs may change over life course or context, but historical and contemporary evidence suggest that young children have the potential capacity to, and often do, engage in caring acts for themselves and others. As Magazine and Sánchez (2007) point out in their research on the Mexican community of San Pedro, Tlalcuapan, children as young as two years old are expected to contribute their reproductive labor to the household and are expected to care for younger siblings by the age of six. Children spend 4-6 hours on these and other household activities. Children's provision of care is not just

possible but is socially expected. It is viewed as *ayuda*, or help for their families, in ways that are understood to underscore familial interdependence rather than promoting development and socialization or addressing economic necessity.

My own research in formal ECEC in the UK demonstrates the ways that children care for others in a multitude of ways, albeit that this is often not categorized as such. Aside from more recognisable forms of care—such as soothing others who are upset, taking part in preparing food and cleaning up, or providing advice about how to navigate setting rules and customs—my ethnographic work on children's play about themes involving death and dying demonstrates children's capacity for "attentiveness" (Tronto 1989) to others and documents their efforts at using caring touch to convey a sense of belonging, concern, and mattering to others. While these latter caring practices occurred within the context of imaginary narratives, I argue that the desire for care from other children was evident and that the "embodied nature of imaginative play allows for the affective and haptic sensations of caring relations to traverse into players' everyday world[s]" (Rosen 2015, 171). I also suggest that children provide care for adults in the setting, including by sheltering adults from their own anxieties and helping adults feel that they were having a positive impact.

The primary point for this discussion is that children, as with adults (Sayer 2011), are socially and existentially vulnerable and are therefore reliant on others for sustenance and survival, but that the need for care does not exhaust their being. Keeping the question of care open—what it is, who does it, and how it is valued—allows consideration of such points. This is not to reject care provision for children but as a remedy for the rendering invisible of children's caring labor. When scholarship, policy, and practice does so, children's contributions are ignored and undervalued. When treated as inherently and essentially dependent beings, the category

young child is reified and placed outside of the social in ways that decontextualize and dehistoricize childhood. The rise in "child protection institutions" (Gillis 2011) in capitalist modernity comes to be seen as natural necessity rather than a manifestation of a particular social, political, and economic conjuncture in which childhood has become sacralized as a period of emotionally priceless innocence to be protected from the world rather than being treated as a part of the world (Viruru 2008). Taking seriously feminist critiques of approaches that fail to account for the contributions of unwaged reproductive labor to sustaining life and to surplus value appropriation demands that the same consideration is given to the caring practices that children may engage in.

Finally, it is also necessary to make clear distinctions between care as a moral framework and care as a set of practices bound up with inequitable social relations, power, and global capitalism. Here, scholars need to be attentive to the ways that an ethics of care may be used to justify exploitation of those working the field of ECEC. For instance, as Helen Colley (2006) documents, training for educators in the UK is geared not only toward skills development and knowledge acquisition but also to the production of particular caring dispositions and associated emotions. Being calm, happy, and warm is cultivated, while feelings of anger or disgust are treated as inappropriate and requiring management. These certainly resonate with qualities embedded in an ethics of care perspective, which are attentiveness, responsibility, and responsiveness (Tronto 2011). However, Colley demonstrates that for ECEC students this can be stressful and disempowering because such "feeling rulings" are based on middle-class notions of deportment and respectability, whereas many of those working in the ECEC field come from impoverished and working-class backgrounds. Further, because the affective labor of managing oneself in such ways occurs in the context of marketized ECEC, emotions and subjectivities

become a source of profit for someone else. While Colley focuses on the UK context, the international application of the Caregiver Interaction Scale (CIS) to measure such attributes is indicative that this is a more global phenomenon.

Borda Carulla's (2018) ethnographic research on *community mothers* who work in the Colombian government's childcare program raises a parallel set of concerns about the ways in which ethics of care principles dovetail with exploitative gendered expectations in the division of labor. The program emerged as part of the state's concern for improving children's communities and national wellbeing through attention to children's care. Although it was applauded by the World Bank and the Inter-American Development Bank as a "model of social development," women's labor rights were systematically violated by the program in the name of "putting the child first." Borda Carulla argues that if women's rights are not protected, it is likely that the rights of the children they care for will be violated as well. Although she makes little of this point, it is noteworthy that to meet the impossible conditions imposed by the government program, many community mothers relied on their own children's caring labor for the other children in their care.

The concern here is that calls in the ECEC ethics of care literature, for instance for "care to re-emerge as an integral part of professional practice and professional identity" (Davis and Degotardi 2015, 1744) where caregiving involves "hands-on work that requires more conscious decision-making and dense time commitments" (Davis and Degotardi 2015, 1741), can serve as a motivation and indeed justification for exploitative conditions of caring labor if the conditions under which this labor occurs are also not simultaneously addressed. In contrast, taking an explicitly feminist and anti-capitalist approach to an ethics of care, as detailed above, can provide the tools for attending to the geopolitical conditions under which care labor takes place and its

links to capital accumulation in transnational contexts. It can also provide the basis for making political judgments based on relational ontologies of social interdependency and a commitment to social and economic justice.

[head]Conclusion

In concluding this discussion, I make the case for a consequentialist approach that keeps front and center questions as to the *effects* of diverse caring practices and caring landscapes. This is not a claim to utilitarianism or an impossible demand that we predict the unknowable outcomes of actions but an insistence that the possible, probable, and actual outcomes of approaches to care be considered. In keeping with the consequentialism put forward by Nancy Fraser (1990, 220), scholars might ask whether discursive, embodied, and structural aspects of care "disadvantage some groups of people vis-a-vis others"? Do they challenge or buttress "patterns of dominance and subordination"?

Rather than taking care as an *a priori* good, then, I am suggesting that invoking care as an ethical orientation requires unpicking the ways in which care relations may be ones of subjugation, ambivalence, concern, and solidarity, often simultaneously. In many ways, it is in the contradictory nature of care labor that its power lies. As the feminist anti-capitalist scholar Sylvia Federici (2014) explains, care has an important duality to it: necessary for capital in that it ensures workers on daily and generational basis *and* simultaneously a practice that can foment ways of being and social solidarities in opposition to the exploitative and competitive character of capitalism. For this reason alone, care—as a site of contestation, possibility, and necessity—is a powerful concept to work with.

While an ethics care may offer ways to think in morally responsible ways toward others, one that is in keeping with the interdependent character of human life, the structure and

organization of caring practices raises undeniably political questions. Who is benefitting from the current arrangements of care and who is harmed? How we might achieve more socially and economically just ways of caring, of making lives worth living? These political questions also require political responses that, I would suggest, are entangled with, but cannot be reduced to, the best of responsive, attentive, and responsible care. The grounds on which such care is provided are socially structured, often inequitably. As Andrew Sayer (2011) points out, we act because things matter to us and because we care for and about others and the world, but collective social action—indeed political activism—is required to challenge and change relations of domination and exploitation.

Ultimately then, in this chapter, I have argued for the importance of developing an ethics of care for ECEC out of, or more accurately in dialogue with, feminist anti-capitalist traditions. This involves keeping both ethical and political questions about how we might ensure social and economic justice at the forefront of concern.

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