

Introduction

The care of human life and happiness, and their destruction, is the first and only legitimate object of good government.

– Thomas Jefferson, 1809

In our private lives, the need for care is generally expected and understood. Political theory and social policy, however, have traditionally located care both “beyond (or beneath) politics and the public sphere.”¹ Public responsibility for care – care in the domain of impersonal relations – is not widely recognized or accepted. In contrast, many feminist theorists have attempted to demonstrate that care is publicly and politically relevant. As a result of their work, the value of care is being increasingly recognized. In the context of political theory, an ethic of care has brought to the public fore dimensions of our lives that have been largely uninvestigated. An ethic of care privileges networks of human interdependencies that challenge the public/private divide and the concomitant role that care plays within such relations. It emphasizes that across our lifespan – at all stages and in many situations – we need care to “sustain the best possible lives.”² From this foundation emerges a set of distinct values for guiding our social lives and understanding the entire spectrum of human experiences and human needs. The values can be considered essential to living a worthwhile, fulfilling, and balanced life.

Although the theory continues to develop, less attention has been paid to care’s practical implications. While a small number of feminist theorists have begun to seriously interrogate the implications of the care ethic’s distinct values for the public sphere,³ to date there have been few systematic investigations of how social policy could be transformed by a care ethic. As Iris Marion Young has noted, “the ethics of care has done little in terms of applying its insights to the pressing social policy issues of justice and needs that face all societies in the world.”⁴ The explorations of this book are meant to address the gap between theoretical and public policy analysis by considering the implications of an ethic of care for a range of Canadian social policy issues.

The fundamental question that underpins the argument of *Social Policy and the Ethic of Care* is “What are the consequences of the human need

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for care in social policy?" In answering this question I consider the values that we currently prioritize in the public sphere to understand why we are making and justifying specific social policy choices. If we start with the assumption that the need for care should be taken seriously, then the status quo, developed in accordance with the values and priorities of a liberal justice orientation, is not acceptable. The limitations of our current vision become illuminated and the need to rethink our values in relation to society, citizenship, and future policy directions becomes clear. Arguably, the inclusion of a care ethic can lead to greater social justice in social policy because it opens up new ways of seeing human beings, their social problems, and their needs, and it enables us to analyze critically how government responds to these. Specifically, I intend to demonstrate how, from the perspective of the care ethic, the centrality of human interdependence and care is revealed.

From this basis, I attempt to show that an ethic of care prioritizes, with its very distinct normative framework, contextualizing the human condition, thereby giving new meaning and significance to human differences that arise from gender, class, race, ethnicity, sexuality, ability, and geographic location. Because of its sensitivity and responsiveness to other persons' individual differences, uniqueness, and whole particularity,⁵ a care ethic opens new ways for understanding experiences of discrimination, suffering, and oppression. And, finally, because it rejects indifference to social consequences of actions and decisions, an ethic of care can provide valuable guidance for governments and social institutions to create more humane, effective, and robust social policies. In sum, a care ethic enhances our understanding of the moral complexities that are at the heart of any social policy issue.

Admittedly, policy change is often dependent on numerous political, social, and economic factors. However, as John Kingdon has argued elsewhere, politics and policy making are driven by ideas as much as or even more than by conventional political processes.⁶ The fact remains that policies are about choosing between a range of options and alternatives. Values, which are at the heart of ethics, have been and will continue to be instrumental in directing these choices. They allow us to make reasoned arguments for why a particular course of action is preferable over another. When we consider what counts as a good reason in policy discourse we are inevitably drawn into principles of political thought.⁷ All public policies therefore have implicit normative dimensions. A distinguishing feature of a care ethic is precisely that it is intended to be an alternative source for moral and political judgments. It can be instrumental in contributing to the kind of debate and discussion that often precipitate fundamental changes in social policy. If a care ethic and its associated values came to bear on social policy decision making, then the traditional policy paradigm

would be replaced by one that brings into view the realities of our lives and aspects of policy choices that have been traditionally overlooked or ignored. A care ethic brings to our attention the need to contemplate how care fosters the necessary conditions for any society to flourish.

The Context of Canadian Social Policy

Canada has a reputation for being a country that cares. Historically, through its complex social welfare system, Canada has provided its citizens with a social safety net that promotes the welfare of its citizens. Security, redistribution, and social integration have been the goals of this system and its policies.⁸ The promise of protection against the uncontrollable and unexpected contingencies of life reflected and reinforced the notions of caring that were once central to the Canadian identity.⁹ Like many other welfare states, Canada acknowledged the importance of care in terms of citizens' well-being and overall social stability.¹⁰ However, since the mid-1980s, and especially with the introduction of the Canada Health and Social Transfer in 1996, substantive social policy changes in the areas of health care, social programs, income support, employment insurance, and education have taken place. Total federal transfers to provinces have been dramatically reduced. For instance, cash transfers in the 2002/03 fiscal year were \$2 billion less than they were in 1993/94.¹¹ Programs and services that have traditionally attended to the needs of Canadians and, in particular, the poor, the disabled, the physically and mentally ill, the elderly, and the vulnerable (e.g., victims of crime and sexual assault) have been contracted and transformed. There is a trend to make Canadians less dependent on their governments.

Canadian governments have been critiqued by the United Nations, among others, for not paying sufficient attention to the adverse consequences of cutting social expenditures for the population as a whole and for vulnerable and disadvantaged groups in particular.¹² In fact, statistics show a steady disintegration of the social fabric of Canadian society. In 1998 the National Council of Welfare reported that over 4.9 million Canadians, including 1.3 million children, were living in poverty.¹³ Gaps between the rich and poor are widening.¹⁴ In the last twenty years, homelessness has increased in Canada.¹⁵ There are food banks in 465 communities spanning every province and territory.¹⁶ Canadians have reported less confidence about being able to gain access to necessary health care services. Less than one-third of Canadians have faith in the country's social safety net.¹⁷ Social policy, one could argue, no longer prioritizes attending to the needs of citizens, even though, in many cases, such needs are growing as assistance and state supports are diminishing in all their forms. The result is what Arlie Russell Hochschild has described as "care deficiencies"¹⁸ in social policy.

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Care deficiencies, however, have not gone completely unnoticed. Canadian politicians and policy makers have started the process of reconceptualizing the welfare state and related social policies. The discourse underpinning a new vision of governance has included a willingness to consider investing more effort into caring for people.¹⁹ The 2003 federal budget, for example, noted the importance of building a society that enhances the well-being of all Canadians and that “puts people first.”²⁰ The Canadian public has similarly expressed a renewed concern for others and a desire for the development of more generous and compassionate social policies.²¹ The recognition of values associated with care is not limited to Canada. In preparation for the 2000 United Nations General Assembly on Governance Issues, a special commission made up of twenty-eight world leaders listed caring as a value that must be at the cornerstone of global governance.²² In a somewhat parallel process, political philosophers have also interrogated the meaning and role of care within the public sphere of society. The convergence of these political and theoretical developments are part of a trend of reassessing what values should be prioritized in our public lives in terms of institutions, social structures, and policies. Indeed, there is a growing discourse regarding the need to re-evaluate the conceptual underpinnings of the current philosophy of social welfare.²³

Here it is important to underscore that normative analyses of policy are not often undertaken; this is because the significance of the relationship between theory and policy is rarely acknowledged.²⁴ Ethics, however, are just as important in the “real world” of politics and policy as they are in the realm of ideas. This becomes clear when we investigate the normative framework that has informed Canadian social policy, determined how social problems are framed, and influenced how the state responds to affected people. The system of moral principles that has shaped the quality of life, the circumstances of living, and power and social relations needs to be interrogated.²⁵ Through such an exercise, there is an opportunity to scrutinize many of the unquestioned assumptions underpinning current government policy that are undermining the traditionally generous Canadian social policy orientation.

The Canadian welfare state has been operationalized within a liberal paradigm. Within the bounds of this paradigm, variances exist about the extent to which the state should respond to the needs of its citizens. For instance, in the first few decades after the Second World War, there was a commitment to maintain a minimum standard of living through redistribution to ensure equality of opportunity for all citizens. More recently, global and national pressures and the increasing visibility of a neoliberal ideology that is critical of much social dependency on the state have challenged the traditional approach to social welfare. Despite differences, both are derivatives of liberalism and its justice-centred ethical perspective,

which reflect a set of assumptions and values that are not particularly oriented towards caring.

To begin with, liberal justice theory posits distinct assumptions about society and its members. At the very heart of this theory is the public/private division. The public realm is the realm of focus. In this realm, society is viewed as a contract between rational, autonomous individuals who seek to maximize their own self-interests. According to the justice perspective, we are seen as independent, equal, moral agents who, through abstract reasoning, develop a set of rules for society that will best allow us to pursue our own interests (most commonly linked to economic interests). Liberal thinkers such as John Rawls suggest that we choose to model our political institutions on principles of justice that would be acceptable to free, rational, and impartial persons. Human separateness is a key feature of this realm, and impartiality is considered the ultimate form of moral reasoning.

The objective of this perspective is that we, as citizens, determine responsibilities and obligations towards others with as little interference with our own liberty, from others or from the state, as is possible. Our political obligations towards others are identified as rights. Rights are the means by which moral dilemmas are solved. Making morally just decisions typically involves the use of "objective" criteria of neutrality, impartiality, and abstraction. Justice is achieved when individual rights are equally protected and each member of society is treated fairly. Judith Squires summarizes the elements of a liberal model of citizenship: "the liberal model of citizenship, conceived as a set of rights enjoyed equally by every member of the society in question, embodies the ideal of justice as impartiality. Everyone has a common set of political entitlements whatever their social, cultural and economic status."²⁶

The liberal model of citizenship assumes that, for the most part, autonomous individuals are able to attend to their own basic needs. Reliance on family and friends in the private sphere is acceptable, but individuals are expected to transcend dependency once they enter the public realm. Dependency on the state is considered to be the exception and not the norm. As I hope to demonstrate throughout *Social Policy and the Ethic of Care*, this is a narrow and incorrect view of the human condition. The norms of independence and self-sufficiency fail to grasp the realities of human interdependence and the need for caring mechanisms in both the private and public spheres of our lives. More often than not, human beings depend on others for some form of assistance and care. There may be extended periods of time when our need for support from others is minimal, but this does not render us solely autonomous. Joan Tronto puts it best: "since people are sometimes autonomous, sometimes dependent, sometimes providing care for those who are dependent, humans are best

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described as interdependent."²⁷ And yet this is not reflected in how social policy is conceptualized. Those who look to the state for support are often viewed as "lesser" or "inadequate" individuals. They become "morally suspect."²⁸ Janine Brodie explains: "we are all dependent in one way or another but the discourse on welfare dependency stigmatizes those who depend on the state to meet their basic needs."²⁹

A further assumption built into the liberal perspective is that human needs are essentially universal. For the most part, this leads to impartial regard for all persons. We are not, however, all the same. We are not equally situated or equally empowered. We have a range of needs that correspond to our particular situations in society. Moreover, people have different capacities and abilities to attend to their needs. Thus, governing the public sphere in accordance with the liberal tradition results in social policy that is limited in its capacity to capture and respond to issues of diversity and difference. When important information is screened out, the process of developing, implementing, and evaluating policy is compromised. The resulting social policy obscures and reinforces various forms of disadvantage and discrimination, and, for this reason, the welfare state has been referred to as "inadequate, patriarchal, classist, and racist."³⁰ This may also help to explain why, despite promises of a universal social safety net, Canadian social policy has not always been sufficiently directed to those who require assistance. It may also explain why, despite the renewed levels of social spending, social problems in Canada are seen as predominantly personal failures.³¹ We need, as Joan Tronto suggests, to face head-on the inadequacy of the liberal tradition as it relates to justice. She argues that, despite its prescriptive power, it cannot alter conditions of remarkable social injustice.³²

In sum, politics within the liberal framework of justice have been largely concerned with the autonomous individual as the appropriate unit of political analysis, impartial universalism as the desirable form of moral reasoning, and rights as measurements of fairness required for the realization of social justice. Liberalism has not recognized care as an essential dimension of citizenship or social policy. Care has therefore seemed irrelevant to public life.³³ As Lawrence Blum has observed, contemporary moral philosophy has paid little attention to the morally significant phenomena of sympathy, compassion, and human concern.³⁴ Not only has the significance of care been overlooked, the care ethic has been marginalized by the liberal perspective. Concern for care is a sign of weakness or failure. Defining citizenship and developing policy without recognizing the primacy of care has considerable repercussions. It distorts and truncates public practices of justice, equality, freedom, responsibility, and community that claim to comprehend the full range of human needs and aspirations.³⁵

Given the parameters of liberal theory, it is highly unlikely that this normative stance can respond effectively to Canada's care deficiencies in social policy. What is required is a theoretical framework that explicitly acknowledges and values care. Our attention needs to be drawn to the central roles that care plays in both our public and private lives. Deborah Stone's description of the moral and public value of care is illustrative: "caring for each other is the most basic form of civil participation. We learn to care in families, and we enlarge our communities of concern as we mature. Caring is the essential democratic act, the prerequisite to voting, joining associations, attending meetings, holding office and all other ways we sustain democracy. Care, the noun, requires families and workers who care, the verb. Caring, the activity, breeds caring the attitude, and caring, the attitude, seeds caring, the politics."³⁶ The relationships between the state and its citizens and between citizens themselves need to be interrogated. We need to examine the far-reaching consequences of not prioritizing care and its values in the construction of our polity, its institutions, and in the content of our policies. And we need an alternative standpoint from which to rethink the Canadian welfare state and its social policies. But, as Leslie Pal has rightly concluded, a clear philosophy or ideology to provide guidance for change is lacking.³⁷ The ethic of care can provide us with such guidance as well as with a different perspective through which to look at social problems and approaches to social policy. It departs from the assumptions of liberal theory because it explicitly recognizes the interdependencies of human beings, acknowledges that these interdependencies cut across the public and private spheres of our lives, and grasps the central role that care has in sustaining us within these connective relations.

Origins and Developments of a Care Ethic

The work of care theorists has done much to help us to think about how the public sphere may be transformed if we take care seriously. Care is not an altogether new concept in the classic canon of Western political philosophy. Though certainly not part of the mainstream, elements associated with a caring ethic have been embraced by a number of political philosophers.³⁸ Nor are the values associated with care exclusive to Western philosophy.³⁹ However, it has been the work of feminist theorists over the last twenty years that has brought care to the forefront of Western political philosophy. The ethic of care is most often linked to Carol Gilligan's *In a Different Voice: Psychological Theory and Women's Development*.⁴⁰ In this work, Gilligan challenges Lawrence Kohlberg's influential theory of moral development. His framework is dominated by an ethic of justice and measures moral maturity by an individual's ability to adhere to rules and universal principles of rights and justice.

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In her research, Gilligan claims to have revealed a different, albeit conventionally unrecognized, voice of moral reasoning that she maintains Kohlberg's psychological measures of moral development fail to acknowledge properly. Gilligan labels this "different voice" as a voice of care, responsibility, and concern for others. Those who exemplify the "different voice" see themselves as defined by a context of relationships with others. She elaborates on what it means to reason in a different voice: "in this conception, the moral problem arises from conflicting responsibilities rather than from competing rights and requires for its resolution a mode of thinking that is contextual and narrative rather than formal and abstract. This conception of morality as concerned with the activity of care centers moral development around the understanding of responsibility and relationships, just as the conception of morality as fairness ties moral development to the understanding of rights and rules."⁴¹

Gilligan explains that those who reason in a "different voice" distrust "a morality of rights" because of "its potential justification of indifference and unconcern."⁴² Unlike justice and rights thinkers who employ abstract and impersonal decision-making styles, she argues that care-based problem solvers often question the hypothetical in order to gather more relevant information so as to better understand the full scope of problems and the practical, material consequences of any decision. In other words, she maintains that such thinkers are concerned with the social consequences of action.

In situating her "different" voice in moral reasoning, Gilligan specifically states that her "focus is on a problem of interpretation rather than [on] represent[ing] a generalization about either sex."⁴³ Indeed, there is an explicit attempt on the part of Gilligan to defend her work against providing any sweeping generalizations about the sexes.⁴⁴ Instead, by revealing a new voice of moral reasoning, Gilligan hopes to "potentially yield a more encompassing view of the lives of both sexes."⁴⁵ Although she interprets the ethic of justice and the ethic of care as representing two different moral orientations, Gilligan nevertheless argues in her conclusion that any tension between care and justice can be resolved in a complementary fashion. She explains: "to understand how the tension between responsibilities and rights sustains the dialectic of human development is to see the integrity of the two disparate modes of experience that are in the end connected."⁴⁶

Ethics of care, inspired by Gilligan's work in moral psychology, have been studied and cited in other fields including sociology, education, theology, business, law, medicine, nursing, environmental studies, politics, and public policy. In extending Gilligan's work, feminist care theorists have attempted to validate care as a distinct theoretical ethic. Political theorists representing a diverse range of traditions are beginning to consider more

seriously the challenges that the ethics of care pose to traditional normative philosophy. Not only is the ethic of care gaining theoretical prominence but it is also the ethic most frequently contrasted with the ethic of justice. The relationship between the two ethics has been widely debated. Some theorists, like Jeremy Waldron and James Sterba,⁴⁷ reject the values associated with an ethic of care; liberal theorists such as Will Kymlicka and Susan Moller Okin⁴⁸ have attempted to accommodate care's values and priorities within existing theories of justice. Joan Tronto, Grace Clement, and Selma Sevenhuijsen⁴⁹ and others have interrogated how care and justice relate. When compared to the justice ethic, the public potential of a care ethic has been undertheorized and, consequently, not explored fully in practice.

Social Policy and the Ethic of Care seeks to contribute to the literature in applied care ethics by demonstrating why a liberal theory of social justice is inadequate and why an ethic of care is essential for guiding social policy. As such, it begins with an exploration of the basic formulation of care theory, including its core concepts, values, and relationship with an ethic of justice. Chapters 1 and 2 pay specific attention to the substantial growth and revision of the care ethic since it was first popularized through the work of Carol Gilligan. To this end I distinguish between what I refer to as the "first generation" and "second generation" of care theorists. After detailing the shortcomings of early conceptualizations of a care ethic, I move on to explore the work and promise of "second-generation" care theorists. Drawing on more recent articulations I examine in detail how a care orientation differs from a justice orientation. I then develop a normative framework, based on the distinct aims and values of a care ethic, for enhancing the interpretation, understanding, and evaluation of social policy.

My purpose, however, is not to engage in a purely theoretical discussion of an ethic of care but, rather, to transcend the confines of typical philosophical approaches by grounding the principles of an ethic of care in social policy. In this way, I am engaging in a different kind of project; namely, in showing how an ethic of care, if properly applied, may change specific public policies in Canada and in determining what lessons might be learned about the theory of care from such a focused application. I consider, in a preliminary and often speculative way, the extent to which including an ethic of care can directly affect a number of current and pressing policy issues in law, health, and economics. Although work of this nature has been undertaken in other jurisdictions, a practical application of care is largely uninvestigated in the Canadian social policy context.

In my investigations I understand social policy to be "an intervention by governments or other public institutions designed to promote the well-being of its members or intended to rectify social problems."⁵⁰ I feature

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issues that are closely associated with traditional priorities in the liberal welfare state, matters over which the state and its institutions exert indirect power in shaping social policy, and different forms of social policy (such as key court decisions).⁵¹ The topics cover such key themes as equality, government responsibility for past wrongdoings, appropriate methods for decision making, and caring work. The subject of the case studies includes equality rights interpretation under the Canadian Charter of Rights and Freedoms, Canadian redress and compensation schemes for victims of institutional abuse, dominant economic methods used for developing and evaluating social policies, and home care policies (including the roles and responsibilities of informal caregivers). These case studies are selective and are not intended to represent the entire spectrum of social policy, nor are they altogether consistent with a more narrow interpretation of social policy as welfare policy. The particular examples in this book were chosen precisely because they extend to a broad range of issues to which a care ethic can apply. They deal with a diversity of social problems that affect a wide range of citizens and, in many instances, those Canadians who are most disadvantaged and vulnerable.

The case studies also reflect the research and analyses that I have undertaken in these specific areas of social policy. Here I am in full agreement with Martin Rein who argues: “when we think about the limits of what we do or about what we ought to do (policy analysis) we work from examples of policies in action.”⁵² As a result of my own policy research, I have come to two interrelated conclusions: (1) the inherent limitations in efficacy of many social policies are linked to the normative framework of liberalism within which they are operationalized, and (2) these limitations are also linked to the absence of values associated with the care ethic – namely, contextual sensitivity, responsiveness, and attention to the consequence of choice. The case studies in which my analysis is grounded are thus intended to demonstrate a broad range of social needs that require the inclusion of a care perspective. They also further the value of a care ethic by illustrating what transformations could come about if the principles of care were to be systematically institutionalized within social policy. Applying care principles to concrete policy is key because, as Joseph Carens explains, “We do not really understand what general principles and theoretical principles *mean* until we see them interpreted and applied in a variety of ... contexts” (emphasis added).⁵³ My goal is to *show* what caring social policy might look like.