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Article Author: Joan Tronto

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At present, care work is rapidly becoming a transnational commodity (Balbassar 2007; Chang 2000; Ehrenreich and Hochschild 2002; Garrett 2007; Hochschild 2005; Hondagneu-Sotelo 2001; Parreñas 2001a; Shachar 2006; Tatsoglou and Dobrowolsky 2003; Zontini 2004). Both skilled and unskilled workers, a large proportion of whom are women, are leaving their homes in less developed countries to work in more developed states. The remittances that they send home have become a central part of the political economy of less developed states, and the work that they perform is increasingly vital to the more developed states (High-Level Dialogue on International Migration and Development of the General Assembly of the United Nations 2006; Vila 2004). Thus, this pattern of transnational care commodification is likely to intensify.

The transnational commodification of care is different from other forms of commodification in the global political economy because direct care work — the work required to prepare all humans to live each day, including care for the bodily needs of the infirm, frail, and young as well as of the adults who are healthy and the spaces in which they live — is not really a commodity. If a commodity is something for which one can receive money in exchange, then in some sense care work is a commodity. However, while people can be paid for their “work,” measured by time spent, the measure of care resists being turned into just another good or service to be sold on the market. Given its often physical and psychic intimacy, good-care grows out
of the trust that develops among those giving and receiving care. That caring for an infant involves such trust might be obvious, but for people to give a cleaning person a key to their house also involves a high level of trust. Thus, care creates a *relationship* among the parties caring and being cared for: this relationship is not a "thing."

The question that I address in this chapter is whether a feminist democratic ethics of care can tell us anything different or special about the place of care in the global political economy. We might answer this question in the negative; that is, we might say that an ethics of care is about empathy, or that it privileges care relationships only among family members or members of the same community, or that it only concerns dyadic relationships of care. Or we might deny that there is anything distinctive about the care workers who cross national borders seeking work. After all, domestic workers are analogous to agricultural workers; doctors and pharmacists are analogous to highly skilled IT workers. But as soon as we are attentive to the nature of care, and to the requirements of a *feminist democratic* ethics of care, then we recognize the ethical seriousness of care work within whatever else we might want to discuss in the global political economy. This is so because care work, by its nature, is relational and entails responsibilities among actors in these relationships. Because these relationships are both structured by, made possible through, and shaped by their political, social, and economic contexts, a thorough accounting of these relationships requires a *political* process that is as broad as are the relationships themselves.

Since no institutions yet exist on the global level that function to allocate overall social and political responsibility, the politics of allocating responsibility must still be largely contained within the nation-state. Allocating care responsibilities, though, is not the same as distributing goods. As a result, a feminist democratic ethics of care provides a more thoughtful and useful account of both the problems of and the solutions to the transnational commodification of care than do more standard theories of justice.

**A Feminist Democratic Ethics of Care**

What is a feminist democratic ethics of care? How does it differ from standard accounts of justice? Let me describe a feminist democratic ethics of care along the dimensions of its ontological, epistemological, ethical, and political contours.

*Ontologically*, as many scholars (such as Koggel 1998, 2006a, 2006b; Robinson 1999, 2008a; Robinson 2007; Groenhout 2004 *inter alia*) argue, a feminist ethics of care starts from a unique account of human nature. First,
from the standpoint of a feminist ethics of care, individuals are conceived of as being *in relationships*. While individual liberty can still matter, it makes little sense to think of individuals as if they were Robinson Crusoe, all alone, making decisions. Instead, all individuals constantly work in, through, or away from relationships with others. Those others are in differing states of providing care for and needing care from them. Second, all humans are vulnerable and fragile. While it is true that some are more vulnerable than others, all humans are extremely vulnerable at some points in their lives, especially when they are young, elderly, or ill. Human life is fragile, and all of us are constantly vulnerable to changes in our bodily conditions that may require that we rely on others for care and support. Third, all humans are at once both recipients and givers of care. While the typical images of care indicate that those who are able-bodied and adult give care to children, the elderly, and the infirm, it is also the case that all able-bodied adults receive care from others, and from themselves, every day. And it is also the case that, except for very few people in states that approach catatonia, all humans engage in caring behaviour towards those around them. Children as young as ten months old imitate the activity of feeding; they open their mouths as they try to feed their caregiver (Bråten 2003). Children describe their activities as caring for parents (Mullin 2005). People are both givers and receivers of care all the time.

*Epistemologically*, feminist democratic care ethics differ from many other accounts of care ethics in that it relies upon an *expressive-collaborative*, rather than upon a theoretical-juridical, conception of morality. Margaret Urban Walker (1998, 2007) distinguishes these two kinds of approaches to metaethics. To Walker, the theoretical-juridical model allows philosophers to engage in discussions at a level of abstraction that grows out of a failure to recognize the distinctive location of philosophical discussion: “It also shields from view the historical, cultural, and social location of the moral philosopher, and that of moral philosophy itself as a practice of intellectual and social authority” (35). The usual basis for such claims is that moral philosophers have grounded their arguments in carefully honed philosophical standards of logic and reason. But, asks Walker, why do these standards bear special status in making moral argument? Why are moral philosophers exempt from the bias that they might attribute to all others? In contrast to this kind of argument, then, Walker suggests that a more appropriate way to understand ethics is to see them as an outcome of an expressive-collaborative process in which various moral actors come to an agreement about an acceptable set of moral standards: Expressive-collaborative
morality thus makes no claim to being beyond time or place; rather, it, "looks at moral life as a continuing negotiation among people" (60, emphasis in original). As Lorraine Code (2002, 160) elaborates: "Beginning and ending in practices of responsibility, both epistemic and moral, this model shifts attention to questions about how moral agents, singly and cooperatively, express their sense of self, situation, community, and agency in the responsibilities they discover and/or claim as theirs. Expressing and claiming are not impersonal processes but the actions of specifically identified, located deliberators, trying to work out how to live well in the circumstances in which they find themselves; starting not from an unstructured, uncontaminated 'original position' but from the possibilities and constraints consequent upon the hand they have been dealt." This approach "displaces formulaic deduction from theoretical principles with negotiated understandings; and displaces legislation from first principles or categorical imperatives with cooperative engagement in producing habitable communities, environments, and ways of life" (ibid.).

Ethically, a feminist democratic ethics of care draws upon several sets of moral qualities as key. They grow out of the complex processes of care itself. In *Moral Boundaries* (Tronto 1993), I identify four moral qualities that align with the four phases of care that Berenice Fisher and I identified in 1990. They are:

1. Caring about. At this first phase of care, someone or some group notices unmet caring needs. It calls for the moral quality of *attentiveness*, of a suspension of one's self interest, and a capacity, genuinely, to look from the perspective of the one in need. (In fact, we might also be attentive or inattentive to our own needs.)

2. Caring for. Once needs are identified, someone or some group has to take *responsibility*, its key moral quality, to make certain that these are met.

3. Caregiving. Assuming responsibility is not yet the same as doing the actual work of care, doing such work is the third phase of caring and requires the moral quality of *competence*. To be competent to care, given one's caring responsibilities, is not simply a technical issue, but a moral one.

4. Care receiving. Once care work is done, there will be a response from the person, thing, group, animal or plant, or environment that has been cared for. Observing that response, and making judgments about it (e.g., was the care given sufficient? successful? complete?) requires the moral quality of *responsiveness*. 
Selma Sevenhuijsen (1998), reflecting on such practices, adds a more substantive set of concerns that distinguish care; they include making caring for physical vulnerabilities and dependency a priority and making a commitment to trust and respect. Although Sevenhuijsen published her book before Walker published *Moral Understandings*, she describes the moral qualities necessary for the process of what Walker identifies as the substantive significance of her metaethical position in calling her view an “ethics of responsibility.” As Walker (1998, 4) puts it: “An ‘ethics of responsibility as a normative moral view would try to put people and responsibilities in the right places with respect to each other.’ Thus, the qualities identified by Sevenhuijsen help to identify the critical moral qualities that make it possible for people to take collective responsibility and to engage in the kinds of affixing of responsibility that Walker sees as fulfilling this metaethical need. They are the moral dispositions and practices that make it possible to engage in the processes that will fix responsibility for care in society.

Politically, it is important to note that the kinds of discussions that Walker and Code envision informing an expressive collaborative morality, the kind of “judging with care” that Sevenhuijsen endorses, can only occur in a society in which real people have an opportunity to express themselves and to be heard by others. Only a democratic political order can enable this. In any other political order, even one that is “liberal” but not democratic, there is a claim of authority made on the part of some to trump the exchange of views in which all are able to participate.

Caring democracy thus requires a commitment to genuine equality of power and voice, and the capacity for a meaningful democratic discussion of the nature of responsibility in society. However, often in contemporary discussions of democratic theory, such ends as equal power are simply posited, without the theorist’s providing an account of how society can arrive at a place of greater equality. Political theorists usually seek procedural rather than substantive ways to address such challenges. Indeed, one of the major ways in which contemporary democratic theory is framed – deliberation versus “agonism” – is mainly about a difference in the nature of democratic dispute. Within each camp, then, there are further discussions of procedure but little engagement between (or within) these approaches about the substance of democratic discussion. What a democratic ethics of care requires, on the contrary, is a substantive focus on the allocation of responsibilities that includes all of the parties in the discussion. Thus, *democratic politics should centre on assigning responsibility for care.* The task of a democratic politics involves affixing responsibility, and, as we come to recognize the
centrality of care for living a decent human life, the task of democratic politics needs to be much more fully-focused upon care responsibilities: their nature, their allocation, and their fulfilment.

Fully to fill in the details of this last claim goes beyond the scope of this chapter, but let me provide a sketch of what a democratic politics of care, understood as fixing responsibility, requires. First, it requires that we specify "who" will participate in the process of making decisions. As political scientists have long noticed, who "sits at the table" to make decisions can have as large an effect on the outcome as can what the people who sit at the table do. The question of who gets to decide is a critical one.

Imagine a whole series of tables set up in a large room. At each table are the people who will make judgments about how to put people and responsibilities in relationship to each other. Let's call these the responsibility-setting games, or circles of responsibility. Obviously, people will be able to affect the outcome of a responsibility-setting if they are able to exclude others from that process. Imagine a game about racial injustice in which one race is excluded from the process of setting responsibility. Exclusion is one effective way of controlling the outcomes of a political process. Democratic theorists have long realized how important it is that, in order to create genuinely democratic outcomes games, everyone be included in processes such as responsibility-setting. Usually, the more powerful are able to exclude the less powerful: this is one of the things that it means to be more powerful.

But exclusion is not the only way to rig the outcome of a circle of responsibility. Another way is to absent oneself or one's group from the "people" whose roles are under discussion in the responsibility-setting game. If individuals or groups in society are granted a "pass" with regard to being assigned responsibility, then they are also effectively able to exercise power over the outcome by virtue of being able to absolve themselves of responsibility. I have previously labelled this kind of behaviour "privileged irresponsibility." Thus, when it comes to dividing up the responsibilities for managing a household, the traditional breadwinner model allows the head of the household (usually the husband in this traditional model) a "pass" from most daily domestic duties because he has already brought home the money that organizes the household (Weinbaum and Bridges 1979). But it is important to see this mechanism both from a moral perspective (as a way of shirking responsibility by claiming that one's own responsibilities lie in some other area) and from a political perspective (as a kind of power through which one is able to force others to accept responsibilities – perhaps even
too many responsibilities – without having actually to make the case for one’s own exclusion from the discussion).

Part of the obscurity of our current world and our inability to have honest political discussions about matters of great importance, then, has to do with our inability to make judgments about who is responsible. To some extent, such irresponsibility rests upon what Mills (1997) calls “epistemological ignorance” – our unwillingness to know anything about the lives of those who are dominated through structures such as racism (see also Pateman and Mills 2007). By controlling the “we,” some are able to affect the apportioning of responsibility without really owning up to the responsibility of setting these conditions. Such exclusions and absences are thus vitally important in shaping how political discussions go forward.

What people will decide when they come together to allocate responsibility is another key issue. This matter is greatly complicated, of course, by the fact that “the table” at which they will sit always has a context. There is a history among these people, and past decisions and judgments shape what can be decided now. One never begins to think about responsibility with a clean slate.8

The matter is also complicated because we can think of responsibility in distinctive ways. One way to think of responsibility is to see it as “backward looking,” as assigning blame for past judgments and actions. Usually, legal forms of assigning responsibility are “backward looking” in this way. This form of backward-looking responsibility has not received much of an endorsement from feminist writers. As Heidi Grasswick (2003, 92) observes, “many feminists have been uncomfortable with the judgmental language of responsibility that follows when praise and blame are taken to be its primary features.” Indeed, she continues, “these concerns stem from a common view among these feminists that the language of responsibility, particularly when it is focused on praise and blame, reflects a preoccupation with purity” (93). Other feminist scholars also argue that “backward-looking” conceptions of responsibility are inappropriate tools for feminist analysis because feminists instead need an account of responsibility that helps direct future research (Card 2002; Young 2006).

In contrast, then, feminist scholars have begun to develop a model of responsibility that is forward-looking and that accounts for how to make change. For example, Iris Young (2006) writes about structural injustices and the social connection model of responsibility. Young’s account of responsibility brings back a key element of the ontological starting point of
care: that humans are involved in relationships, that the lines of these relationships can be traced, and that groups can then raise questions of responsibility. This is so even if efforts are made to disguise or to diminish responsibility (Pettit 2007).

On some level, then, the process of allocating responsibility is at the heart of the political practices of care. The political "care work" also requires that those accountable for the allocation of care responsibilities throughout society are attentive to whether or not those processes of care function. This can be done through a variety of means, but the best will require the participation of actual care workers and receivers in providing responses about how well caring needs are being met.

Questions about allocation of care responsibilities do not follow the traditional division of "left" and "right" in predictable ways (Sevenhuijsen 2000). Such a reallocation does require, however, that we rethink public and private duties and separations, whether needs can be defined collectively or individually, and whether people can be treated individually at the same time that they are treated equally.

What distinguishes a feminist democratic ethics of care from Margaret Walker's more general "ethics of responsibility" should now also be clear: a care ethics provides a substantive basis for applying the ethics of responsibility. It directs our attention to certain aspects of life in order to determine responsibilities. Some forms of responsibility can appear to be contractual, but, for an ethics of care, one needs always to go beyond simple agreements to look more closely at the power allocation in exchanges about responsibility. One also needs to focus upon relationships among people, and not simply upon isolated individuals, in making decisions about care.

While this assimilation of responsibility and responsibility to care may have begun to sound like a problem of distributive justice, and to some extent it is, we need to recall that politics is about power not only in the distributive sense but also in the sense of the creation or assumption of the collective capacity to act. Responsibility, Thomas Haskell reminds us, is a term that only entered the English language at the end of the eighteenth century. It requires that we see ourselves as capable of acting and as somehow implicated, causally, in the situation to be addressed (Haskell 1998). It is never, then, simply a matter of distribution. Furthermore, if "ought implies can," Haskell observes, then what follows is a very complicated understanding of what is necessary and what is transformable in human life and, hence, what constitute the limits of responsibility. How should we think, then,
about the converse: to what extent does "can imply ought?" Haskell glosses Williams' discussion of slavery in the ancient world and observes that, since ancient writers simply assumed that slavery was necessary, they did not imagine it could be immoral. Haskell then asks, "How do 'necessary evils' such as slavery come to seem remediable, thus shrinking the domain of necessity and expanding the realm within which the imperatives of responsibility can operate?" (297). From this standpoint — of what is beyond the scope of responsibility and what is within our power to change — Nancy Fraser's (1989b) concern about the "politics of needs interpretation" assumes a new salience. For if we are unwilling to question the necessity behind a set of practices, then we will not see ourselves as responsible for them.

In a democratic society, we might presume to say that everyone in the society should be around the table making decisions about the allocation of responsibilities. But, with limited time and resources, not everyone will be involved in every decision about allocating responsibility. One way to think about a society's political values, in the broadest possible terms, is to ask the question, what are the primary decisions that have been made about the allocation of responsibility? For example, if a society leaves questions about how much and what kind of education children should receive to their parents, then one allocation of a basic responsibility has been made about who sits at the table and makes judgments about the child's education. Whether this is a wise decision never reoccurs on the political agenda because the prior allocation to a very narrow circle of responsibility has already occurred. On the other end of this spectrum, allocations of responsibility also operate on a global level. If democracy should be a global value, the artificial limit of national sovereignty seems an unsatisfying answer to the question of whom to seat within the circles of responsibility that concern the safety and flourishing of people around the world (Goodhart 2005).

When we incorporate our concern about responsibility, we now see the main problems inherent in care — the problems of paternalism and parochialism (Tronto 1993) — in a new light. Both can now be understood as distortions of the kinds of responsibilities that people should appropriately assume. For paternalists, the problem is that they claim too much authority in the allocation of responsibility for themselves. Parochialism is a problem in which we set the boundaries of our responsibility too narrowly. In both of these cases, what will help us to better understand the moral problems that we face is to think about them in concrete terms: who is involved in making decisions, how are they involved, who have they excluded, and who is exercising various forms of privileged irresponsibility?
To review, a feminist democratic ethics of care requires that we reconceive democratic politics as the allocation of social and individual responsibilities, that we ensure the adequacy of the democratic process by making certain that people neither absent themselves nor exclude others from this process. The democratic process itself is no guarantee that members of a political community will arrive at the correct decision; however, including all in allocating responsibilities might make it less likely that some potential changes are hidden behind the claim of necessity, and it would make it less likely that paternalistic or parochial ideas would prevail without challenge. In the next section of this chapter, I compare how standard political theories of justice and a feminist democratic ethics of care differ in the ways that they understand the moral dimensions of transnational commodified care.

Evaluating the Moral Issues in Transnational Commodified Care:
The Limits of the Justice Approach
From the start, it is clear that an ethics of care-based understanding of human nature, epistemology, morality, and politics differs from the understanding shaped in more traditional justice approaches to ethical questions. These different starting assumptions also affect how we assess moral issues within particular situations. In order to illustrate this point with reference to the global economy, let us consider the condition of care workers who are working transnationally.\(^{10}\)

Within Anglo-American philosophy, the situation of care workers who have crossed borders has primarily been treated as a special case of more general concerns about immigration. They are seen as a group Joe Carens refers to as “irregular migrants” (Miller 2008a, 2008b; Carens 2008a, 2008b). Standard immigration arguments presume that, precisely because such migrants have often left members of their family behind (Ehrenreich and Hochschild 2002), they deserve less consideration than do other migrants as they are less likely to become permanent members of their new society. For Miller (2008a), the ambivalence of their commitment makes irregular migrants less committed to the contractual commitment to join the new society, and they therefore are not entitled to “citizenship rights.” As for Carens (2008a), while he recognizes the dangers of exploitation in such arrangements, he is unwilling to condemn the Canadian live-in domestic program because, in the end, it may help a few thousand people who otherwise would not have access to Canada. In this same article, Carens challenges the position of Daniel A. Bell (2001), who defends the exploitative treatment of domestic workers in Singapore because, after all, they are still
better off as domestics in Singapore than they were at home in, for example, Sri Lanka. Carens, in response to Bell, argues that the global political economic context of how maids end up doing such work matters. Yet, surprisingly, he does not bring this same analysis to bear on the situation in Canada.

This problem reveals one of the issues involved in thinking about the morality of transnational commodified care from a perspective in which only one side of the situation is engaged, as opposed to the requirement set by Walker for “expressive collaborative” moral reasoning, in which “others” would have to be included in this discussion. The outcome, one might assume, would be different were they included.

As if to correct for the one-sidedness of these discussions, several feminist thinkers approach this question differently within the framework of traditional theories of justice. They draw upon the Kantian notion of “right to hospitality.” In one of the rare cases in which thinkers have actually tried to think about justice from the standpoint of the particular kind of women care workers who are engaged in care transnationally, Wendy Sarvasy and Patrizia Longo argue that guest workers should be understood as world citizens and thus accorded the right of hospitality described by Immanuel Kant. Kant argues that, because “all nations are originally members of a community of the land,” we all remain members not of “a legal community of possession” but of “a community of reciprocal action (commercium) in which members have “constant relations with all the others” (Sarvasy and Longo 2004, 396-97.) Sarvasy and Longo’s argument is all the more appealing since, from the original Kantian standpoint, it is not clear whether the workers that they discuss would actually count as citizens. Kant’s account of hospitality is directed at the peoples in the rest of the world, who, he thought, should be hospitable to European explorers.

In drawing a parallel between the household and the state, though, Kant inadvertently reveals the problem of basing rights on hospitality. The problem is that it depends upon the “friendly agreement” by which strangers are made into members of the household. Now, Sarvasy and Longo take this argument to suggest that the visitors have a political role to play in making themselves welcome. The problem with this approach is that it still leaves the guest workers with the burden of demonstrating that they deserve membership. Kant also suggests (as Sarvasy and Longo note) that people have an imperfect duty to be sociable; thus, perhaps, people are obliged to listen to the arguments of their guests, but the burden still remains on the outsiders to explain why they should be admitted. And then, who shall be the judge? The right to hospitality never de-centres the position of the original citizen
as "the one who was here first" and never challenges the basically unequal footing upon which original citizens and guest workers stand. What will make people challenge their own ethical views? To ask that newcomers alone "make the case" for their inclusion imposes an unequal and unfair burden upon them.\textsuperscript{13} Traditional theories of justice are thus limited in their ability to solve the problems of transnational care commodification. At this point, a feminist democratic ethics of care offers more insight.

The Moral Problems of Transnational Commodification: The Advantages of a Feminist Democratic Ethics of Care

Let us now turn to the moral problems of the commodification of transnational care. Most of the discussions of injustice focus on distributive questions. Hence, Arlie Hochschild (2005, 13) describes the neglect of children of women who have migrated to care for the children of others as a question of distribution, but it gains its force from drawing upon a moral sensibility about the relationships of mothers and children: "Faced with these facts, one senses some sort of injustice at work, linking the emotional deprivation of these children with the surfeit of affection their First World counterparts enjoy."

The argument that I make about the nature of a feminist democratic ethics of care suggests a different language and logic by which to describe the moral question at issue here. Rather than using a language of distribution, which brings with it the notion that care is something that can be distributed, let us take seriously the idea that care is about relationships and that any democratic procedure within a state should recognize its transnational effects. John Stuart Mill (1998 [1859], 518) writes: "the true virtue of human beings is fitness to live together as equals." As Mill observes, the capacity to live together as equals requires a very specific kind of moral training, one in which no person is made to feel superior to others. From this perspective, the other harm brought about by transnational care commodification becomes clear: it violates this Millian possibility of equality.

Transnational care commodification is undemocratic because when immigrants are care workers, they become marked, as the anthropologists put it, with the stigma of care work. They are viewed as part of a feminized, multicultural workforce. They are distinctive because they are marked by a brutalized or privatized form of work.\textsuperscript{14} They are different people in different regions and historical eras, but they are clearly designated as appropriate to do servile work and are marked by race, colour, religion, creed, accent, national origin, and so forth. In her volume Sister/Outsider Audre Lorde
(1984, 126) recounts: “I wheel my two-year-old daughter in a shopping cart through a supermarket in Eastchester in 1967, and a little white girl riding past in her mother’s cart calls out excitedly, ‘Oh look, Mommy, a baby maid!’” American culture often situates the multicultural person in the place of a servant whose rôle is to placate the concerns of white Americans who increasingly rely on such support (Wong 1994).

Yet, the harm of such marking is multifaceted. In the first place, it signals that marked people are better suited for care work and, thus, are not equals. This is a serious danger in a democratic society. Barbara Ehrenreich (2000, 70) observes that this has especially bad effects on children who learn that they do not need to learn to clean up after themselves:

To be cleaned up after is to achieve a certain magical weightlessness and immateriality. Almost everyone complains about violent video games, but paid housecleaning has the same consequence-abolishing effect: you blast the villain into a mist of blood droplets and move right along; you drop the socks knowing they will eventually levitate, laundered and folded, back to their normal dwelling place. The result is a kind of virtual existence, in which the trail of litter that follows you seems to evaporate all by itself ... A servant economy breeds callousness and solipsism in the served, and it does so all the more effectively when the service is performed close up and routinely in the place where they live and reproduce.

One of the elements of the harm that Ehrenreich stresses is that it is exacerbated by being privatized and carried out in the household. As I argue elsewhere (Tronto 2002), I also believe that the moral dimensions of the exploitation of workers are worse in the household than elsewhere. This is so because household work is often not viewed as work at all, and household workers who do care work produce more intimate relationships than are produced in other kinds of work environments.

But a second harmful form of inequality is that, often, the needs of such individuals are taken to be different from the needs of the mainstream population. In many cases in which the values of multicultural groups have been juxtaposed to the views of mainstream groups in society, the courts seem to be willing to argue that, in such communities, the needs of people are different. Not only are they different, but they are lesser. Hence, in Yoder, the Supreme Court of the United States was willing to find that children from Amish communities do not need as much education as do other children. From such kinds of analyses, it will never be possible to arrive at a
position of equality for individuals. From the standpoint of responsibility, it is easy to see that, on the one hand, such inequality would work to justify excluding servile people from a role in determining the allocation of public responsibility, and that, on the other hand, the powerful might absent themselves from the tasks of responsibility on the grounds that such concerns (i.e., those relating to the servile) are beneath them. In this way, the patterns of subordination continue.

Solving the Problems
If, as I suggest here, we need to think about care as a basic problem in allocating responsibilities in democratic societies, then the solution to the problems become clear: nations must extend citizenship to all those who are involved in substantive relations of care with citizens (Tronto 2005).

This proposal is congruent with an ethics of care and responsibility that requires all parties to be engaged in the setting of public and private responsibilities for care (and, by extension, in determining those boundaries). Only by making care workers participants in the discussion can we be somewhat assured that marking them as care workers will not create a lesser status for them. There are other implications of this view. Since the care work of transnational care workers often stretches beyond national limits, all of the care relations in which a care worker is involved should make her or him eligible for citizenship by virtue of her/his care relationship with those who are engaged in caring relations with citizens. This broadening of citizenship permits us to rethink the nature of states, of security (Robinson 2008a), and of the role of citizens.

We can imagine many objections to this kind of approach. First, in the recent past, following T.H. Marshall, what has qualified citizens for membership is their economic contribution to the productive forces of society. Caring for people is not a contribution on the same order. It equates care in private life with a public good. This objection is easily answered: care in private life is a public good (Folbre 1994, 2001). Every human society depends upon the production of citizens through their birth and child rearing. Every worker must be “reproduced” in order to survive and to return to work the next day (Weinbaum and Bridges 1979). Furthermore, when Marshall equates productive work with a contribution to citizenship, he has already blurred the line between public and private contributions. Most workers work for private firms whose profit is not a social benefit. While both the firms and the individual workers are taxed, and through such taxes make a public contribution, the primary beneficiary of the work of citizens
is not the state or "the economy" but the firms whose profits flow from the workers' efforts. Why should this kind of private contribution count as a public good when the private contribution of caring for people does not?\textsuperscript{15}

Second, expanding the state's realm of concern beyond its physical territory to include people who may not live in the territory and whose connection to it might be only through a single individual weakens that state's ability to protect itself. How can the state be expected to protect its "care chain" citizens who are scattered about the globe? And suppose some of these far-flung citizens decide to exercise their rights (e.g., by voting from distant locations and with little connection to local issues)?

While this objection exacerbates the vulnerability of the state, it is already a fact that no state can really guarantee the safety of its citizens. States are vulnerable not only within their own territories but also elsewhere in the world. States are already vulnerable to physical violence both at home and abroad. Were states to recognize this vulnerability, they might make better decisions in an increasingly connected international order. The greater distance of some citizens from their "home" state is not a strong argument against this approach. Even now, states are vulnerable to citizen who are disengaged from political life and to citizens who exercise their citizenship rights without much attentiveness and responsibility (Macedo and al. 2005). But these problems are not unique to care-chain citizens. Including such citizens, furthermore, might bring with it additional and diverse perspectives that can prove beneficial to states.

Third, some might object that transnational care workers have not done enough to earn their citizenship. In order to take this objection seriously, though, we need to ask whether the accident of birth in a particular nation-state should be "enough" to earn citizenship? The family members of transnational care workers do end up making sacrifices for the absent "commodity" of the transnational carer. Why should this contribution not suffice as grounds for citizenship?

Recognizing "in-country" variations in citizens who are in relationships with transnational care workers will also allow for a more robust understanding of cultural diversity within subgroups in any given society. As Werbner (2005) argues, paradoxically, a new multicultural community will often need to reinforce its own customs, ways of life, and so on before it can become fully integrated into a new culture. Werbner thus recognizes the importance of historical sensitivity in making judgments about newcomers. In a parallel way, it is important to make concessions about how caregiving practices work in some communities in order to make judgments about how
members of those communities should be evaluated and integrated into society as a whole. For example, among some migrant groups, older children may have to share child-care responsibilities with parents. If such caregiving keeps boys and girls from participating in school events, they may appear less engaged when college admissions officers look at their records. They may lose out on future opportunities because they have taken on caregiving roles that were necessary or expected in their own community. In order for university officials to be just, then, they need to consider something more than a standard measure of “participation” that would apply to everyone.

Conclusion
The feminist democratic ethics of care brings a different perspective to the ethical questions of the global political economy than do the perspectives that currently dominate its discussion in political theory. Escaping from the fruitless antinomies of universalism/particularism, justice/democracy, and liberalism/communitarianism, the feminist democratic ethics of care posits that the questions of actual relationships, and the attendant responsibilities that they bring, provide a more coherent and action-oriented way to consider the problems of justice raised in the global political economy.