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Love Labouring: Nurturing Rationalities and Relational Identities

Kathleen Lynch and Maureen Lyons

This chapter opens with a brief review of traditional scholarly interpretations of work and the reasons for the marginalisation of care work. It then outlines the reasons why care is a form of work. Drawing on a set of 30 in-depth Care Conversations with carers and care recipients (see Introduction and Appendix), it goes on to map carers’ understandings of their primary care relations in terms of the love labouring they do to maintain and develop these. The latter part of the chapter focuses on the issue of commodification, outlining how and why primary carers rejected paid-care alternatives to their own caring. It outlines the ways in which nurturing rationalities override economic rationalities, and how people’s relational identities as carers play a central role in determining their life priorities.

What is work?

What is defined as work in scholarly terms varies across philosophical and sociological traditions (Pettinger et al., 2005). Work is equated with economically productive work in the materialist tradition; it is defined as that which contributes to human-historical ‘progress’ (as exemplified in the work of Marx). Within the phenomenological tradition, work is equated with individual cultivation and self-perfection, it is less about being economically productive than about being individually productive (exemplified in the thinking of Marcuse and Kirkegaard) (Gürtler, 2005). In neither of these traditions is the work of care, or the reproduction of the human species through care, defined as socially valuable work.

Mainstream sociological and economic analysis is less concerned with the purpose of the work (whether it be for economic return or self-realisation) than with its status in terms of pay. In industrial sociology and in classical economics, work was traditionally conceptualised in terms of whether it was paid or unpaid, which was taken as equivalent to whether it was in the
public or the private sphere (Pahl, 1988). This perspective has resulted in work being dichotomised as either ‘real’ work for paid employment or unpaid domestic labour. This dichotomous view of work not only ignores care work, but also voluntary, community and activist work (Glucksmann, 1995; Taylor, 2004).

Scholarly recognition of care as a form of work grew throughout the 1980s and 1990s as feminist scholars challenged classical views of work across disciplines (Folbre, 1995; Glucksmann, 1995). Feminists not only highlighted the role of emotional work within mainstream employment, thereby bringing the ‘private’ world of emotions into the public sphere (Hochschild, 1983), but also demonstrated why domestic work and care work are real forms of work, albeit work that is often unpaid (Beechey, 1987; Feldberg et al., 1979; Finch and Groves, 1983; Delphy and Leonard, 1992). They showed that care was like other forms of work in that it serves human needs, has observable, intended outcomes, uses complex skills, requires time and effort and often involves challenges and some stress.

Despite these achievements there is still a historical residue of denial, both in popular discourse (‘does your wife work?’) and in policy discussions of the conflict between paid work and care work, the unequal gendered division of care labour, and the role of the state in supporting care work (Gürtler, 2005; Harrington Meyer, 2000; Kittay, 1999; Pillinger, 2000; Williams, 2001). There is also little understanding of which aspects of caring can be provided on contract and which cannot (Lewis and Giullari, 2005); the differences between secondary care labouring, which can be commodified, and love labouring which cannot are only minimally understood. Likewise, the differences between the nurturing rationalities that govern caring and the economic rationalities that are employed in other spheres of life have received little empirical attention. The object of this chapter and those following is to address these deficits.

Why care work is marginalised

The marginalisation of care work arises in part from the general ambivalence about caring and loving that exists in society. Love has been sentimentalised, sexualised and commercialised to a degree that the word is a synonym for the trivial and the trite in terms of human relations (hooks, 2000). The sexualisation of love in particular has led to the term being associated with pleasure and desire, something fleeting, contingent and ephemeral. While caring is not trivialised the way love is, it is definitively a low status and highly feminised activity which is viewed as a private and personal concern (see Chapter 2).

The reluctance to name care as work arises also from the public allegiance to the traditional feminine (as opposed to feminist) ethic of care which defines care as a moral obligation (for women in particular) governed by rules of selflessness and self-sacrifice (Gilligan, 1995). It is defined in this deeply