Affective Equality
Kathleen Lynch

Why love, care and solidarity are equality and human rights issues

Outline of the lecture

- Where Affective Equality fits in a social justice and equality framework
- Dominant theories of justice and why the idea of affective equality challenges these
- Why Love, Care and Solidarity matter as equality issues
- Aligning the Ethic of Care with an Ethic of Justice
- Neoliberal capitalism and its impact on our concept of citizenship and caring
- Gendered Order of Caring – Equality Implications
- Conclusions
Four social systems and dimensions of Inequality and Social Justice

- **Economic System’s inequality - resolution - Re/distribution**
  - Equality is concerned with re/distributing wealth/income/resources justly

- **Cultural System’s inequality – resolution - Respect and Recognition:**
  - Equality is concerned with respecting differences in belief, gender, language, ability, sexuality, colour, age, marital/family status, ethnicity, Traveller status, etc.

- **Political System’s inequality – resolution – Parity of Representation:**
  Equality is concerned with parity of representation in the exercise of power in formal politics, work organisations, schools, households, crèches, families etc.

- **Affective System’s Inequality – resolution – Relational Justice:**
  Equality is a question of having equal access to love care and solidarity and an equal sharing of the burdens and benefits of love and care work
The Intersectionality of Injustice:
4 Key Systems where equality/inequality is generated mapped with 4 key dimensions of equality/inequality Source: Baker, Lynch, Cantillon and Walsh (2004, 2009) *Equality: From Theory to Action*

<table>
<thead>
<tr>
<th>Systems of In/equality</th>
<th>Dimensions of In/equality</th>
<th>In/equality</th>
<th>Relational Justice</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Re/distribution (Resources)</td>
<td>Respect/ Recognition (identities/difference)</td>
<td>Representation (parity in power and participation)</td>
</tr>
<tr>
<td>Economic System</td>
<td>xx</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Political System</td>
<td>x</td>
<td>x</td>
<td>xx</td>
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<tr>
<td>Cultural System</td>
<td>x</td>
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<td>x</td>
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<tr>
<td>Affective System</td>
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Theories of Justice: denial of emotions and affective relations

- The concept of the person underpinning dominant social scientific, political and legal analyses of injustice is based on key premises:

  - (a) Cartesian Rationalism - rational view of the person (homo sapiens NOT homo sentiens) (I think therefore I am … Rene Descartes)

  - (b) the autonomous view of the person (denial of the vulnerability of the embodied human subject) . . . .

  - (c) the person is presumed to be non-relational in making decisions - assumes that social actions are driven by self-interest (power, status, money)

  - (d) the citizen that counts is a public adult citizen – the citizen who can enter into contract
Liberal political theory: Care defined as a private matter

- In most egalitarian political theory, Citizenship is equated with the public sphere (John Rawls, 1971, A Theory of Justice, typifies this position)
  - **The focus is often on:**
    - Economic inequalities: e.g. social class and the unequal distribution of income and wealth is about the citizen as an economic actor
    - OR Socio-cultural inequalities: status-related injustices arising from lack of recognition of difference or identities (sexuality, disability, ethnicity, race, religion etc. gender, age) are recognised (Charles Taylor, Politics of Recognition, 1992)
    - OR Political inequalities - relations of dominance and subordination in the exercise of power, issues of power sharing and representation — it is focused largely in the public sphere of politics (Nancy Fraser, Spheres of Justice 2008)
Liberal Conceptions of Citizenship – problem of care-lessness

- Within Ireland/Europe The Full [Adult] citizen is defined as an *autonomous* person, especially economically autonomous
- Citizenship is equated with paid work, contributions in the public sphere - dependency, even inevitable dependencies, are questioned
- Caring and Being are not citizenship-defining ways of living
  - E.g. Cuts to One Parent family allowances; the definition of unemployment assistance as ‘jobseekers’, cuts to disability supports - examples of a growing carelessness within the state – an assumption that those who are dependent should not be so..even where they have no real choice
- Yet Dependency and Interdependency are endemic to the human condition
Affective Equality – a challenge to mainstream liberal theories of justice

- It recognises:
  
  - a) **the relational** character of human beings, that humans live in profound states of interdependence economically, politically, culturally and socially - as well as environmentally
  
  - b) **human vulnerability** – all people are at some time in life deeply dependent
  
  - c) **humans are sentient, emotional beings**: feelings inform judgements - normative rationality has an affective dimension
  
  - d) the citizen is a carer/care recipient in **both the public and private domains** of life
Affective Inequalities

Affective inequality occurs directly when:

- People are deprived of the love, care and solidarity (LCS) they need to survive and develop as human beings
- The burdens and pleasures of care and love work are unequally distributed e.g. between women/men, north/south
- The contribution of care to human well-being is not recognised

Affective inequality is reinforced when:

- We are not educated regarding the theory and practice of love, care and solidarity work
- and when love, care and solidarity work is trivialised by omission from public debates/analysis
CARE-FULL Model of the Citizen (the affective system)


Tertiary Care Relations
– solidarity work

Secondary Care Relations
– general care work

Primary Care Relations
– love labour
Why love, care and solidarity are equality issues

- Because people are fundamentally Relational Beings

1. **Survival** – depends on love, care and solidarity (LCS)

2. **Human flourishing** – requires caring

3. Good care produces **Outcomes** and lack of care/poor care produces negative outcomes- fear, a sense of being unloved and unwanted, anxiety

4. Care involves **Work** – takes time, expertise, energy - burden/pleasure
Why love and care are equality issues

1. Loss of care is a threat to survival

- In infancy and at times of high vulnerability, especially in sickness and advanced age, we will die without care.

- Lack of care for the environment threatens human survival.

- ‘While conditioned in fundamentally significant ways by cultural considerations, dependency for humans is as unavoidable as birth and death are for all living organisms. We may even say that the long maturation process of humans, combined with the decidedly human capacity for moral feeling and attaching, make caring for dependents a mark of humanity.’ (Eva Kittay, Love’s Labor*, 1999: 29). * US spelling.
Why love and care are equality issues

2. Human flourishing requires love and care

- High levels of solidarity and care in society generally – enhances people’s ability to flourish (Wilkinson and Pickett, 2009 *The Spirit Level*)

- Even the ability to learn, to study is highly dependent on feeling cared for:
  - *It would be very hard to learn if you feel that nobody cares about you. ….You are bound to build that wall and make sure that nobody gets in because that was my little nest where nobody could touch me…. To me it is like I was deaf. I couldn’t hear anybody. I blocked people out and didn’t want to have anyone coming near me because I had never had someone caring about me…… I can’t remember hearing me Ma or Da saying loving things to me or showing me love.* (Liam, man aged 41 years who had a history of very poor care, left school virtually illiterate) (Feeley, M. 2009, Chapter 10 *Affective Equality*)
Love is like money – when you have it you think it does not matter

• If a child comes from a family where there is lots of love and encouragement the child will reach their potential. But for someone like me who was brought up in a children’s home, it is kind of …dodgier - because they have ...........so many other people all over the years that have input in their lives........, but who have walked away… (Bob, man aged 41 years who left school with unmet literacy needs) (Feeley, 2009) Chapter 10 Affective Equality)
Why love and care are equality issues

3. Love and care produce outcomes and their neglect produces loss, neglect or abuse

- There is a care continuum – from deep care, through minimal love and care, up to neglect and abuse; this operates in all social institutions from families to corporations.

- Mental health and well being is highly dependent on good love/care not just in families but in our public institutions, places of employment, schools, colleges, welfare services, hospitals, community and voluntary organisations.

- A very high proportion of those who enter prison have substance abuse and/or mental health issues that relate to lack of care.

- **Irish prisoners:**
  - 74% of life sentence and 79% of fixed sentence prisoners have a substance use disorder.
Why love and care are equality issues

Human flourishing is damaged through lack of love and nurture


- The Committee heard consistent reports from witnesses of their difficulties establishing and maintaining secure, stable relationships in adult life. Many witnesses reported an inability to trust and relate in intimate relationships. They believed these difficulties to be a consequence of childhood abuse, including the deprivation of secure emotional attachments and nurturing relationships. Others described difficulties and differences with their partners in communication, conflict resolution and parenting styles.
Why love and care are equality issues

4. Love and care involve work – emotional and physical

- **Effort /energy** – getting up at night, cooking, cleaning, listening/
- **Time** – to listen, to reassure, to be, to help
- **Competences** - there are better and worse ways to care
- **Attentiveness** - constant vigilance, ‘carrying a care map around in your head’
- **Emotional engagement** – emotional presence
- **Responsibility** – tasks have to be arranged etc.
- **Stress** – fear of failure

*Care and Love involve burdens and benefits and the distribution of these is a key equality issue – especially between women and men*
Why an ethic of care must be aligned with an ethic of justice

• A Human Rights framework operating alone is highly individualistic – it assumes people have the capacity to claim their rights…but many do not. Those who are least powerful to assert their rights can be ignored or treated unjustly (e.g. carers, children, intellectually disabled people)

• Ethics of care needs to be aligned with rights-based approaches to justice

• Democracy is not neutral in its object or purpose; it needs to have a goal…in my view creating a care-full democracy is its primary object or goal (see J. Tronto. 2013. Caring Democracy: Markets, Equality and Justice.)

• Care is not just about our personal or individual relationships, it encompasses the way we relate to each other collectively and how we relate to all living creatures and the environment

• Care is about maintaining, continuing and repairing our world so all of humanity can live in it as well as possible (Tronto, J. 1993 Moral Boundaries: A political argument for an Ethic of Care)
Neoliberal capitalism - **Rational Economic Actor (REA) Model – the Market Citizen**

O = Self interested, Calculating, Competing Economic Actors.

X = Competition Between Actors.

- Competing Rational Economic Actors
- Economic Relations
- Visible Political & Cultural Relations
- Invisible Affective Relations (Love, Care & Solidarity Work)

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A Rational Economic Actor (REA) model of the ideal citizen prevails

- Gary S. Becker (US economist Nobel prize winner, 1992) exponent of the theory that all human behaviour is utility maximising – i.e. that people will use the most cost-efficient means to achieve a goal

- Within rational choice economic logic ‘Being a Carer is a life-style Choice’; it is not an ethically informed ‘choice’ as ethics are not part of the utility maximisation model of the person

- **PROBLEMS with the REA Model of the Citizen/Person**
  - Self-interested economic model of the person disregards rationalities of caring that are not governed by purely economic calculation
  - What began as an analytical framework has become a moral code - ‘ideal worker’ is a now increasingly defined as an Rational Economic Actor – i.e.
  - Getting maximum advantage at minimum cost regardless of the moral character of the goal/advantage being sought has become a virtue
Neo-liberal capitalism has reinforced the idea of the active **market** citizen

- The market has become the primary producer of cultural logic and value in Irish society over the last 20 years

  - The governing values are competition & self advancement...minimal welfare state is eroded at the same time people have less time to spend caring in either families or communities –
  - Consumption-led identities focus on **market choices** not caring for others as the driving public narrative (e.g. in relation to housing we have ‘property supplements’ not ‘home or housing’ supplements in newspapers)

- Multiple manifestations of disrespect for care and love work
  - Rise of private for-profit health care/elder care/child care
  
  - Institutionalisation of new managerialism which involves embedding market values in public services and in the welfare machinery of the State (Lynch, Grummell and Devine, 2012, *New Managerialism in Education*)
  
  - Citizens are redefined as ‘Customers’ and ‘Clients’ in health, education and welfare agencies suggesting a market relationship to the State
The Gendered order of caring

- Women are 2.5 times as likely as men to take the primary responsibility for the care of dependent children
- Almost all of those who care for both adult dependents and children at the same time are women

Over the course of a week, women in Ireland do:
- 86% of child supervision
- 69% of playing with, and reading to children
- 82% of care to adults
- 80% of cooking
- 86% of cleaning
- 70% of shopping

- Many children are carers but we lack data on this
- **Sources:** CSO Report on *Women and Men in Ireland* (2009) and the Who Care’s Report (2009)
Inequality in the doing of care and love work: women are the default carers

- There is strong evidence that *Women’s exploitation as carers is the principal form of exploitation that applies specifically to them as women*
  - most informal carers are unpaid and those who are paid are generally badly paid;
  - unpaid family carers (most of whom are women) suffer a direct material loss due to caring

- Those who do not do hands-on caring are free to advance their material and social status and enjoy more leisure
  - *It is women’s unwaged care labour that frees men to be market citizens, political citizens and cultural citizens in ways that enable them to use their power, their money and cultural prestige to dominate women*
Care Commanders and Care Foot soldiers

- Rich and powerful (decision-makers) can claim immunity from care responsibilities—they are ‘Care Commanders’

- Women are the most likely to be Care’s Foot soldiers—men are generally only expected to become primary carers when there are no women available to care

- False cultural assumptions that men are naturally ‘uncaring’ and that caring comes ‘naturally’ to women
  - Women are assigned a care (mothering) identity whether or not they have children
  - The capacity to care is based on one’s own emotional and nurturing capital, health, well being etc.—it is gender neutral
The cost of gendered caring

- **Income Costs**
  - The average income for Irish women is 67.4% that of Irish men
  - Average income of women aged 55-65 is only 53% of men’s income

- **HEALTH COSTS**
  - 3 out of 10 Carers report health costs due to caring: ill health, stress, isolation, lack of sleep, emotional strain, limited leisure etc.

- While men’s (aged 20-44) employment rate varied somewhat between those with and without children (88% with children and 93% without), women’s employment rate varied from 87.4% **for women with no children to 56.9% for women whose youngest child was aged between 0 and 3 years of age**

- (Source: Table 1.7, CSO 2009, *Women and Men in Ireland*)
Caring is undermined as it is perceived as a feminine subject – masculinity is equated with dominance

- Men are educated to see dependence as weakness and Masculinity is defined in terms of dominance (R.W. Connell, 1995 *Masculinities*, 2002 *The Men and the Boys*) – see also Niall Hanlon, 2012, *Masculinity, Care and Equality*. (this is based on a study of Irish men and their attitudes to doing caring)

- Rational Economic Actor (REA) model of citizenship is closely aligned with a ‘men as dominant’, breadwinner model of care (Women are educated to see relational life as central.. intimate relations as crucial to identity (defined as such by Article 42.1 in the Irish constitution)

- Law/policies often reinforce women’s reliance on a relationally-defined identity – e.g. fact that paternity leave is only paid for 2 weeks in Ireland (from Sept. 2016)
  - One of the results of the gendering of care is that men’s emotional socialisation undermines their ability to articulate the vulnerable emotional self
Conclusion

- The Affective Domain of life is a key site for the generation of inequality as care/love/solidarity are central to human existence

- Affective inequality occurs when people are deprived of the love, care and solidarity they need to survive, develop and enjoy life

- And/Or

- When the burdens and pleasures of care work are unequally distributed

- Inequalities in the doing of care and love work is central to understanding gender inequality as women are morally impelled to be primary carers in the way men are not

- The Rational Economic Actor model of the citizen which is central to neo-liberalism undermines care, love and solidarity as it promotes a market-led model of citizenship that is deeply self-interested