



How women's care migration drives global and gendered inequality: A feminist issue

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Abstract

The continuously growing crisis of care is a result of neoliberal policies, intensified by globalisation. This article argues that global care chains are a driver of inequality, especially from a feminist perspective. The argument put forward is twofold. Firstly, Wallerstein's (1974) account of the 'world-economy' is applied to show how streams of human capital impact a country's position on the world stage. The 'care drain' generated in the countries at the bottom of the care chain manifests and fortifies their position in the semi-periphery or periphery. Secondly, it suggests that, adding to the global asymmetry on top of the countries' deprived structural position in the world-economy, women's liberation is hampered. Gendered inequalities of women as 'natural' caregivers remain in place for the women at the bottom of the care chain. Meanwhile, those at the top profit from the commodification of care work by outsourcing. Focusing on live-in elderly care, the case of Poland, which is in a unique position as a sending and receiving country of care migrants, serves as example for the argument presented.

Keywords

Care work; Care migration; Global care chain; Live-in elderly care; Gendered division of labour; Inequality; Wallerstein; Poland

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Introduction

Across different institutional contexts, European countries are facing a crisis in elderly care (Shutes and Chiatti, 2012). This crisis of care is a result of neoliberal policies, intensified by globalisation. The provision of live-in care work for elderly people in private households by migrant women is a growing trend, making up for the care deficit (Rogalewski and Florek, 2020, p. 5; Lutz, 2018, p. 578). In this article, I argue that this crisis of care is a feminist issue and that the 'global care chain' (term coined by Hochschild, 2000) is a driver of inequality. This argument is twofold. Care chains from poorer to wealthier countries leave the countries at the bottom of the chain disadvantaged. They are losing human capital creating a "care drain" (Lutz, 2018, p. 580) in their own country by repairing the one of another. This means, firstly, the manifestation and fortification of these states' position in the semi-periphery or periphery in Wallerstein's (1974) account of the 'world-economy'. Secondly, while the women at the top of the care chain are profiting from the commodification of care work by outsourcing, those at the bottom are, even more so, stuck in the gendered division

of labour. The women migrating are subject to precarious working conditions in a work that is undervalued. These migrant women as well as the women left behind back in the countries at the bottom of the care chain are forced to remain in their traditionally gendered roles as carers. I, therefore, argue that women's liberation processes are hampered in these countries. Overall, this means that women's care migration does not only drive global inequalities of structural positions in the world-economy, but also gendered inequalities of women as 'natural' caregivers. The east to west care chain from Ukraine to Poland and Poland to Germany is used as a case study for this argument, focusing on Polish women.

In applying Wallerstein's theory to the concept of the 'global care chain', this article aims to contribute to an understanding of how care migration can manifest power relations and inequality, on the level of international relations as well as in women's lives. Poland represents a unique example as it finds itself in the middle of a care chain, being the main source of live-in care migrants in Germany and struggling with a care crisis itself (Rogalewski and Florek, 2020, p. 9). Some care-related research has been done on Polish women already. One example is Krzyżowski and Mucha's (2014) work on transnational caregiving and how sociocultural practices of care might be modified caused by migration, i.e. emigrated daughters sending remittances to their elderly parents instead of providing care in person. Lutz and Palenga-Möllnbeck (2012) conducted a study on Poland and Ukraine, analysing care arrangements organised by women leaving the country in order to do paid care work for other families. Keryk (2010) discusses gender and care regimes in Poland and how these have changed in the last decades. These studies provide invaluable insights for my own analysis.

This article is organised into three sections. Section I marks a brief introduction into feminists' accounts of the commodification of care work, providing the basis for further discussion. In section II, firstly, Wallerstein's world-systems theory is applied to the concept of the 'global care chain' and the case of Poland. Secondly, it is argued that women's liberation in Poland is left in a regressive position due to the country's place in the care chain and world-economy. Section III concludes.

I. Neoliberalism: Care work as commodity

Marxist feminists in the 1970s and 80s shed light on how capitalism relies on women's unrecognized unpaid household and care work as invisible economic activities, reproducing the male-breadwinner model (Mulvaney, 2013, p. 28). As Fraser (2011, p. 377) explains, the ideal of the so-called 'family wage', a gendered construct where the man is providing for his family as the sole wage-earner, served to define gender norms. By valorising paid work, a culture blind to the social importance of unpaid care work was established (Ibid.). This naturalised gender injustices by institutionalising "androcentric understandings of family and work" (Ibid., p. 378).

Neoliberalism

More recent feminist scholarship has built on this, highlighting that gender inequalities have been aggravated further by neoliberalism (Mulvaney, 2013, p. 28.), which had been established globally as a prevalent policy model by the 1990s (Venugopal, 2015, p. 168).

Associated with free-market capitalism, neoliberalism is an ideology and policy model featuring “market deregulation, privatization and welfare-state withdrawal” (Ibid.). The contemporary norm of the adult-worker-model or “two-earner-family” (Fraser, 2011, p. 384) comes with a reality of low job security and declined living standards, while working more hours (Ibid.). Fraser (2011) argues that neoliberalism opened new ways of exploitation in which women’s emancipation is intertwined with the “engine of capitalist accumulation” (Ibid.). She points to a myth of “a new romance of female advancement and gender justice” (Ibid.) in which flexible capitalism is ascribed higher meaning. This has, according to Fraser (2011), led to women from all social backgrounds chasing the dream of emancipation. How positive or negative the outcome depends on at what end of the spectrum the women find themselves:

...at one end, the female cadres of the professional middle classes, determined to crack the glass ceiling; at the other end, female temps, part-timers, low-wage service workers, domestics, sex workers, migrants, export processing zone (EPZ) workers, and microcredit borrowers, seeking not only income and material security, but also self-betterment, dignity, and liberation from traditional authority. (Fraser, 2011, p. 384)

Outlining this, Fraser argues that second-wave feminism in fact helped strengthen capitalism’s valorisation of paid work (Ibid.). She critiques the central role that waged work obtains and makes a plea for a “post-neoliberal anti-androcentrism” (Fraser, 2011, p. 388) where doing care work is valued by everyone as part of living a good life. To this day, however, even though they are active wage-earners as well, the ‘lion’s share’ of care work is still done by women and a redistribution of care tasks is still pending (Lutz, 2017, p. 359; Fraser, 2011, p. 388). Deep gender inequalities are at work here. While “masculinity is defined as carefree” (Lynch, 2009, p. 412), the moral imperative on women to do care work makes them the “default carers in most societies” (Ibid.; see also Hanlon, 2009; O’Brien, 2007). Yet, being often viewed as a matter of personal affairs, the issue of care has long been neglected in egalitarian theory and analyses of inequality (Lynch, 2009, p. 411). Thus, this care-related inequality, or “institutionalized form of affective injustice” (Lynch, 2009, p. 414), remains a gendered issue that demands attention for real gender equality to be achieved (Lynch, 2009, p. 413).

The commodification of care work

Domestic and care work have been increasingly marketised and outsourced into a growing private sector (Lutz, 2017, p. 357; Benería, 2008, p. 2). In combination with processes of globalisation and neoliberal policies that weakened the state’s role, these developments contributed to the resulting global “crisis of care” (Ibid.), or “crisis of social reproduction” (Mulvaney, 2013, p. 28). In the case of European welfare states, public, institutionalised care provision decreased and shifted to the private sector with ‘cash for care’ policies instead (Williams, 2018, p. 552; Lutz, 2017, p. 357; Williams and Brennan, 2012). A deficit of care and the import of migrant workers from poorer to richer countries is the consequence. In European Union (EU) member states, live-in care work has become a common solution (Rogalewski and Florek, 2020). In this arrangement, care is provided by an employee living in the care recipient’s household (Ibid., p. 2).

With modern neoliberal policies relying on privatisation with the reduction of welfare expenditures at the same time, commodification is a crucial consequence. This includes the ‘fictitious commodification’ of care which is examined in accounts that build on Polanyi’s (2001) work (Lutz, 2017; Fraser, 2014). In Polanyi’s ‘market society’ everything becomes a commodity. Commodities, according to Polanyi, are goods produced for sale (Fraser, 2014, p. 547; Polanyi, 2001, p. 75). Based on this, Polanyi considers labour, land, and money as fictitious commodities because they were not originally produced for sale but are commodified on the modern market (Lutz, 2017, p. 364; Fraser, 2014, p. 547; Polanyi, 2001, p. 75). Fraser (2014) criticises Polanyi’s understanding of fictitious commodification for being blind to the historicity of labour, land, and money. Polanyi’s interpretation is, according to Fraser, ignoring that “none of the three is ever encountered pure, but only in forms that have already been shaped by human activity and relations of power” (Fraser, 2014, p. 547). Social constructions of labour, land, and money carry encoded forms of domination that predate their commodification (Ibid.). Fraser points out that this “construction of ‘labor power’ as a fictitious commodity rested on the simultaneous co-construction of ‘care’ as non-commodity” (Ibid., p. 550). This means that labour as a commodity depends on a gendered hierarchy differentiating between paid ‘productive’ and unpaid reproductive labour, where women do care work for free (Ibid.).

From this perspective, one could suggest that formerly unwaged care labour being available for money nowadays is a success for women and feminists. As Lutz (2017, p. 364) rightly states, this depends on at what end of the care chain the actors find themselves. Overall, the commodification of care work perpetuates the gendered division of labour, i.e. a division of work based on gender roles (Lutz, 2017, p. 359). Gender inequalities are integral to intensified globalisation processes (Bakker and Gill, 2003, p. 23). Migrant care work and global care chains are an example for this. These migration flows not only reflect the gendered division of labour and women’s precarious position on the labour market, but also global inequalities between geographical areas. While the commodification of care work may be a solution for the care crisis in wealthier countries, this comes at the cost of creating one in the poorer sending countries (Stewart, 2011). The next section will elaborate on what that means in practice.

II. Poland in the ‘World-Economy’

In this section, Wallerstein’s (1974) world-systems theory is applied to the concept of ‘global care chains’ (Hochschild, 2000) to show how it can help to understand the way care migration impacts a geographical area’s positioning in the world-economy. In particular, the case of Poland and its place in the care chain between Ukraine on the bottom and Germany on the top is discussed. This serves as an example to outline how neoliberal care regimes lead to a manifestation of the poorer sending countries’ subordinate position in the world-economy.

Care chains and the ‘World-Economy’

According to Wallerstein’s (1974) world-systems theory, the contemporary world, since the 16th century, is a single capitalist world-economy. This means the entire world is one “unit with a single division of labor and multiple cultural systems” (Ibid., p. 390). The crucial feature of the capitalist world-economy are global production flows always aimed at

maximizing profit on the world market (Ibid., p. 398). This theory describes the global interconnectedness of capital and production processes that do not halt at state borders and are not contained to one geographical area's market, but also how the flow of capital shapes geographical areas' labour conditions and power positioning towards each other. Wallerstein describes three structural positions in the world-economy that is determined by the division of labour among regions: core, periphery, and semi-periphery (Ibid., p. 401). Originally, northwest Europe rose as the core area with Mediterranean Europe as the semi-periphery and Eastern Europe and the Western Hemisphere as periphery (Ibid.). When nation-states in core areas grow stronger, those in peripheral areas decline (Ibid., p. 403). The semi-periphery, Wallerstein remarks, "is both exploited and exploiter" (Ibid., p. 405).

Applying Wallerstein's theory to global care chains means highlighting care migration processes on a macro-level as movements that impact the world stage. Women migrant workers are human capital that move across borders and, thereby, shape the world-economy. In other words, the presence (or absence) of care workers on a local and national scale is linked to a country's position in the world-economy, on which states have varying influence, if any at all. These movements are movements from east to west, meaning Eastern European women migrate westwards for employment in the care sector (Katona and Zacharenko, 2021). The term 'global care chain' describes the sequences of transnational links between states based on both paid and unpaid care work (Hochschild, 2000). At the top of the care chain are women gaining freedom from their gendered responsibilities by outsourcing care and employing other women to do the care work. This describes the 'care gain' on the receiving end of the chain (Lutz, 2018, p. 580; Hochschild, 2003). Meanwhile the sending countries experience a 'care drain' with the gap opened by the women who left (Ibid.). The Global Care Chain Concept (GCCC) highlights the social cost for migrants and their left-behind family, such as 'transnational parenthood' (Lutz 2018, p. 580; Lutz and Palenga-Möllnbeck 2012). Moreover, the GCCC comprises "commodification of care work, migrants' precarious working conditions, and transnational social asymmetry" (Lutz, 2018, p. 580).

Combining both concepts, the place a country takes up in the care chain indicates and influences its position in the world-economy. The care chain from Ukraine to Poland and Poland to Germany is a useful example for this. Compared to other European countries, Poland is in a unique position. While Polish women make up the main proportion of migrant care workers in Germany, Poland faces a crisis of care itself (Rogalewski and Florek, 2020, p. 9). As a result, the country is not only a source of migrant care workers but also a host country, attracting irregular migrant care workers predominantly from Ukraine (Rogalewski and Florek, 2020, p. 9; Keryk, 2010, p. 431). Applying Wallerstein (1974), Germany as a Western European receiving country at the top of the chain makes up a core region, growing stronger by condoning the sector of undeclared live-in migrant care work that is making up for the state's policy failures (Lutz and Palenga-Möllnbeck, 2010). Poland, in this case, must be ascribed a structural positioning in the semi-periphery. Wallerstein's above-mentioned description of being exploiter and exploited fits this country's situation of host and sender country perfectly.

Poland as receiving and sending country

Looking at Poland as a receiving country, the Polish crisis of care was created through the government's policies regarding family life and women in the labour market. After the collapse of socialism in 1989, the Polish government supported a policy of re-familialisation, which meant encouraging women from the labour market to raise their children at home instead (Keryk, 2010, p. 433). This relieved the state from responsibility of providing public care (Ibid.). In the mid 2000s, there was a shift in state policy from supporting the single-male breadwinner model to the dual-earner model (Ibid.). With EU membership, tendencies towards more family-friendly employment reforms began so that responsibility for the child and elderly care remained gendered and within the family (Ibid., pp. 433-435). Keryk (2010, p. 433) classifies the Polish welfare regime and social policy as "a hybrid of conservative and social democratic elements" (Ibid.). Caring for older parents is normatively deemed the children's obligation, which means in practice the daughters' one (Krzyżowski and Mucha, 2014; Keryk, 2010). Regarding elderly care, the state provides some assistance. However, public institutions have a bad reputation, partly due to people's aversion against anything public stemming from life under communism. Moreover, the places available in these institutions are not meeting the demand and private institutions are too expensive for most (Keryk, 2010, p. 434). Still, there is a need for women to work as well and therefore, as a solution, caregivers are employed to care for the elderly to make up for the deficit. These are predominantly Ukrainian migrant women, who are financially more affordable, or in some cases Polish women (Ibid., p. 438).

Polish women at the same time make up the main proportion of migrant care workers in Germany (Rogalewski and Florek, 2020, p. 9). The German care regime is built on the premise of elders being cared for by family members, i.e. women in families (Lutz, 2017, p. 359; Lutz and Palenga-Möllnbeck, 2010, pp. 421-422). The state reinforces this with transfer payments to home-caring family members which would be insufficient to pay for 24-hour care provided by nursing services (Lutz and Palenga-Möllnbeck, 2010, p. 422). However, most kin-carers are full-time employees and as it is not monitored how these (mediocre) allowances are spent, many turn to agencies that place migrant care workers from Eastern Europe in the household of their frail family member (Ibid.). This led to a growing sector of undeclared care work, making Germany one of the main receiving countries of Eastern European care workers (Lutz, 2017, p. 357; Lutz and Palenga-Möllnbeck, 2010). As Lutz and Palenga-Möllnbeck (2010) discuss, this large sector of undeclared care work is an open secret among the German media and population. With assurance of care being dependent on this sector, it is not in the government's interest to pursue these illegal employments. Consequently, they are turning a blind eye to these practices, "officially combating and tacitly tolerating care work migration" (Ibid., p. 427).

This also exemplifies how women's issues remain disrespected on a governmental level. The German state decisively ignores anti-feminist labour practices. The German case, however, is not just a bad exception. As migrant care workers often work undeclared, they are subject to exploitation and violation of rights. Neoliberal welfare states rely on legal as well as undocumented migrants to fill the gap their care regimes leave and therefore condone this informal market (Rogalewski and Florek, 2020; Lutz, 2018, p. 579; Ambrosini, 2015; Lutz and Palenga-Möllnbeck, 2010).

Gendered division of labour and traditional gender roles

The women at the bottom of the care chain are in an adverse place. Polish live-in care workers in Germany find themselves doing hard and precarious work that is at the same time undervalued. Their employment is usually organised by a chain of agencies (Rogalewski and Florek, 2020, p. 8). While the Polish employee is under contract with a Polish agency, the German family looking for a care worker deals with a different, German agency (Ibid.). That leads to an obscure situation about who is accountable for the care delivery and working conditions (Ibid.). In addition, due to the government's blind eye, since 2011, more and more migrant caregivers are working de-facto self-employed, losing protections posted workers enjoy (Ibid., p. 20). When facing labour law infringements, which are common, the migrant workers have no one to turn to. These infringements include; working beyond legal working time, not receiving minimum wage, not being paid for stand-by time (Ibid.). On top of that, the living conditions can be dire (Ibid.). These issues are not unique to the German case but typical overall (Lutz, 2018, p. 583).

Unfortunately, there is a general lack of data on migrant domestic work. The reasons for this are that the work is mostly informal, and that the collection of data is not in the states' interest (Rogalewski and Florek, 2020, p. 5; Lutz, 2018, p. 578). However, as Rogalewski and Florek (2020) mention, in addition to the Polish majority, there is a "substantial and growing" (Ibid., p. 21) proportion of Ukrainian carers in Germany. This indicates the troublesome position Poland finds itself in: experiencing a care drain itself, it wants to attract Ukrainian migrants. Considering that many richer European states are in need of care migrants as well, it seems doubtful whether Poland can compete. Going to Germany may be financially more attractive for Ukrainian women. Polish women in Poland are, therefore, confronted with caring for their elderly parents themselves, ending up undertaking unpaid care work.

Thus, I argue that Poland's position in the world-economy and in the middle of the care chain leaves the country and especially its women in an unfavourable and regressive situation. On top of the gendered division of labour, Polish women are in a situation that forces them to remain in their traditionally gendered roles as (unpaid) carers. The Gender Equality Index (2019) illustrates this as well. The country's progress lags behind the EU average with 55.2 out of 100 points compared to 67.4 as the EU average (EIGE, 2019b). Germany, for instance, is only 0.5 below the EU average (EIGE, 2019a). The Index includes, among other figures, the employment rate for both men and women, and also compares full-time and part-time work. Furthermore, it states that, with 73%, Poland has the highest share in the EU of informal carers for older or disabled persons being women (EIGE, 2019b). In Germany instead, 56% of informal carers for older or disabled persons are men, making Germany the only EU member state with more men as informal carers (EIGE, 2019a). These numbers support my argument that Germany as core country at the top of the care chain is advantaged. Poland in the meantime gets the short end of the deal with its position in the care chain: they remain economically in the world-economy's semi-periphery by which women's aspirations for gender equality are hampered.

Looking at the Gender Equality Index scores for other EU member states shows that Eastern European countries tend to have low scores while Western European countries have higher and above average scores (EIGE, 2019a; EIGE, 2019b). This correlates with my argument that

being at the lower end of the care chain hampers the overcoming of gender roles, because global care chains are typically east-to-west movements.

III. Conclusion

In this article, I discussed women's care migration as a driver for global economic and gendered inequality. After outlining feminist accounts on how neoliberalism brought about the commodification of care work, I applied Wallerstein's world-systems theory to the GCCC, arguing that a country's position in the global care chain affects its structural positioning regarding flow of capital and, in the end, gender equality. To support this argument, I put forward the example of the east-to-west care chain from Ukraine to Poland and Poland to Germany. I focused on Poland as a country in an especially delicate position as exploiter and exploited in the middle of the care chain due to being a sender and receiving country at the same time. Polish women are in unfavourable situations at both ends, i.e. migrating as care workers or remaining in the home country. While the migrant workers are suffering precarious working and living conditions in the receiving country, Polish women at home are experiencing the care drain from loss of human capital. This, as I have shown, enforces and manifests old gender roles, hampering feminist progress.

Overall, the global care crisis is a burning issue, for feminists and everyone else. As European societies are demographically ageing (Rogalewski and Florek, 2020, p. 10; Rechel et al., 2013; Giannakouris, 2008), the already acute crisis will exacerbate making contemporary practices even worse (Rogalewski and Florek, 2020, p. 13).

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