

Labour, Love, and Obligation: A Feminist Philosophical Inquiry into Care Work

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Abstract

The article demonstrates that unpaid domestic tasks, coupled with emotional work, operate as an essential yet neglected social infrastructure that sustains societal operations. This article investigates the intersection of love and work with a sense of obligation using a French feminist framework to show how these elements form a cycle of endless care obligations for women. Feminist moral philosophy demonstrates how ethical duties towards women frequently hide within familial love, yet simultaneously eliminate their independence. The vital work of emotional labour operates as a patriarchal instrument for controlling women through their enforced submission to traditional roles. The article makes an attempt to examine how economic models mistake care for marketable goods while overlooking their human relationships and emotional significance. The article advocates that there is a dire need for a cultural transformation recognising care as a shared societal duty because current love discourses maintain gendered inequalities. This article advances an ethical mechanism to distribute care more equitably between genders and social strata while advancing feminist educational theory through systemic change models.

Keywords: Care Work, Emotional Labour, Gendered Expectations, Moral Obligation, Feminist Philosophy

1. Introduction

It is imperative to pay attention to the care work, which regards the domestic, emotional, and other unremunerated

labour, necessary for the proper functioning of societies. At home, care for infected children, and outside the home, it nourished adults for the continuous supply of labour in the economy and for social relations in the society. However, it is unceasingly argued that care work is essential and yet paid little attention to and poorly remunerated in most economies and overlooked in key economic and policy discourses (Folbre, 2001, p. 17-22). For example, feminist scholars have noted that care work, which takes place in the domestic sphere, is seen as nonproductive because it does not fit within a capitalist mode of production (Fraser, 2016, p. 109).

The concept of emotional work, which Hochschild defined as the managerial activity of keeping emotions in place through managing feelings to meet the demands of caregiving positions. This labour, frequently linked to physical care work, entails making the space emotionally available, a role that women overwhelmingly take up. The academics have argued that this invisibility of care work is a product of patriarchal structures whereby the care work is devalued and assigned a feminine property instead of being viewed as work that needs to be done (Tronto, 1993, p. 88). International figures prove the fact that women remain burdened with caregiving responsibilities. The ILO (2018) identifies that women spend 76.2% of total time on unpaid care work around the world, while men spend only 23.8%. This disproportion is even more acute in the case of low-income households and minorities, where societal discrimination only adds to the subordinate role of women (Esquivel, 2017, p.340–342).

It can be seen that the depreciation of care work is not simply an economic tragedy but a societal phenomenon entrenched in gender norms. Culturally, grand-mothering is constructed in religious and moral terms, not as work or labour that should be paid for appropriately. These norms not only serve to sustain structural gender injustices but also erode women's agency and

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emancipation (Kittay, 1999, p. 89). Codification of care work with the feminine gender renders care workers as an exploited resource due to cultural framings that link caregiving with love and selflessness. This erasure conceals the financial and effort that carers spend on their work and rationalises the elimination of care work from labour and social justice discourses (Held, 2006, p. 10). Moreover, intersectional perspectives illustrate how these burdens are compounded by racist, classist, and, in the case of some countries, casteist structures, attributing the responsibilities of caregiving to women of colour (Collins, 2000, p. 24).

2. Conceptual Foundations of Care Work

It can be defined as the tasks and duties that are taken to maintain people's physical, psychological, and social needs, which include housework and emotional work (England, 2005, p. 383). Traditionally, care work has been deemed vital for the preservation of societies, but is seldom acknowledged as 'work'. Feminist economics, which emerged in the 1970s, pointed out that economic approaches prescribed a rather rigid definition of work, leaving out caring work that does not generate income (Folbre, 2001, p. 17-22). This exclusion reinforces the erasure of the concept of care work, especially that which is done in the domestic sphere. The care work that is not compensated and involves activities such as cleaning, preparing food and rearing children is another form of societal reproduction. Nevertheless, these contributions are often seen as the 'natural' extension of women's responsibilities rather than as work (Fraser, 2016, p. 112-117). Emotional work is a type of care work in which workers are required to control emotions to establish supportive conditions in a given context, for instance, to calm down family members or moderate a fight (Hochschild, 2012, pp. 137-139). This aspect of care work is also not acknowledged, even though it plays a crucial role in nurturing relationship harmony. The modern concept of care work encompasses institutional care-giving professions like nursing and childcare; however, even these professions are paid low wages and lack respect (Tronto, 1993, p. 120). The portrayal of care work as non-market-based has helped to perpetuate its undervaluation in both historical and contemporary contexts.

2.1. Feminist Ethics of Care

The ethics of care was developed as a feminist approach to moral philosophy in the 1980s, which situated it in direct opposition to justice-based theories of morality that held autonomy and rationality as their core tenets. These

basic ethical frameworks are Relationship Ethics, which was pioneered by Carol Gilligan, stressing that ethical decisions depend on the overriding relationships, context, and interdependence. From the perspective of care ethics, caregiving is considered one of the core moral activities essential for human well-being and society's stability (Gilligan, 1982, p. 90-94). From the perspective of care, the individualistic notions in the dominant ethical theories are criticised because moral subjects are constructed as self-sufficient and autonomous, participating in a world as discrete individuals (Kittay, 1999, p. 81). For instance, Virginia Held contribute to the multifaceted discussion on care work by pointing out its erosion of the clear divide between public and private domains based on interdependence. Joan Tronto takes this approach further by identifying care as a political activity and as a public service that has to be shared among people. This framework has critical epistemological implications for conceptualising care work. It not only affirms the ethical value of caregiving actions but also questions social relationships that dominate caregiving in the name of love or obligation. The ethics of care, therefore, offers a normative framework that advocates for a re-evaluation of care work and its fair distribution across genders and social classes (Collins, 2000, p. 24-25).

2.2. Emotional Labour

The term used to describe the regulation of feelings for the sake of a role was coined by Arlie Hochschild in her book published in 1983, *Emotional Labour*. It was at first used to describe the sense of having to smile and be polite while working as a paid service provider, for instance, flight attendants, but it is as applicable within unpaid care work as well. This encompasses the elements of emotional labour, which are key components of activities such as child-rearing or care-giving for the elderly (Hochschild, 2012, pp. 137-139). However, more than 50 years after it was first identified, emotional labour remains excluded from the mainstream definitions of work that are critical to economic relations and the maintenance of psychological wellbeing. Feminist scholars have attributed this invisibility to the fact that it is situated in femininity and carried out in the home (England, 2005, p. 386). There is a clear connection between emotional labour and the unpaid domestic work, where the tasks are valued less and quickly become the responsibility of women. For instance, studies indicate that women are often assigned the responsibility of maintaining family harmony at the peril of their psychological well-being.

Thus, it is conceived that the essential role of emotional labour is relational and psychological. It is also important to note that, while the results of physical work can be

seen and touched, the results of emotional work are not as concrete but are still vital for maintaining society's well-being and functioning. Cultivating awareness and appreciation of emotional labour is thus important in combating a general dismissal of care work.

The structural gender bias of care work is grounded in patriarchal norms that define care work as a feminine activity. In this way, women have been socialised into caregiving positions via cultural discourses, which align womanliness with being a caregiver, enduring, and patient (Pateman, 2018, p. 190-194). It is made even more evident by structural factors in that women are limited to domestic zones due to the disparities in education and employment opportunities. Traditionally, reproductive labour is a female task, and critics argued that this separation reinforces the unfair gender biased division of work in societies (Fraser, 2016, p. 112-115). For example, Nancy Fraser has pointed out that the tendency towards the unpaid workforce for caring labour is a structural characteristic of capitalist economies that lean on the back of women's caring work to maintain the waged workforce. In a similar vein, Patricia notes that race and class multiply gendered oppression to result in a predicament where managerial profiting reflects the exploitation and servitude of black women in caregiver positions. That care work is disproportionately shouldered by women has profound consequences for the concept of social justice. It restricts their freedom, employment prospects, and societal engagement and also imposes the physical, emotional, and psychological labour of caring responsibilities on women. To dismantle these issues, we need not only to push against patriarchy but also to begin questioning societies that rely on women's and reproductive labour.

3. Labour, Love, and Obligation: A Critical Analysis

The notion of women being the caregivers is regarded as a moral responsibility and is based on the gender roles assigned to women. This conceptualisation, which connects care work to love and family, has been criticised by feminist scholars as a means of oppressing women's work (Tronto, 1993, p. 67). A woman is usually expected to take care of the sick due to the societal norms that label women as the caregivers of the family and the community. Eva has problematized this gendered construction of care work, arguing that it is not understood as work at all but as something that women are naturally expected to do for free. This moral framing is especially visible in family-related scenarios, where the responsibility for taking care of children, the elderly, or disabled people is delegated to women. Research evidence shows that as much as both husband and wife work, women are still the ones who

take care of children in the home in the name of morality (Craig & Mullan, 2011, 840-842). These narratives not only erase the worth of care work but also sustain its erasure within economic and policy discourses.

The concept of love and duty in caregiving relationships is used as a way of forcing people to provide unpaid care work. Feminist scholars have noted that love, as expressed in society, becomes a way of enforcing care work as something that is done out of love rather than as work that deserves payment (Held, 2006, p. 22). This is evident in both individual and organisational environments, which conceal the economic and affective labour of caregivers. Joan Tronto points to how the language of love and care is used to render care a naturalised and therefore private duty. This is especially so with neoliberal policies that encourage people to become more self-reliant, or policies that place the burden of care work on families and provide little or no assistance or remuneration for it. This is particularly a burden for women, especially if they come from poor families, on both economic and emotional fronts. In the context of personal relationships, the weaponisation of love can be seen in the forms of demands for women to do care work out of love or commitment. This dynamic is particularly damaging in abusive relationships where caregiving is used as a means of power, wherein women are expected to attend to the needs of others even at the cost of their well-being and independence (Hochschild, 2012, pp. 139-142). The sentimentalisation of love in care sucks the sweat out of care work and sustains systemic injustices.

3.1. Autonomy and Freedom

The cultural norms of caregiving then impose a lot of restraints on women and hinder their independence. The responsibilities mentioned by the feminist philosophers hinder women from attaining the freedoms necessary for self-realisation, financial stability, and social activities (Pateman, 2018, p. 180-185). The demands for time and emotions that come with caregiving become a hindrance to education, employment, and political participation, hence sustaining cycles of dependency and imbalances (Esquivel, 2017, p.340-342). The capability approach by Martha Nussbaum offers a way of understanding the impact of care work on autonomy. Nussbaum (2012, p. 286) also notes the importance of social arrangements that allow people to function as they choose, including the choice to be a caregiver or not. Thus, without these institutional frameworks, care work becomes a means of establishing and maintaining inequality rather than a voluntary or joint effort. It is crucial to recognise that care work is not the sole responsibility of women and that it is further exacerbated by factors such as race, class, caste,

and ethnicity. In this context, the theoretical framework of intersectionality can be used to understand how various forms of oppression combine and affect the lives of the minoritised caregivers. Women from marginalised social backgrounds are often employed in poorly paid care jobs or they provide care within the family without pay, which is indicative of how gender, economic and race discrimination interact (Collins, 2000, p. 26).

For instance, in global care chains, women from the Global South often work as domestic workers in the developed countries while their children stay behind. This dynamic takes advantage of their work and at the same time reproduces care shortage in their countries of origin (Hochschild, 2001, p. 141). Likewise, in South Asia, the caste-based systems of care work deny women from the lower caste the most devalued roles, thereby further entrenching social hierarchies (Drèze & Sen, 2013, p. 78). Intersectional theories also underscore the fact that expectations about caregiving are informed by cultural expectations and historical injustices. For instance, African American women have been forced into caring work due to systemic racism from slavery to the present-day domestic work. These historical patterns of exploitation suggest that care work needs to be analysed through an intersectional and justice-oriented lens. This critique of labour, love and obligation in the context of care work shows how care work is undermined and devalued in the current social structure. In this way, societies justify caregiving as a moral task that is associated with love, while ignoring the economic and emotional investment that is made by the caregivers and which may lead to their loss of independence and, sometimes, their deterioration. An intersectional analysis also shows how women of colour are subjected to multiple forms of oppression and calls for change. This shift allows for an understanding of care work as labour and thereby brings justice and equity to the field of care.

4. The Invisibilization of Care Work

The erasure of care work starts with the exclusion of care from mainstream economic models that consider production solely in terms of market value, not in terms of unpaid work done within families and other informal settings. The work of caring for children, the sick, and the elderly, or the work of maintaining homes and households, is highly prevalent and valuable work, yet it goes unpaid and unrecorded in terms of GDP. This can be attributed to the historical prejudice that has long characterised mainstream economic thinking and considers care work as something that comes naturally to women, and hence does not require significant effort, time, or skill (Fraser, 2016, p. 109). This exclusion serves to

deepen the erasure of care as a public good that is provided through unpaid family and altruistic work rather than as a part of the functioning of market economies. This is further exacerbated by neoliberal politics of privatisation and personalisation that offload care responsibilities onto families and women in particular. Furthermore, the erasure of the value of care work keeps wages low and reinforces gender inequalities in the labour market. Women are employed disproportionately in jobs that are poorly remunerated and can be described as care-based occupations, for instance, nursing and childcare, whereby women's labour is not adequately valued based on the emotional and interpersonal work done (England, 2005, p. 385). This undervaluation has spillover effects, restricting women's economic prospects and perpetuating cycles of poverty, especially amongst vulnerable groups (Esquivel, 2017, p. 348).

Moreover, care work is not only about doing but also about relationship and affective work that support human relationships and health. The concept of emotional labour, developed by Arlie Hochschild, defines the process through which caregivers regulate their own and others' feelings to foster calm and order. Nevertheless, these relational aspects of care work persist backstage and are not recognised in the quantifiable outcomes that define productivity in work (Hochschild, 2012, p. 144). According to feminist scholars, this is because patriarchal societies do not acknowledge these emotional and relational aspects of caregiving as skills that are learned through practice (Held, 2006, p. 14). This naturalisation erases the thinking and feeling that is part of caring work and turns it into an ethical duty or an act of affection (Tronto, 1993, p. 34). For instance, the processes involved in catering for the emotional needs of a sick family member would require the caregiver to be empathetic, patient and creative to be able to handle the task at hand effectively. However, these contributions are not often recognised or reimbursed, be it in the family or paid care giving (England, 2005, p. 388–389). The erasure of relational work leads to undervaluation of the work done and increases the emotional burden on the caregivers, who often have no organisational or social backup.

This erasure of the value of care work has significant implications for women in terms of their economic and social status, as well as their identity. Economically, undervaluing and not recognising unpaid care work worsens gender income, wealth, and retirement gaps. Women tend to cut back their hours at work or even cease working altogether in order to perform the tasks associated with caregiving, which leads to lower earnings over the course of a woman's working life and fewer benefits such as pensions (ILO, 2018). These economic compromises extend gendered poverty and

subordination, with single mothers and elderly women being most affected. On the social level, the erasure of care work perpetuates gender discrimination by making it seem acceptable for women to bear the brunt of the caregiving burden. Several studies indicate that despite the fact that both partners are working in a household, men still perform less unpaid domestic and care work, which falls on women's shoulders (Craig & Mullan, 2011, 834–840). This inequitable responsibility not only hinders women from achieving their career and individual potential but also conveys the message that women should remain in traditional domestic positions.

In this regard, the devaluation of care work on a personal level result in burnout among caregivers and other mental health issues. The social stigma of caring for a family member with a mental illness, the lack of time for fulfilling personal and professional responsibilities, and the lack of support contribute to the stress of caregivers and lead to feelings of alienation, fatigue, and anger. These challenges are further exacerbated for caregivers from stigmatised groups, who are confronted with other obstacles, including prejudice and limited resources (Collins, 2000, p. 25). The erasure of care work also erodes social agendas for change aimed at achieving justice and equality. The failure to acknowledge and appreciate care work means that societies are likely to sustain patterns of social injustice and overlook the importance of care work in human growth and interpersonal bonds (Tronto, 1993, p. 146). Through the exclusion of economic, relational, and emotional aspects of care work, societies continue to enforce structural oppression that negatively affects women and other vulnerable groups. To counter this erasure, it is necessary to shift the perspective on care work as the responsibility of society, demanding its acknowledgement, redistribution, and equal compensation.

5. Toward a Shared Responsibility: Normative and Practical Proposals

The responsibilities of care should be recognised as a responsibility of society, rather than women and families. Feminist ethical theories and theories of justice force us to rethink the role of care work as a public good that is essential for human beings. According to Virginia Held, care work, which is essential for the health of individuals and communities, is not limited to the private sphere and should be considered a public concern. In the same manner, Joan Tronto supports the idea that care should be mainstreamed into political and social systems, shifting from being a devalued and unpaid activity within the family to a crucial part of governance. The capability approach, proposed by Martha Nussbaum and Amartya

Sen, can also be considered as a theoretical framework to include care work. According to Nussbaum (2012, p. 271), care-giving is a crucial mechanism that fosters the practical reason and capabilities that are necessary for a good human life as well as for a just society, including health, emotional well-being, and relationships. This can only be done if care work is considered as a social responsibility where everyone within the society, including the people, organisations and the government, should be involved. This redefinition also subverts the cultural expectations that position care-giving as a female sphere and demands the recognition of care as a common concern.

Caregiving responsibilities need to be shared between genders and between people of different economic statuses to work towards changing systemic oppression that results from these traditions. According to feminist scholars, the notion of redistributive justice should form the basis for reorganising care work. For instance, requiring all parents, irrespective of their gender, to take parental leave can help increase men's involvement and lessen the responsibility on women. For instance, Sweden's parental leave policy that requires fathers to use their leave or lose it has helped in maintaining gender equality in childcare by encouraging fathers to take leave (Almqvist & Duvander, 2014, p. 22). Cultural changes are also important regarding the redistribution of duties. The use of public awareness campaigns as well as education programs can help in the fight against stereotyping women as the sole caregivers, thus creating a society where caregiving is a shared responsibility. Some of the interventions that have been put in place in local communities are the caregiving cooperatives, which can assist in the establishment of support groups and help alleviate the loneliness that is often associated with caregivers. These strategies not only tackle gender inequity but also ensure that caregiving roles are fairer and just for all.

It is therefore vital to address care work within the economic framework to value and fairly distribute it. Solutions for the economic assessment of care work include compensating unpaid carers, using care vouchers in social security systems, and adopting UBI. Nancy Folbre (2006, p. 183–199), therefore, affirms that valuing care work through compensation *recognises* its economic and social value as well as the cost that the caregivers incur. Feminist economists have called for wages for care work, especially for unpaid domestic *labour*, as a way of addressing past injustices (England, 2005, p. 387). For instance, India's National Rural Employment Guarantee Act (NREGA) has included *caregiving-related* work because of *its* understanding of such work in the rural development programmes (Drèze & Khera, 2017,

p. 558). Likewise, with Universal Basic Income (UBI), *which involves the issuance of income for every citizen*, it can help lessen financial strain on caregivers and allow the caregivers to have more control over other activities that they may wish to pursue (Standing, 2017, p. 110). Another possible solution is care credits in pension and social security systems, whereby caregivers are paid for the time they spend out of work. For instance, Germany and Sweden have adopted this policy whereby caregivers are granted credits towards their retirement benefits according to the time they spend taking care of the patients (OECD, 2019). These measures not only offer economic protection but also enhance the social recognition of care work as valuable.

There are several mechanisms through which institutions facilitate shared responsibility in caring, and these include. This means that affordable and accessible childcare and eldercare services are some of the best ways of minimising the caregiving responsibilities on families, especially women. A study shows that providing subsidised childcare enhances women's employment, similar to Norway and Canada, where free child care services have played a crucial role in reducing gender disparities in employment rates (OECD, 2019). Other sectors, like the elder care services that are becoming more important as the population of the elderly rises, should not be ignored. More importantly, increased public investment in the LTCFs and home-based care services is required to address the need (ILO, 2018). Furthermore, there is evidence that suggests that support services like respite care and mental health counselling can help reduce the level of stress that comes with caregiving and thus improve the overall quality of life of the caregivers. The involvement of technology in caregiving is another area of interest that should be discussed. Technological advancements like telemedicine, remote monitoring, and digital platforms for coordinating caregivers can also improve caregiving and its accessibility, especially in the communities that need it most (World Bank, 2020). However, it is critical to consider how these technologies can be implemented while taking into consideration the current digital divide and the exclusion of marginalised caregivers from these innovations. The model that can help to establish a shared responsibility for care work implies philosophical shifts, policy changes, real market valuation of care, and organisational support. The view that care work is a social duty shifts the existing gender paradigms and encourages shared responsibility in care. Through the incorporation of care work into economic systems and providing support systems, it is possible to establish systems that empower and support caregivers and promote justice, equity, and well-being for everyone.

6. Care Work as a Site of Empowerment

This makes it vital to change the systems and structures that surround care work to support care workers in exercising more control over their work. Nevertheless, due to its crucial significance for the well-being of society and individuals, care work is still marred by low social prestige, low wages, and low levels of autonomy and decision-making power. This undervaluation is systemic and erodes the dignity of caregivers, fuelling inequalities that are particularly damaging to women. It is imperative to recognise care work as skilled work that demands emotional quotient, management skills, and strength, given the fact that such work is undervalued and carries an unequal burden (Folbre, 2001, p. 17-22). If society accepts caregiving as valuable work, then it will be possible to address the barriers that are present in the system. Independence is another crucial element of empowerment. Care workers, especially those in the organised sectors like nursing or domestic services, often experience a lack of control over their hours of work, workload, or working conditions (ILO, 2018). These changes include policies that guarantee decent work, fair wages, safe conditions of work, and bargaining rights to ensure that caregivers are accorded dignity and justice. For instance, New Zealand's Equal Pay Settlement for care workers in 2017 acknowledged the work done by caregivers as a skilled workforce and boosted remuneration, as well as paving the way for equal remuneration for care work (OECD, 2019). Improving agency in care work also depends on providing educational and professional opportunities. Promoting accessible training and a career ladder can improve the status of the caregiving professions and give caregivers the ability to demand better working conditions and opportunities for career progression (England 2005, p. 386–388). In addition, there are media campaigns on responsible and equality patterns of care that break gender norms regarding caregivers, which may promote the involvement of men as caregivers and make care work an honourable and common responsibility for all. To conceptualise care work differently, we have to picture a world in which care work is seen as a crucial part of people's lives and the life of society. This re-imagination is grounded in the feminist ethics of care, which offers a philosophical perspective on the social and ethical nature of care (Held, 2006, p. 22). It also shifts the focus of caregiving from being a private responsibility to a public responsibility, which helps to break down the stereotype of caregiving as a feminine and low-status activity.

The incorporation of care labour into public policies and economic structures is a fundamental process of claiming and fair distribution of such work. Thus, policies like UBI

or care allowances present ways to compensate unpaid carers financially and thus reduce the economic risks of caring (Standing, 2017, p. 190). Analogously, integrating care labour into the national economic accounts, like Satellite accounts for Unpaid work, underlines the contribution that this sector makes to society as well as the need for equitable policy interventions. To reimagine the care economy, it is also important to recognise that caregiving is valuable in and of itself and is not just a commodity. According to Tronto, caregiving promotes interdependence and solidarity, which are necessary for justice and sustainability. This is in harmony with Nussbaum's (2012, p. 265) capability approach, which focuses on how caring for others also empowers both carer and cared for in order to become the people they want to be. Technological innovations also present a vast opportunity to improve caregiving practices. Technological advancements like assistive devices, digital care platforms, and AI applications help to reduce the burden on caregivers and enhance the quality of care (World Bank, 2020). However, the challenge of equity and accessibility in the application of these technologies must not be overlooked, as this may only serve to intensify the current social divide.

Lastly, it is important to change society's perception so that it understands that caregiving is a vital role in society. To this end, public recognition via awards, the media, and advocacy campaigns can help increase the perceived value of care work and garner broader support for its importance. It is through such initiatives that society is able to understand that caregiving is actually a public good that is necessary for the well-being of the entire society and not a private burden that is borne by selected individuals or families. There is a possibility of achieving change and equality in care work, a domain commonly overlooked and overlooked by policies. Therefore, by restoring the dignity, autonomy, and agency of caregivers and reframing care work as a social responsibility, it becomes possible to establish care as a vital part of human and social life. This shift not only challenges patriarchal structures in caregiving but also sets the groundwork for a social transformation towards justice and equality.

7. Conclusion

This article has aimed to provide a theoretical and comprehensive overview of care work, as well as to reveal its significance for the well-being of people, families, and societies. Although it is one of the most essential forms of work that involves unpaid domestic and emotional labour, care work is not recognised and remunerated adequately in the prevailing economic systems and policy

structures. As put forward by the theory of feminist ethics and moral philosophy, the discussion showed how care work is unjustly viewed as a moral imperative associated with love and family responsibilities (Kittay, 1999, p. 94). This 'weaponisation' of love paradoxically consolidates the notion that caring is a private duty, thus erasing its role in the economy and society.

The critique highlighted the erasure of care work from the economic sphere and the devaluation of the relational and emotional aspects upon which it depends and which only worsen economic vulnerability, social exclusion, and emotional burden shouldered by care workers, especially women. In response, the article suggested a normative and practical program for reframing care work as a social responsibility that requires strategies for the decentring of care, the integration of care into the economy, and the institutionalisation of caring (Nussbaum, 2012, p. 267). In addition, the article painted a positive picture of care work as a form of power that should be embraced culturally and structurally as the bedrock of caregiving. Consequently, a radical perspective on care work recognises and values the social, affective, and material aspects as essential to the well-being of individuals. In order to achieve justice, solidarity and sustainability, it is important to improve the status of care work and its equal division. This change needs an effort from everyone and is underpinned by the idea that care work is not only done out of love but also out of justice.

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