

## Book review

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### **VALUING CARE WORK: COMPARATIVE PERSPECTIVES**

**Cecilia Benoit and Helga Hallgrímsdóttir, editors**

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There is now a very large literature on paid and unpaid caring and care work in the health and social sectors. So the question to ask with this new book is, what does it add to our current understanding? This book is a comparative collection of papers that were originally prepared for an international workshop of health practitioners held in Canada, in 2006. Those attending were asked to explore the relationships between gender, equity and dignity in care work. Underpinning this analysis is the way that the presence of a welfare state regime has shaped care provisions along with the impact of neoliberalisation in context specific situations. The countries under examination are Canada, Finland and Iceland and, while the editors acknowledge that the analyses cannot be generalised to other 'high-income' countries and those with different welfare state histories, there are insights here for those interested in feminist analyses of caring and the applicability of these analyses in countries like New Zealand and Australia. What is different in this collection from some other edited collections on care work is the wide range of what is included as care work. This is both strength and a limitation of the collection. The book is structured in six parts commencing with a theoretical overview of the literature on care work. This is a useful beginning for those not familiar with this, and serves as a refresher for those who are. Following this in part two and three are chapters on paid care work in formal organisations and paid care work in intimate and community settings. The case studies begin with a focus on maternity care in Canada and the increasing medicalisation of childbirth, labour shortages and lack of job satisfaction amongst maternity care providers. These have resulted from the recent neoliberal health care reforms and are in contrast to the maternity situation in Finland and Iceland, where female dominated nurses and midwife groups have helped ensure that 'equitable access to primary maternity care for all families and dignified working conditions for nurses and midwives have remained core features of each countries' health systems' (p. 59) despite the neoliberal shift. The next chapter explores the relationship between work and migration patterns of nurses in Canada and Finland, and illustrates that the problem of recruiting nurses, the vast majority of whom are female, is similar in these countries to the situation in all other high income countries. This chapter also highlights the impact of international nurse mobility with the shortage of nurses worldwide resulting in migration from low to high income countries. This attention to nurses and midwives is followed by a focus on paid care work in the homes of older people as well as looking at the experience of home care services for the recipients of these services. This section also includes a chapter on aboriginal care workers in community settings and stresses that the one-size-fits-all policy approach does

not work to reduce the health inequalities experienced by indigenous peoples in Canada. Part four and five of the collection move on to unpaid care work and include chapters on mothers and their unpaid care work after separation or divorce, adult children caring for aging parents, grandparents raising grandchildren, hospital volunteers and volunteers in an organisation caring for sex workers. The final chapter attempts to bring this at times seemingly disparate collection together with an examination of the implications of the papers for public policy and implications for further research. However what links all the chapters together is the overall focus on gender and health. Is this enough for this collection to be seen as an integrated whole? For some it may not be but I suggest there are other uses for the collection. Mostly I suspect readers will be interested in particular empirical chapters and not read the book from cover to cover. Those chapters that use interview material to illustrate their argument make compelling reading and those interested in the provision of home care, for example, will find some fascinating insights into the gendered nature of this care through the analysis of the words of the recipients. Those interested in home care work and ageing-in-place are likely to be different readers to those who wish to read about an advocacy organisation for sex workers. And those interested in maternity care may not dip into the chapter on grandparents raising grandchildren in Canada. In addition, some of the chapters focus on areas where there is a large literature, for example, paid and unpaid care work with those who are ageing whereas in the example of grandparents raising grandchildren, the literature is not nearly as expansive and this chapter makes a useful contribution.

So what does the collection illuminate about the gendering of care work? The authors contend that there are three important premises that have informed all the analyses developed by the twenty-six contributing authors. First, that assumptions underpinning the nature of caring practices and relationships in the workplace are gendered and structure the organisation of care work and the delivery of health and social services. In these chapters something that is seen as 'natural' and 'immutable', that is, that women are ideally placed to be the carers and nurturers, is shown to be a particular historical construction. Second, the well-being of those receiving care is inextricably linked to the well-being of those who provide care and where both paid and unpaid caregivers are predominantly female, gender is significant in shaping the extent to which care providers experience equitable working conditions and care recipients receive quality care. Third, the 'larger historically changing policy context in which intimate labour is organised also has gendered dimensions, which take on a range of configurations within and across countries at different points in time' (pp. 269-270).

Four main findings emerge from the chapters in the book. In the area of paid work, it is shown how there is a 'downloading' of care work from relatively more well paid health and social care practitioners to those whose skills are less valued and who receive less financial recompense for their work. With the unrelenting focus on market forces and efficiency the conditions of health and social care have also deteriorated. The responsibility for care is now more squarely placed on the individual and their families. The consequences of these changes need to be explored in the context of a society that is already stratified by ethnicity, age, class and spatial location. These findings reflect the impact of neoliberalisation – a process that involves 'regulatory experimentation, interjurisdictional policy transfer, and the formation of transnational rule regimes' (p. 273). The discourse of neoliberalisation emphasises cost-efficiency and accountability, those receiving the services are positioned as 'consumers' and having a choice is portrayed as the normative good. Within this policy framework, considerations of equity and working conditions and access to care are no longer central.

What the collection does reveal is the pervasiveness of gender as a feature of the organisation and delivery of health and social care across a number of different contexts, from the paid

work of nurses and midwives in formal institutional settings to the unpaid work of volunteers in the community. Along with this pervasiveness are the embedded assumptions about the appropriateness of women as carers within the formal and informal sectors of health and social care. In an age sometimes framed as 'post feminist' providing a convincing feminist analysis that continues to remind us of the consequences of the gendered nature of both paid and unpaid care work is an important achievement of this collection.

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