

# Moral Responsibility in Market Relations

## *A Care-Ethical Enquiry*

Louisa Gjersøe Bond



Master Thesis in Philosophy

The Department of Philosophy, Classics, History of Art and Ideas

The University of Oslo

Supervisor: Professor Tove Pettersen

December 2014



# MORAL RESPONSIBILITY IN MARKET RELATIONS

## *A Care-Ethical Enquiry*

Louisa Gjersøe Bond

© Louisa Gjersøe Bond

2014

Moral Responsibility in Market Relations: A Care-Ethical Enquiry

Louisa Gjersøe Bond

<http://www.duo.uio.no>

Printed by CopyCat Forskningsparken, Oslo

## ABSTRACT

Can care-ethics provide an argument for the moral responsibility of economic agents? In mainstream economic theory it is standardly assumed that economic agents are largely rational, self-interested and driven by the pursuit of profit or individual utility. In this light, there seems to be little room for ethical considerations, let alone the values of care-ethics.

Yet, I maintain in this thesis that the notion that economic activities lie firmly outside the realm of morality is both false and problematic. In fact, I argue that there is an implicit normative standard present in the general economic outlook that I call market thinking. In consequence, rational, self-interested and individualistic behaviour is not only generally *expected* but also implicitly *accepted* in economic decision-making. By contrast, the care-ethical emphasis on relationships and human connection opens for a profoundly different view of the relevance of ethics to economics. Not only are economic activities the results of human decisions and human-made structures, but economic constraints also have a real impact on people's lives — including their opportunities to care.

Thus, I set forth a care-ethical argument for the moral responsibility of economic agents, based on the care-ethical emphasis on relationships and an active commitment to care and avoidance of harm. My proposition is not that economic activities and market relations are the same as caring practices and caring relationships. Rather, I maintain that economic activities are already deeply embedded in particular human relationships or larger relational structures. A care-ethical interpretation of responsibility as relational would therefore hold economic agents responsible through the particular relational context of their activities.



## ACKNOWLEDGEMENTS

I would like to thank my supervisor Professor Tove Pettersen for thorough feedback and generous use of her time throughout the process of writing this thesis, and not least for introducing me to the field of care-ethics through her courses on Gender and Philosophy and Feminist Ethics. I would further like to thank Professor Karine Nyborg at the Department of Economics at the University of Oslo, who very kindly took the time to read through an earlier version of chapter one, and gave me some useful pointers on the current state of research in behavioural economics.

A very special thanks goes to my mother, who has not only proofread the whole thesis but also read through many of my earlier drafts with sincere interest and encouragement. I am also very grateful to my husband for all the background support and care that has made it possible for me to see this project through to the end. Again, thanks to my mother and also my mother-in-law, for spending many evenings caring for our little daughter so I could study those extra hours every week.





## TABLE OF CONTENTS

INTRODUCTION	1
Chapter One	
THE FUNDAMENTALS OF MARKET THINKING	5
Economic Markets	6
Economic Man	8
Evaluating Economic Outcomes	10
Unrealistic Assumptions and Behavioural Economics	11
Chapter Two	
THE FUNDAMENTALS OF CARE-ETHICS	15
The Origins and Themes of Care-Ethics	16
Defining Care	19
The Scope of Care	21
Dangers of Dominance	24
Problems of Altruistic Care	25
The Social and Political Relevance of Care-Ethics	27
Chapter Three	
A CARE-ETHICAL CRITIQUE OF MARKET THINKING	31
Self-Interest and Rationality	32
Independence versus Caring Responsibilities	36
Structural Inequality	39
Unrealistic Assumptions	40
The Normative Implications of Market Thinking	42
Economics is not a Separate Sphere	44
Rethinking the Purpose of Economic Life	47

## Chapter Four

A CARE-ETHICAL INTERPRETATION OF RESPONSIBILITY	53
Our Moral Obligation to Care	54
Social Responsibility	58
Social Welfare versus Privatised Care	60
Shared Responsibility and Structural Injustice	63
Tools for Thinking About Responsibilities	67
A Care-Ethical Interpretation of Responsibility	68

## Chapter Five

MORAL RESPONSIBILITY IN MARKET RELATIONS	71
From Social Welfare to Business Responsibility	72
Engster's Argument for the Moral Responsibility of Businesses	74
The Problem of Free Riding on Care	75
The Problem of Businesses' Moral Personhood	77
The Problem of Profit Maximisation	81
The Root of the Problem	86
An Alternative Care-Ethical Argument	89

CONCLUSION	95
------------	----

BIBLIOGRAPHY	99
--------------	----





## INTRODUCTION

The puzzle I want to address through the course of this thesis is that economic activities and considerations seem generally presumed to lie outside the realm of ethics. In mainstream economic theory, it is standardly assumed that economic agents are largely rational and self-interested, and seek maximised profit or individual utility. In this respect, it is difficult to see how any ethical considerations could have any real influence on economic decision-making – least of all care-ethics. After all, while economics seems to be all about rational calculation and individual gain, care-ethics emphasises the value of human connection and relationships, the fact of human dependence, and suggests an active commitment to care and avoidance of harm. On the other hand, economic decisions and an economic frame of mind seem deeply ingrained in many aspects of our everyday lives. For instance, people’s access to wage-earning work and other basic goods, the distribution of wealth and global patterns of consumer relations are all questions relating to economics. In fact, I will argue that given the fact that economic conditions set important constraints on our choices and opportunities — including our opportunities to care — it should be acknowledged that economic considerations are not separate from, but deeply relevant to, the realm of ethics.

How might care-ethics influence our thinking around economic activities and market relations? Could care-ethics provide an argument for the moral responsibility of economic agents? Looking at the question of moral responsibility through the lens of care-ethics opens up a very different approach compared to that of the general economic outlook I call market thinking. With care-ethics, the focus shifts from an individualistic ontology highlighting individual independence to a relational ontology highlighting the relational context of persons. This makes it possible to bring forth concerns relating to dependencies and relational ties, and see the possibilities of interpreting responsibility as shared or distributed.

However, approaching the question moral responsibility in market relations through the perspective of care-ethics also entails the challenge of balancing a descriptive theory with a normative framework. The field of economics is largely a descriptive discipline, while care-ethics is a moral theory. Not least, they each comprise a large and diversified body of re-

search. My method, therefore, is to first extract the main features and assumptions of economic theory and care-ethics respectively, allowing me to compare the two as distinct theoretical perspectives with fundamentally different ontologies. In many ways it is precisely the tension between the underlying assumptions and methodology of care-ethics and economics that makes this an interesting discussion. A care-ethical interpretation of responsibility has the potential of profoundly informing our whole thinking around responsibility in market relations, by providing a different and fresh approach to the topic. This is an enquiry, then, that both challenges our standard approach to economic questions and investigates the boundaries and application of care-ethics as a moral theory.

Thus, I begin by setting the scene in the first two chapters with general introductions to the main themes of economic theory and care-ethics. The first chapter presents the basic assumptions and principles of mainstream economic theory that underlie the general economic outlook that I call market thinking. This is a framework for thinking about human behaviour and decision-making in economic terms. Chapter two presents the main themes of care-ethics, which include a focus on the importance of care, the fact of human dependence, a sensitivity to context and an emphasis on relationships to particular others. I suggest that care can be defined as a practice and a value, as Virginia Held (2006) proposes, although I see Tove Pettersen (2008; 2011) as providing the best description of the normative value of care as a balance between the principles of extended non-maleficence and restricted beneficence. I also look at Daniel Engster's (2007) account of care and discuss the difficulty of setting a precise boundary to the scope of care-ethical activities. Finally, I address the criticisms that care-ethics mandates dominance or paternalism or makes caring a self-sacrificing altruistic act.

In chapter three I present a care-ethical critique of market thinking. I argue that market thinking involves the dichotomy of self-interest and altruism, and rests on an assumption of individual independence. From a care-ethical perspective, this ignores how being dependent on others' care or having caring responsibilities for others may affect one's position in the competition for goods in the market. Market thinking also overlooks the possibility of structural differences manifesting over time. This discussion rests on the analyses of care-ethicists Eva Feder Kittay (1999) and Joan Tronto (1993; 2013), and political theorist Iris Marion Young (2011). I conclude by arguing that market thinking involves an implicit normative standard, which I suggest cannot be contained within the imagined boundaries of a pure economic sphere. Not only do economic events often have real impact on people's lives, but economic events are in turn the results of human-made structures and human decisions. Thus, I suggest many economic questions have an influence on care-ethical concerns, and that care-ethics in turn can challenge our thinking around economic activities and relations.

In chapter four I approach the subject of moral responsibility. I look into three alternative arguments for accepting the moral obligation to care, as presented by Kittay (1999), Engster (2007) and Pettersen (2011). I then discuss what a care-ethical interpretation of responsibility might entail, and suggest that it would be grounded in the notions of reciprocity, shared commitment, the equal worth of the parties, and the relational ontology of care-ethics. This would open for an understanding of responsibility as arising within relationships and relational structures, similar to Young's (2011) notion of shared responsibility.

In chapter five, I move on to discuss the relevance of a care-ethical interpretation of responsibility to market relations. I examine Engster's (2007; 2011) argument for the moral responsibility of businesses, which forms the basis for his proposal for a care-based stakeholder approach to business. However, I see several potential problems with Engster's account, and as a consequence I propose an alternative care-ethical reading that could avoid these problems while contributing to a meaningful interpretation of the moral responsibility of economic agents. I suggest a care-ethical interpretation of responsibility would hold economic agents responsible to the extent that they take part in particular relationships or larger relational structures. While I want to avoid interpreting economic activity as a caring practice, I nevertheless propose that the normative values of care would be able to inform and restrain economic activity within its particular relational context.





## CHAPTER ONE

### THE FUNDAMENTALS OF MARKET THINKING

The purpose of this chapter is to introduce the standard assumptions and principles of mainstream economics.<sup>1</sup> Together these form the general economic outlook I call “market thinking” — a framework for thinking about human behaviour and decision-making in economic terms. The standard assumptions of mainstream economic theory are that economic agents are rational and largely self-interested, and interact through competitive markets. Corporations seek to maximise their profits, and consumers seek to maximise their individual utility.<sup>2</sup> The historical roots of these basic economic ideas go back to the 18<sup>th</sup> and 19<sup>th</sup> centuries with the works of Adam Smith and John Stuart Mill. Smith (1776 [2004]) famously portrayed the workings of the market as an “invisible hand”, where the self-interested decisions of many individuals tend to promote those economic outcomes that are most efficient. Mill (1844 [1992]) described the essential characteristics of the “economic man”, as rational and motivated by a desire for material wealth.

Of course, the standard assumptions about economic agents and markets are not true representations of reality. The occurrence of market failures are recognised and studied phenomena, and insights from behavioural economics have shown that the assumptions of full rationality, self-interest and willpower in many cases do not hold. However, the fact that market failures occur does not necessarily undermine the market ideals themselves. Nor do behavioural economists completely abandon the established framework of mainstream economic theory. Rather, the standard assumptions serve as a useful starting point for economic modelling, to which more substance and detail can later be added. Indeed, the basic assumptions and principles of mainstream economics seem to be largely accepted as saying something essentially true about economic decision-making and the workings of the market.

---

<sup>1</sup> I will use the term “mainstream” to refer to economic theory as it is predominantly taught at leading universities worldwide, and as presented through standard introductory textbooks in economics such as Bernheim and Whinston, 2008; Mankiw and Taylor, 2008 [2011]; and, Blanchard, Amighini and Giavazzi, 2010 [2013].

<sup>2</sup> As an economic term “utility” refers to an individual’s satisfaction of preferences or wellbeing, and is represented by a numeric value (Bernheim and Whinston, 2008, p. 114). A greater utility value represents a higher level of satisfaction. I will come back to the notion of utility later in this chapter.

## Economic Markets

Mainstream economic theory is usually divided into two major categories: microeconomics and macroeconomics.<sup>3</sup> Microeconomics deals with the economic decisions of individuals and firms, and how these decisions together reflect the aggregate supply and demand of markets. Macroeconomics has a wider scope and includes a national and global perspective of economic activity, for instance looking at monetary and fiscal policies and other structures that affect the economy at large.<sup>4</sup> One could say that microeconomics provides the basics: It represents “the trunk of the tree” from which numerous other subfields of economics have branched (Harberger, 2008). Therefore, the focus of this chapter is mainly on the micro perspective, looking at human behaviour, motivation and interaction through the basic microeconomic assumptions.

In microeconomics, markets are often assumed to be perfectly competitive, and are thought to be efficient means of allocating scarce resources.<sup>5</sup> In perfectly competitive markets, each agent will have full access to information and no single agent will be large enough to influence the market prices. This means that the relevant information needed to make informed decisions is readily available. The market prices will then reflect the market equilibrium, which is the point where the consumers’ willingness to pay for a good exactly matches the price the producers are willing to charge for that good. The various market prices are determined by the value assigned to the various goods, reflecting the standpoints of both the buyers and the sellers (Harberger, 2008). In short, the market prices reflect the demand and supply in the market. Organising economic activity through markets is efficient as it allows for specialisation, enabling different people to put their efforts and talents into different projects.

The generalisations of standard microeconomic theory listed above are usually labelled “neoclassical”, referring to the heredity of the classical economic theories of the 18<sup>th</sup> and 19<sup>th</sup> centuries. Smith’s (1776 [2004]) often quoted statement about the “invisible hand” seems to have been especially influential, providing part of the intellectual foundation for

---

<sup>3</sup> I am here ignoring what might be thought a third major branch of economics, econometrics, which applies empirical data and statistical methods to economic models (Hausman, 2013, 1.2).

<sup>4</sup> Monetary policy is the control of money supply by a nation’s national bank, which affects interest rates, inflation and economic activity. Fiscal policy is a government’s use of taxes and/or, public spending to influence economic activity. See Blanchard, Amighini and Giavazzi, 2010 [2013], p. 91-95, 567, 570.

<sup>5</sup> For an overview of the central assumptions and themes of mainstream microeconomic theory, see for instance Bernheim and Whinston, 2008; Harberger, 2008; Hausman, 2013; Mankiw and Taylor, 2008 [2011]; and, Weintraub, 1993.

neoclassical economic theory.<sup>6</sup> Smith describes the workings of the market as an invisible hand:

“[The individual] generally, indeed, neither intends to promote the public interest, nor knows how much he is promoting it. [...] he intends only his own gain, and he is in this, as in many other cases, led by an invisible hand to promote an end which was no part of his intention. Nor is it always the worse for society that it was no part of it. By pursuing his own interest he frequently promotes that of society more effectually than when he really intends to promote it. I have never known much good done by those who affected to trade for the public good.” (Smith, 1776 [2004], p. 300)

The context of the statement is Smith’s discussion of, and argument against, protectionism, where domestic goods are favoured over foreign. The idea of the invisible hand is that when combined, the individual decisions of the various agents in the market tend to promote those economic endeavours that are most advantageous and efficient. Smith’s statement has often been taken as an argument for free, unregulated markets: Markets are most efficient when left alone because the decisions of many self-interested agents tend to promote the welfare of society as a whole (Mankiw and Taylor, 2008 [2011], p. 10). This interpretation of Smith’s theory has left a deep impression of the efficiency of unregulated economic markets. This is a concept of markets as independent, self-correcting entities, functioning best when obeying their own rules, and of the people operating in the markets as fundamentally self-interested and independent individuals.

In macroeconomics there are two major schools of thought. One is new classical macroeconomics, which rests solely on the neoclassical microeconomic foundations. The other is the Keynesian, or new Keynesian, approach to macroeconomics, which is developed from the work of John Maynard Keynes.<sup>7</sup> New classical economists are generally sceptical to market intervention and see short-term dips in the economy as necessary, at least in theory, in order for markets to correct themselves. There is here a deep-rooted faith in the ability of market mechanisms to price goods correctly and to repair any imbalances in the levels of prices, production, employment and so on, restoring them to their “natural” levels (Mankiw and Taylor, 2008 [2011], p. 10). New Keynesian theory, on the other hand, explains slumps and recessions as resulting from market failures and low overall demand. New Keynesians argue against the new classical view that prices and wages adjust immediately. Rather, prices are

---

<sup>6</sup> For a comment on the influence of Adam Smith’s idea of the invisible hand for contemporary economics, see Mankiw and Taylor (2011, p. 10) and Nelson (2011, p. 38-39). Friedman (1962 [2002], p. 133) also refers to Smith’s quote in his argument against the social responsibilities of businesses.

<sup>7</sup> Keynes’ major work *The General Theory of Employment, Interest, and Money* was published in 1936.

thought to be “sticky”, adjusting slowly and in stages, and wages are often thought to be connected to the efficiency of the workers so that cutting wages implies lowering productivity (Mankiw, 2008). Because prices and wages adjust slowly, there is here an argument for government intervention in the form of monetary and fiscal policies (Mankiw, 2008). However, in practice and broadly speaking, it seems that the divide between new classicists and new Keynesians is not so deep. Although they disagree on various issues, such as the remedies for unemployment or the causes of recessions, there seems to be general agreement on the fundamentals. The new Keynesians have adopted the idea of rational agents and efficient markets, and new classicists generally agree that prices and wages do not, in fact, adjust immediately, and that monetary policies do work (Hoover, 2008; Krugman, 2009, p. 2). In both approaches, the basic microeconomic assumptions of economic agents and markets are used as starting points for economic modelling.

### **Economic Man**

Economic agents are standardly assumed to be rational and self-interested, embodied in the notion of the “economic man”, *homo economicus*. The term is often associated with Smith, and in *The Wealth of Nations* he famously comments: “It is not from the benevolence of the butcher, the brewer, or the baker, that we expect our dinner, but from their regard to their own interest” (1776 [2004], p. 12). Smith points out that it is self-interest, not benevolence, that is prevalent in the economic decisions of individuals. If the butcher or baker had given away their goods in the name of benevolence, there would be nothing left to sell and their businesses would crumble. A businessman aims to make his business thrive and the businessman’s driving force is his own, not other’s, success. The point is that self-interest is thought to be an important driving force in trade.

Although the concept of the economic man is often associated with Smith, it first came into use in the 19<sup>th</sup> century (Nelson, 2011, p. 38). In his early work on political economy, Mill (1844 [1992]) sought to define the field of economics as an independent, scientific discipline. Its aim should be to study man “... solely as a being who desires to possess wealth, and who is capable of judging of the comparative efficacy of means for obtaining that end” (Mill, 1844 [1992], p. 137). Here, Mill expresses the two basic assumptions about economic agents: They are motivated by material desire, and the rationale of seeking the most efficient means towards that aim. In the same passage Mill states that the economic man always chooses a larger portion of wealth than a smaller. Further, the desire for wealth is only checked by two persistent principles: first, an aversion to labour, and second, a desire for immediate satisfaction.

The purpose of economics is therefore to study and predict the behaviour of people in society as if these desires and principles were their “absolute ruler[s]” (Mill, 1844 [1992], p. 138). On Mill’s account, economics deals only with a limited picture of human agency, but he does not pretend that this provides a full description of humans. He writes: “Not that any political economist was ever so absurd as to suppose that mankind are really thus constituted, but because this is the mode in which science must necessarily proceed” (Mill, 1844 [1992], p. 139). The concept of the economic man serves as an abstraction for the purpose of economic analysis. In order to understand human agency, the idea is that one must begin by studying each aspect of the complex mix of desires and aversions that influence a person’s actions. The field of economics, according to Mill, should deal only with those parts of human conduct where the acquisition of wealth is the leading aim (Mill, 1844 [1992], p. 139).

The legacy from Smith and Mill is still present in contemporary economics, with the standard assumptions of economic agents as rational and generally motivated by self-interest (Bernheim and Whinston, 2008, p. 7-8; Hausman, 2013, 1.1). The assumption of rationality is usually interpreted as the agent’s ability to consistently rank the alternatives he or she faces with reference to individual preferences, so that for every alternative they face they are able to determine whether they prefer it more or less to another, or are indifferent (Hausman, 2013, 1.1).<sup>8</sup> It is worth noting that the assumption of self-interest does not necessarily follow from the assumption of rationality. The concept of individual preferences is meant to represent all the considerations, feelings or motives relevant to a person’s choices (Hausman and McPherson, 1996 [2006], p. 46). That is, a person’s preferences are supposed to include *whatever* that person cares about. So, while many persons pursue individual material gain, others may choose to donate to charities or to a political cause. In principle, altruism is not ruled out in economic theorising, though material self-interest is still usually assumed to be the key motivation (Bernheim and Whinston, 2008, p. 7; Hausman, 2013, 1.1; Hausman and McPherson, 1996 [2006], p. 79).

What it means for corporations to be rational and self-interested is that they seek to maximise their profits. Consumers are assumed to maximise their individual utility, meaning that they will choose what they most prefer within the constraint of their budgets. Consumers will want a range of goods, including things like food, clothing, housing, medicines, wages, and leisure time. What sort of specific goods consumers prefer and how these are ranked in relation to one another, will vary from person to person. However, it is assumed that consumers generally prefer more to less (Bernheim and Whinston, 2008, p. 95; Mankiw and Taylor, 2008 [2011], p. 440). Furthermore, they are likely to want a variety of goods, not just one

---

<sup>8</sup> Though see Sen (1987, p. 13) for an argument against defining rationality as internal consistency.

type, and a certain balance between different types of goods. Some prefer apples to bananas, but no one will want to live only on apples or only on bananas. Trade-offs are unavoidable. Buying more of one good means there is then less left to spend on another good, and the more the consumer has of one type of good, the less she will be willing to pay for more of the same (Bernheim and Whinston, 2008, p. 95, 109-110; Mankiw and Taylor, 2008 [2011], p. 441-443).

Following the assumptions of rationality and self-interest, trade will come about only when it is mutually beneficial to the trading parties (Bernheim and Whinston, 2008, p. 111). This basic economic principle of mutually beneficial trade echoes Smith's description above of the butcher, brewer and baker all going about their businesses with regard to their own interest (1776 [2004], p. 12). The assumption that consumers prefer more to less, and are generally motivated by self-interest, is a continuation of Mill's description of the economic man who seeks evermore material wealth.

### **Evaluating Economic Outcomes**

When a consumer compares two bundles of goods, the bundle that better represents her individual preferences has a greater utility value. The utility value is a numeric value indicating the degree of satisfaction of individual preferences (Bernheim and Whinston, 2008, p. 114). The utility function is then a mathematical representation of the utility values of different bundles of goods. This is simply a way of representing each agent's ranked preferences (Hausman and McPherson, 1996 [2006], p. 48-49). The use of the term "utility" in economic theory indicates the historical links to utilitarianism, yet few contemporary economists would claim they are utilitarians. Utilitarianism comprises the moral theories that set the maximisation of total or average utility as the final good, where utility may be defined as happiness, pleasure, or wellbeing. In economics, utility or wellbeing is usually taken to mean the satisfaction of individual preferences, instead of a mental state like happiness (Hausman and McPherson, 1996 [2006], p. 105). A person's preferences can then simply be seen as a given set of considerations, and thus economists avoid the normative discussion of what people's preferences should be. Economists will sometimes evaluate economic outcomes in terms of whether they make people better off, or increase overall welfare. However, this requires adding up individual welfare and drawing up a comparison on a single scale, and economists are generally wary of interpersonal comparisons of utility (Hausman and McPherson, 1996 [2006], p. 100, 135). The problem then is that if an individual's satisfaction of preferences

cannot be identified as being better or worse than another's, then one cannot say much about the overall economic welfare either.

However, another way of comparing economic outcomes is to use the principle of Pareto efficiency. An outcome is Pareto efficient if no one can be made better off without someone else being made worse off (Bernheim and Whinston, 2008, p. 588; Hausman and McPherson, 1996 [2006], p. 136-137). Still, Pareto efficiency says little about the distribution of wealth, for instance, or the general level of welfare. Imagine an initial economic distribution of extreme wealth inequalities. If the very poor cannot be made better off without reducing the wealth of the very rich, even by a small amount, then the proposed change would not be a Pareto improvement. Yet one would think that a small amount of money would have substantially higher value in the eyes of the poor than the rich.

The remaining tool in the economist's toolbox is cost-benefit analysis. This approach builds on the basic economic principle of opportunity cost: The cost of something is what you give up to get it, and the value is the benefits forgone (Mankiw and Taylor, 2008 [2011], p. 5-6). In a cost-benefit analysis, value is set to the costs and benefits of economic policies or outcomes, based on people's willingness to pay for the proposed changes. This is then used as the basis for a comparison. Again, a problem with cost-benefit analyses is that the criteria for assessing the value of economic outcomes is set by people's willingness to pay. People's willingness to pay depends on their ability to pay, and so the preferences of the wealthy will weigh more than the preferences of the poor (Hausman and McPherson, 1996 [2006], p. 149).

### **Unrealistic Assumptions and Behavioural Economics**

Mill was explicit in his scientific methodology, seeking first to determine the major causal factors, the laws, that work on individuals as they pursue their economic aims, and then studying the combined consequences of these (Hausman, 2013, 3.1; Mill, 1844 [1992], p. 139). Mill argued that because there are so many causal factors in play when determining economic phenomena, one cannot simply compare, say, two national economies and hope to arrive at a precise conclusion as to which is the best. Instead, Mill thought that economic theory must focus on simpler domains and, from the results found here, deduce the consequences in more complex situations (Hausman, 2013, 3.1). On Mill's account, economics is not a precise science. Its conclusions are based on what are thought to be the main causes of economic behaviour, and derive from observations of simpler domains. In fact, Mill suggested that the conclusions of economics must be adjusted by other causes of human agency, apart from the desire for wealth, in order to be fully explanatory and predictive (Mill, 1844 [1992], p. 140).

Contemporary economists also point out that the standard assumptions made about economic agents in mainstream economic theory are meant for methodological purposes only. In consumer theory, for instance, the consumer's decisions are construed as a problem of optimising preferences within constraints. This is not an attempt at a full description of human decision-making, but serves as a model for describing implicit psychological factors relevant in economic analysis (Mankiw and Taylor, 2008 [2011], p. 460-461). There is a deliberate simplification of human agency, leaving only those factors thought most relevant to an explanation of economic behaviour. The basic approach is to start with simple generalisations and build on from these. Part of what it is to be a skilled economist is the ability to discern which features of the real world to include when building a model (Mankiw and Taylor, 2008 [2011], p. 26). Economist and Nobel laureate Milton Friedman, a prominent advocate of neo-classical theory, famously defended the "unrealistic" assumptions of economic theory. Friedman argued that one should judge an economic model on the basis of its predictability, not on the realism of its assumptions. What marks a model as good, on his view, is its ability to abstract all factors that are not relevant, so that the model explains "much by little" (Friedman, 1953, p. 8).

However, the last few decades have seen a wave of research within behavioural economics, where the standard assumptions of full rationality, complete self-interest and unwavering willpower have been questioned. Relying on controlled experiments and insights from psychology, behavioural economists argue, for instance, that a substantial portion of people are not exclusively self-interested but care about fairness and reciprocity. Experiments that go under the name of the Dictator Game and the Ultimatum Game are well-known in this context. In the Dictator Game, one participant, the dictator, is given a certain amount of money that she can divide between herself and a passive recipient. The Ultimatum Game is similar, but here the recipient can accept what is offered or reject it. Rejecting the offer means that neither player gets anything. In accordance with the neoclassical assumptions of economic behaviour, one would expect the dictators in the Dictator Game to keep their whole initial sum for themselves. One would also expect the recipients in the Ultimatum Game to accept any offer, however low, because a small sum would leave them better off than they would be with nothing. Yet, results show fairly consistently that small offers, below 20% of the initial sum, are rejected about half the time, suggesting that the recipients are reacting with indignation or are influenced by a sense of fairness (Fehr and Fischbacher, 2002, p. C5). Comparing the results from the two experimental games shows that the offers of division in the Ultimatum Game are substantially higher than in the Dictator Game, which suggests that the propos-



er in the Ultimatum Game anticipates the other player's reaction and adjusts her behaviour accordingly (Fehr and Fischbacher, 2002, p. C5).

Behavioural economics can potentially soften the standard assumptions of mainstream economic theory with insights into the limitations and biases that occur in decision-making. Still, as behavioural economist Matthew Rabin (2002) explains, this field of research does not represent a complete break with the methods and assumptions of neoclassical economics. Rabin writes: "This research programme is not only built on the premise that mainstream economic *methods* are great, but also that most mainstream economic *assumptions* are great. It does not abandon the correct insights of neoclassical economics, but supplements these insights with the insights to be had from realistic new assumptions" (Rabin, 2002, p. 658-659, his emphasis). The behavioural economist's stance is that many people's actual behaviour departs in significant ways from the standard neoclassical assumptions, and furthermore that these departures are important for economic analysis. Yet, the general framework of mainstream economics is largely kept in place. The debate seems no longer to be about whether the insights of behavioural economics should be taken seriously in mainstream economics, but rather how they can be incorporated into formal economic modelling (Rabin, 2002, p. 672-673).

Nor are economists merely interested in perfect market conditions; they also study market failures where some of the standard assumptions about economic agents and markets do not hold. Externalities, for instance, occur where the costs or benefits of a transaction affects others than those directly involved in the exchange. Examples are the cost to society of pollution from the production of certain goods, or the general benefit to society of education (Mankiw and Taylor, 2008 [2011], 198-204). As Olivier Blanchard and his co-authors write, economists no longer think of the economy as a machine: "Unlike a machine, the economy is composed of people and firms who try to anticipate what policy makers will do, and who react not only to current policy but also to expectations to future policy. Hence, macroeconomic policy must be thought of as a **game** between the policy makers and the economy [...]" (Blanchard, Amighini and Giavazzi, 2010 [2013], p. 499, their emphasis). The reference here is to game theory, and the suggestion is that we should think of economic decisions as strategic games.

While insights from behavioural economics and game theory add more substance and detail to economic analysis, an important element of the economic method is precisely to extract formal models and analyses from the confusion of reality. Granted, the standard assumptions of economic agents being rational and self-interested and of markets being perfectly competitive may be stylised and unrealistic compared to the complexity of the real world.

Still, these assumptions provide the starting point for theoretical analysis, to which one can later add more detail and accommodate various “failures”. The question is what exactly, and how much, to include as relevant. Nevertheless, the standard neoclassical assumptions and principles do seem largely accepted as pointing to an essential truth about human behaviour and the workings of economic markets. It is this fundamental starting point, these basic assumptions and principles, that make up the general economic outlook I call market thinking.

## CHAPTER TWO

### THE FUNDAMENTALS OF CARE-ETHICS

The focus of care-ethics is on relationships and activities of care. Caring takes place within relationships, and the emphasis is on particular attachment and actual situations instead of universal or abstract principles. Dependency is acknowledged as a basic human fact. As care-ethicist Virginia Held comments, all people are dependent on others' care at various stages of their lives, for instance as an infant or child, when old and frail, ill or disabled (2006, p. 10). The focus of care-ethics is therefore on interdependency and the relational context of persons, not on complete independence or self-sufficiency. Emotions, like attentiveness and empathy, are considered to be valuable guides to moral insight, accompanied by reflection and cultivation. Care-ethics thus stands in stark contrast to the dominant moral theories of deontology, utilitarianism and political liberalism, where rationality, impartiality, and the appeal to universally binding principles are important features.

This chapter serves as an introduction to the main themes of care-ethics. I begin by tracing the origins of care-ethics to Carol Gilligan's (1982 [1993]) *In a Different Voice* and the broader feminist endeavour to put women's perspectives on the agenda. Looking at the general care-ethical critique of the dominant moral theories of deontology, utilitarianism and political liberalism reveals care-ethics as a very different moral theory. I see the relational ontology of care-ethics as especially important in this regard.

The core normative value of care-ethics is care, and I follow Held's (2006) description of care as a practice and a value. This opens for an understanding of care as including many different practical activities, while at the same time grounding care as a normative value. However, I suggest the normative value of care is best captured by Tove Pettersen's (2008; 2011) description of care as a balance between extended non-maleficence and restricted beneficence. I go on to discuss the scope of care-ethics, as in where to draw the line between potentially caring activities and other activities. Next, I address some criticisms levelled at care-ethics that see the focus on care as hovering dangerously between paternalism and dominance, on the one hand, and altruistic self-sacrifice, on the other hand (Hoagland, 1992; Narayan, 1995; Silvers, 1998). Concerns related to differences in power, dependencies and needs are recurring themes within care-ethics (Noddings, 1984 [2003]; Ruddick, 1989 [1995];

Held, 1993, 2006; Tronto, 1993, 2013; Kittay, 1999). I suggest care-ethics is able to handle the problems of dominance and self-sacrifice as long as care-ethics is interpreted as a relational ethic and in line with a notion of mature care (Gilligan, 1982 [1993]; Pettersen, 2011; 2012). Finally, I look at the broader social, political and global relevance of care-ethics. The normative value of care and the relational ontology of care-ethics allows for broad analyses of a wide range of relational structures. This sets the scene for the discussion of market thinking and moral responsibility in market relations in the following chapters.

### **The Origins and Themes of Care-Ethics**

Care-ethics arose as part of the broader feminist effort to put women's experiences on the agenda. It was with Gilligan's (1982 [1993]) book *In a Different Voice* that the concept of an ethic of care was first introduced. Through her psychological research on moral development, Gilligan found that the girls and women she interviewed typically displayed a different kind of moral understanding to the male participants. The alternative voice Gilligan heard in many of her female participants was characterised by a special attention to care, to relationships developing over time, and to the responsibilities established within relationships. Gilligan saw this focus on care and relationships as falling outside the scope of the standard conception of morality and moral development. The dominant theory of moral development was focused, not on care and relationships, but on the concept of justice and the impartial nature of universal moral laws. Gilligan found that while the male participants in her studies typically responded well to the dominant moral framework of justice, the female participants often seemed evasive, unsure and timid in their responses. As a consequence, a significant portion of the female participants were standardly rated as displaying lower levels of moral development than their male counterparts. However, Gilligan suggested that the typical female response, which seemed evasive and muddled in light of the dominant moral framework, in fact displayed an alternative ethic of care (Gilligan, 1982 [1993], p. 24-32). She argued that this alternative moral viewpoint, an ethic of care, should be recognised as being of equal importance to the dominant ethic of justice. Though Gilligan's empirical findings linked a caring ethic to women, she did point out that the distinction between the two moral frameworks — that of care and that of justice — need not be an essentially gendered difference (Gilligan, 1982 [1993], p. 2).

Care-ethicists have since continued to develop and refine the idea of care as a normative basis for moral theory, emphasising the importance of relationships, the fact of human

dependency, and paying attention to differences in power.<sup>9</sup> Care-ethicists have also articulated a general critique against the dominant moral theories of utilitarianism, deontology and political liberalism (Gilligan, 1982 [1993]; Noddings, 1984 [2003]; Held, 1993; 2006; Kittay, 1998). In these dominant moral theories the emphasis is on universal and abstract principles, impartiality and rationality. Deontology, like Kantian ethics, sees the moral law as absolute and universally binding, necessarily acknowledged by all rational beings. Utilitarianism advocates the moral good on the basis of impartial calculations of aggregate happiness, utility or welfare. Political liberalism, in line with John Rawls's (1971) *Theory of Justice*, focuses on the contractual agreement between equally positioned, rational and disinterested persons. Care-ethics, on the other hand, focuses on the needs and vulnerabilities of particular others and the actual context of relationships, where emotions are included as important to moral decision making.

The care-ethical critique of the dominant moral theories is not only directed at the normative values of these theories, but also at their epistemological and ontological frameworks — that is, their general method for acquiring moral knowledge and their fundamental view of the moral agent. The normative focus of deontology is on duty and the moral law, utilitarianism focuses on overall welfare, and political liberalism on justice and fairness. While the normative values of deontology, utilitarianism and political liberalism are different, their epistemological and ontological foundations are fairly similar (Pettersen, 2011, p. 54-55). The moral epistemology of the dominant moral theories involves relying on only a few universal and abstract principles and attaching great importance to impartiality and rationality. Care-ethicists have found it problematic that the complexities and nuances of actual moral dilemmas are left out, and that emotions and particular attachments are seen as obstacles, not insights, to moral decision making (Noddings, 1984 [2003]; Held, 1993; 2006; Kittay, 1999). In care-ethics, emotions like empathy and attentiveness are considered, alongside reason, to be valuable for moral judgments. The context of actual situations and relationships matter, as this will likely affect what kinds of needs and vulnerabilities arise and the appropriate ways to deal with them. Further, the broader social and political context may shed light on whose needs are typically noticed, and who is generally expected to meet them (Tronto, 1993; 2013; Kittay, 1999). The rational deduction of dominant moral theories from a set of universal principles is replaced in care-ethics by a focus on actual experiences, the relational context, and ongoing dialogue and self-reflection (Pettersen, 2011, p. 55).

---

<sup>9</sup> Some important contributions to care-ethics include Nel Noddings's (1984 [2003]) *Caring*; Sara Ruddick's (1989 [1995]) *Maternal Thinking*; Virginia Held's (1993; 2006) *Feminist Morality* and *The Ethics of Care*; Eva Feder Kittay's (1999) *Love's Labor*; and Joan Tronto's (1993; 2013) *Moral Boundaries* and *Caring Democracy*.

The moral ontology of the dominant moral theories is individualistic. The moral agent is seen first and foremost as an independent and self-sufficient individual, standing on equal terms with others. However, from a care-ethical perspective, this ignores the fundamental importance of human relationships, the unavoidable human fact of dependence and the caring responsibilities that arise within the relationships we are part of. With care-ethics, the perspective shifts to a relational ontology, where the basic starting point is every person's relational context (Gilligan, 1982 [1993]; Pettersen, 2008; 2011; 2012; Kittay, 1999; Held, 1993; 2006). From the outset, all persons are situated in various relationships to others, beginning with that to the birthing mother and continuing through life as we each form new relationships, and maintain, change, repair or end others (Held, 2006, p. 52). Care-ethics sees the relational context as importantly influencing people's lives through the experiences they have, the choices they are able to make, and the expectations they form and are met with. The dichotomy of egoism and altruism seems to follow from the individualistic ontology of the dominant moral theories. As a result, moral problems are often seen as a conflict between the interests of the individual, on the one hand, and the interests of humanity in general on the other (Held, 2006, p. 12). Care-ethics challenges this dichotomy, and focuses instead on relationships being what binds each of us to particular others.

The feminist perspective of care-ethics has led to a critique of the history of Western moral philosophy. Held (1993), for instance, points out the gendered dichotomies that have deeply influenced moral theory. As she writes, reason was traditionally associated with masculinity and placed above feminine emotion. The activities of the public sphere, like culture, politics and production, to which generally only men had access, were set above the private sphere associated with women's natural reproduction (Held, 1993, p. 43-63). Arguing that a gender-neutral ethic should value the experiences of women as equally significant for moral theory as those of men, care-ethicists began examining and evaluating the activities traditionally assigned to women, and the moral dilemmas they faced. Thus, concerns associated with the private sphere, such as caring responsibilities in close relationships and child rearing, were brought to the forefront. Questions also arose concerning inequalities in dependence and vulnerabilities, power relations, and the dangers of dominance (Noddings, 1984 [2003]; Ruddick, 1989 [1995]; Held 1993; 2006; Kittay, 1999). Care-ethicists have found that the activities traditionally assigned to women were often deeply infused by moral dilemmas and moral reasoning. Furthermore, these insights are seen as truly important to moral theory, relevant far beyond the initial focus of close relationships in the private sphere. Care-ethics discards the dichotomous thinking of the philosophical tradition, which has seen reason as opposed to emotion, the public sphere versus the private sphere, culture versus nature, egoism versus

altruism. Instead, it is suggested that we should investigate the area in between these extremes.

### **Defining Care**

At the core of care-ethics lies the moral value of care, but what does care, in this context, really mean? As there is no clear consensus among care-ethicists, I will bring together elements from a few different theorists as the care-ethical position of this thesis. I want a definition that sees care as both a value and a practice, so as to capture the moral significance of care and allow for different activities of care (Ruddick, 1989 [1995]; Held, 2006). In determining the normative value of care, I will lean on Tove Pettersen's (2008; 2011) suggestion of seeing care as a balance between active non-maleficence and restricted beneficence. I further want a framework for analysing the broader social, political and economic context of care, and will later use this as the basis for the discussion of moral responsibility in market relations. In this regard, I will look to Kittay (1999) and Tronto (1993; 2013), who both discuss the structural consequences of differences in power and dependencies, and the distribution of caring responsibilities. I will also look into Daniel Engster's notion of care. He proposes a specific care-based business approach, which will be discussed in the two last chapters.

In care-ethics the need for care is seen as basic to all humans, and necessary for human survival, development and flourishing. The appropriate activities of caring will vary according to the specific situation, the type of relationship and the particular needs that require attention. Think of the range of activities involved in feeding an infant, teaching a class how to read or write, dressing a wound, or helping an elderly person get up in the morning. The care relevant to care-ethics must encompass all these activities as potentially caring. However, the importance of care for human development and survival will be nothing more than a descriptive fact unless care is also given moral significance. There must be a way of evaluating care as good or bad with reference to a normative standard or value. As Held comments: "[...] we need an *ethics* of care, not just care itself" (2006, p. 11, her emphasis). So, the care relevant to care-ethics must also capture the normative value of care. I suggest therefore that Held (2006) is right to describe care as both a practice and a value, meaning that care involves the practical activities of caring, but also a moral value or ideal of care that we should strive to meet.

When Held (2006) defines care partly as a practice, she is building on Ruddick's (1989 [1995]) initial description of the care involved in mothering as formed by the maternal practice. According to Ruddick, the maternal practice is as other practices; it is defined by certain aims and sets certain requirements for the practitioner. Ruddick writes that just as "re-

spect for experiment is imposed on scientists and racing past the finish line is imposed on jockeys”, the mother is required to preserve the life of the child, foster its growth and raise it to be an acceptable person in light of its social group (1989 [1995], p. 17). Defining care as partly a practice stands in contrast to Noddings’s (1984 [2003]) initial description of care as an attitude and ideal.<sup>10</sup> Here, Noddings describes caring as meeting and receiving the other, and tuning into the other’s projects and ends. She differentiates between natural and ethical care, where the first arises naturally as with the mother’s overwhelming impulse to respond to her child, while ethical care involves the choice to respond to the other and to sustain the relation through an ideal of care (Noddings, 1984 [2003], p. 30-33, 80-83). Noddings’s account was criticised for laying too much weight on care as a personal ideal, and also for focusing too much on one-to-one relationships. The concern was that if care is seen as a private disposition and limited to personal relationships, it would lead to a romantic and sentimental notion of care that would fail to take into account the work involved in caring and the relevance of care to a broader set of relationships (Tronto, 1993, p. 103, 118; Held, 2006, p. 16).

Caring, then, can take the form of many different activities, and has relevance beyond personal relationships. Yet, as Held writes, the practice of care is more than “a series of individual actions”, for it also includes normative standards for evaluating care (2006, p. 36, 38). There are certain values, requirements and standards that are common to all caring activities and mark them as caring. Held suggests that caring practices are defined by attentiveness, sensitivity, and responding to needs — from basic survival needs to more subtle cultural, emotional and psychological needs (Held, 2006, p. 36-43). Tronto initially listed attentiveness, responsibility, competence and responsiveness as the values or ideals of care, later adding plurality, communication, trust, respect and solidarity (1993, p. 127-136; 2013, p. 34-35). Engster similarly describes the ideals of care as comprising attentiveness, responsiveness and respect (2007, p. 30). While all these values seem relevant to care in different ways, it seems unsatisfactory to ground the practice of care in a long list of positive-sounding ideals. Why, for instance, are these particular values chosen above others? I believe a deeper foundation for the normative value of care is found in Pettersen’s (2008; 2011) reasoning.

Pettersen (2008; 2011) suggests that the normative value of care resembles the principles of non-maleficence and beneficence. She refers to Gilligan (1982 [1993]), who initially describes the ethic of care as a commitment to non-violence, to not hurting others, and as a commitment to good, to wellbeing in relationships, and to human flourishing. Building on Gilligan’s work, Pettersen interprets the normative basis of care as involving first the princi-

---

<sup>10</sup> See also Michael Slote’s (2010) *Moral Sentimentalism* for an alternative account of care-ethics as a form virtue ethic.



ple of non-maleficence where it is extended to include active intervention, and second the principle of beneficence where it is restricted to prevent systematic self-sacrifice. Pettersen argues that simply refraining from actively harming, as the principle of non-maleficence implies, is not always enough, as care-ethics entails an active involvement in others' wellbeing and a commitment to maintaining good relationships. On the other hand, the principle of beneficence may in its extreme form lead to self-sacrifice, whereas Gilligan initially pointed to the importance of caring for oneself as well as others (Pettersen, 2008, p. 33-34, 40-43; 2011, p. 54).

I prefer Pettersen's proposal of grounding care-ethics in the principles of extended non-maleficence and restricted beneficence, because this reflects both the core focus and the key dilemmas of care-ethics. Caring implies doing good, actively helping particular others and being attentive to their needs; it also implies avoiding damage, hurt and pain. This resonates with the principles of beneficence and non-maleficence. On the other hand, the dilemmas of caring involve balancing care for others with care for oneself, the care for one person with care for others, and awareness of the potential damage of neglect, ignorance and lack of involvement. The principles of extended non-maleficence and restricted beneficence acknowledge the limits to our care resources and the importance of active involvement.

### **The Scope of Care**

While caring activities may take very different forms, not all activities are caring. The question is where to draw the line. Tronto (1993) gives perhaps the broadest definition of care as the "activity that includes everything we do to maintain, continue, and repair 'our world' so that we can live in it as well as possible" — as Tronto explains, 'our world' includes our bodies, our selves and the environment. She follows up by pointing out that this extends to caring for objects (1993, p. 103). Held comments that Tronto's definition of care could include many forms of economic activity from retail sales to house construction and professional cleaning, and she therefore sees it as "almost surely too broad" (Held, 2006, p. 31-32). Held touches on an important point: If the definition of care is stretched too wide, the meaning of care is diluted. If everything we do is caring, then there seems to be nothing very special about care. Tronto's examples of caring activities range from providing food for starving children to tuning a piano (1993, p. 106-107). She readily agrees that her definition is broad, but she also suggests that some activities are not generally caring, like playing, pursuing pleasure, creative activity, production and destruction (1993, p. 104). On the other hand, Held includes very different activities in her examples of caring practices, for instance, organising global food aid

and hanging up curtains to decorate a room (2006, p. 39). In light of her criticism of Tronto, it is surprising that Held mentions hanging up curtains as a potentially caring activity.

An important difference between Tronto's definition and other care-ethicists' descriptions of care, is that Tronto includes caring for objects and ideas. When Held mentions hanging up curtains as caring, this is meant as an example of an attentive and sensitive response to someone's more subtle cultural need for a cosy home (2006, p. 39). Imagine someone helping a frail elderly person who is unable do this herself. On the other hand, Tronto's example of the tuned piano is about caring for the piano itself. She writes of the "object of care" responding to the care it receives, as the piano sounding better after being tuned (1993, p. 107). However, the piano can only "respond" to being tuned in the sense of a forced mechanical change. There is no dialogue, communication or live response in a relation to an object. It is of course possible to care about an object in the sense of repairing a bike or cherishing a book, and to care about an idea, like the political idea of democracy. Still, I agree with Engster that the moral dimension of care demands interaction between human, or at least living, beings (Engster, 2007, p. 21). Engster gives no satisfactory answer as to why this is so, but I suggest this is implied through the relational ontology of care-ethics, where the focus is on care *in* relationships. This implies some level of communication, reciprocity and commitment. I see this as demanding a living relationship in some sense, and so excluding care for objects or ideas from the ethics of care.<sup>11</sup>

Engster (2007) limits caring activities to those that are *directly* aimed at meeting a person's biological and developmental needs. To care, on his account, is to help meet the vital biological needs of individuals, foster their basic capabilities and alleviate unnecessary pain or suffering. According to Engster, a person's vital biological needs include access to food, clothing and shelter. Next, fostering basic capabilities means helping to maintain and develop a person's innate capacities for movement, emotion, affiliation, reason, speech, and so on, and in most societies today, literacy and numeracy (Engster, 2007, p. 26-31). In sum, Engster's definition includes a minimum of abilities that enable persons to function in society and care for themselves and others. When considering whether or not an activity is caring, Engster poses the test question: Could the activity be successfully completed without meeting the direct aims of caring? Housebuilding and economic production are generally not caring activities, on Engster's view, as these are usually not directly aimed at meeting the biological or developmental needs of persons. Rather, the direct aim of housebuilding is the transformation

---

<sup>11</sup> This is not an easy question. Does this limit the care of care-ethics to relationships between living beings, and so exclude care for future or past generations? What about care for non-human beings, like other mammals? What about care for insects and plants, who presumably cannot communicate, reciprocate or commit to relationships with us, yet are important to our natural environment?

of building materials into housing, and the direct aims of economic production are more generally the manufacturing, transport, shipping or selling of goods. Still, Engster suggests that housebuilding, for example, *could* be caring if it were done for the explicit purpose of providing shelter for the homeless. In this case, the aim of the housebuilding would not be successfully completed until it housed the homeless, which would involve meeting their biological need for shelter (Engster, 2007, p. 29, 32-33, 121-122).

I see a potential problem with Engster's account in that the direct and indirect aims of an activity are not always easily distinguishable. Engster suggests that housebuilding can be caring if the activity is part of a larger caring aim, as providing shelter for homeless, though generally it is not caring as the usual aim is transforming physical material and making money. Engster must mean that the *direct* aim of the housebuilding activity is significantly different in the two cases — shelter for homeless or sale on the market. Yet, the building will likely house *somebody* either way, thus meeting some person's biological need for shelter. Engster clarifies that it is not the activity as such, but the aims and virtues of the activity that make it caring. Nor has the distinction to do with whether the work is paid or not (Engster, 2007, p. 33, 121-122). So, Engster is not simply arguing that housebuilding is caring when it is a volunteered non-profit activity, while generally not caring when it is a for-profit business activity. The need for shelter is obviously very acute for the homeless, but Engster's reason for seeing housebuilding as caring in this example is the *direct* aim of the activity, not the urgency of the need.<sup>12</sup> It may be true that housebuilding generally involves creating human shelter, and as such it may perhaps be a more caring than other building projects. However, if the purpose of the finished building is seen as being part of the direct aim of the building activity, then it seems that all building activity directed at the purpose of housing would be caring. Yet, Engster's stance is that housebuilding is *not* generally caring. As I see it, Engster's example confuses the questions of who the building is meant to house and how housing is distributed. All people have a biological need for shelter. The homeless, however, are not able to gain access to housing through the usual means of buying or renting through the market. Providing housing for the homeless involves an economic cost however it is organised, whether it is a result of social volunteerism, governmental subsidies, or private initiative. These are concerns of whose needs are prioritised and how basic resources are distributed.

This discussion shows how difficult it is to make a sharp distinction between caring activities and other activities. It also shows how care-ethical concerns are closely tied to the prioritisation of needs, fairness and the economic distribution of the basic resources necessary

---

<sup>12</sup> Engster does also discuss how to distribute care resources in accordance with the urgency of the need, among other considerations, and I will come back to these principles of prioritisation towards the end of the thesis (2007, p. 56-58).

for care. Nevertheless, we can draw out some clear characteristics of caring activities. Caring activities are part of a care-ethical practice, which I suggest is grounded on what Pettersen (2008; 2011) sees as the normative core values of care: extended non-maleficence and restricted beneficence. Further, care is relational which I interpret as excluding care for objects or ideas from the care-ethical notion of care.

### **Dangers of Dominance**

Philosophers Uma Narayan (1995) and Anita Silvers (1998) have each pointed to the dangers of paternalistic care, where those who have the role of carer have authority and power to control the relation, leaving those cared for vulnerable to domination and exploitation. Narayan sees the traditions of Western colonialism as infused by a discourse of care. She argues that colonialism was generally morally justified as being for the good of the colonised — it was the “white man’s burden” to civilise and Christianise the dark corners of the world (Narayan, 1995, p. 134-135). Silvers (1998) argues that persons with disabilities who are dependent on the care of others may find themselves stuck in dominant or abusive relationships. Because many disabled persons crucially need the care of others, ending an abusive or dominant relationship with their carers may not be an option. On the other hand, dominance is not only a potential problem for the person cared for. Philosopher Sara L. Hoagland (1992) argues that altruistic care involves self-denial on the part of the carer, who is constantly attending to the other’s needs before one’s own. In this type of caring relationship it is the cared-for who has power over the carer, and it is the carer who is vulnerable to manipulation and dominance. In short, care-ethics has been criticised for setting too little weight on equality and individual autonomy, and too much weight on vulnerability and the meeting of needs. The argument is that those providing care may be mistaken in what they perceive as needs, or wrong in their approach to meeting them. They may be abusive or dominating. Again, those in a position to claim others’ care may be manipulative or inconsiderate.

Many caring relationships are asymmetrical in terms of differences in power, authority and dependency. This fact is recognised within care-ethics. The relationship between mother and child, for instance, has served as the prime example of a caring relationship where the parties have very unequal standing (Noddings, 1984 [2003]; Ruddick, 1989 [1995]; Held, 1993; 2006). Although the mother is the one who has superior physical power and authority in the relation, this is of little use when the aim is to empower the child and encourage its development into a responsible person (Held, 1993, p. 209). As Held writes: “We are accustomed to thinking of power as something that can be wielded by one person over another, a means

by which one person can bend another to his will. [... But the mother] neither wants to 'wield' power nor to defend herself against the power 'wielded' by the child" (1993, p. 209).

Kittay (1999) has focused especially on asymmetrical caring relationships, bringing with her the perspective of caring for a severely disabled child. She concentrates specifically on the caring relationship between a person crucially dependent on the care of another in order to function or survive, who she calls the "charge," and the person taking care of the charge, the "dependency worker" (1999, p. 30-31). Kittay points out that both parties in an asymmetrical relationship are in a position to exploit the other's vulnerability, and to be manipulative, dominant or abusive towards the other. Therefore, she sees both parties as having to trust each other and as bearing equal responsibility for not letting the relationship become abusive (Kittay, 1999, p. 33-35). The point is dominance and exploitation are not necessary consequences of asymmetrical relationships. From a care-ethical point of view, there will always be relationships that are characterised by differences in dependencies, needs and abilities. Being aware of asymmetries in relationships will likely provide better tools for addressing problems of dominance than simply assuming that every person is independent, equally positioned to others and that every relationship is voluntarily chosen.

### **Problems of Altruistic Care**

Part of Hoagland's (1992), and also Silvers's (1998), criticism of care-ethics is that it is a continuation of traditional gender stereotypes. They see the focus on care as a focus on what have been traditional feminine virtues: self-sacrifice and altruistic care-giving. Hoagland sees care-ethics as overly focused on the person cared for, demanding in return only minimal reciprocity in terms of an acknowledgment of the care given. As she writes: "this [reciprocity] merely amounts to acknowledging the caring — a baby wiggling in delight as she is bathed, for example" (Hoagland, 1992, s. 83). This comment is directed at Noddings (1984 [2003]), who initially saw an ethic of care as a feminine ethic, informed by attentiveness and a willingness to receive the other. Noddings describes care as symbolised by the approach of the mother with focus on the particulars of actual relationships — a significant contrast to the traditional ethics of the father based on the logics of abstract principles (Noddings, 1984 [2003], p. 36-37). Other care-ethicists have since argued that care-ethics is not a *feminine*, but a *feminist* ethic — concerned with what has traditionally been women's perspectives, though relevant for both sexes (Held, 2006, p. 20; Ruddick, 1989 [1995], p. 41).

Yet, attentiveness towards the needs of others is an important aspect of care-ethics. Kittay (1999) describes how the very nature of care in asymmetrical relationships requires the

carer to have a transparent self, where the needs of the other are observed and felt almost as keenly as her own. She argues that the more dependent and vulnerable the person cared for is, the more the carer is required to prioritise the dependent's needs before her own. An infant waking in the night, from hunger or fear, has a justified claim on the carer's attention even though the carer herself may be exhausted (Kittay, 1999, p. 51-52). Kittay recognises how the asymmetrical relationship between the carer and the dependent seems "to hover between servitude on the one hand, and paternalism on the other" (1999, p. 37). She describes the carer as having a transparent self, which makes her vulnerable as her self-respect is in part tied to how well she cares. On the other hand, the carer stands in an obvious position of power in relation to the dependent. Part of the problem, as Kittay sees it, is that the carer is relatively powerless with respect to others outside the dependency relation, while potentially too powerful in relation to the dependent. Addressing the social position of the carer will likely remedy some of the risks of both paternalism and servitude. Kittay writes: "One who has her interests taken care of in an appropriate and just manner will be less, not more, likely to live her life through the charge, and less, not more, likely to find other ways to discharge ambition and power than through paternalistic behaviour" (1999, p. 37).

Pettersen (2012) describes the archetype of altruistic care as a selfless act, provided unconditionally and spontaneously to particular persons for the sake of their best interests. She goes on to identify several problems with this understanding of care. Altruistic care, according to Pettersen, involves consistently setting the other's interests before one's own, which implies that one person's interests are given priority over the other's. She suggests that, at least in principle, the interests of each party should count equally. Pettersen further argues that altruistic care construes the act of care as a spontaneous gift, where no questions are raised concerning why the needs have arisen, how the responsibility for meeting the needs is distributed or how to prioritise between those who need care. Lastly, because it is a one-sided understanding of care, it may easily turn into paternalistic or dominant form of care directed at a passive recipient, or alternatively allowing the cared-for to exploit and deplete the carer's caring resources (Pettersen, 2012, p. 368-376).

Pettersen (2012) concludes that an altruistic understanding of care is grounded in an individualistic ontology, and suggests we look to the relational ontology of care-ethics for a better understanding of care. She points out that Gilligan initially saw moral maturity as involving an ability to balance one's own and others' interests (Pettersen, 2012, p. 377; Gilligan, 1982 [1993], p. 54, 73-74, 82). Pettersen sees mature care like an Aristotelean mean between excess and deficit, being the intermediate position between the extremes of selfishness and self-sacrifice. She sees reciprocity, dialogue, a principle of equal worth and an emphasis

on the relational context as important to mature care (Pettersen, 2012, p. 376-378). Pettersen points out that although an equal exchange of care work is not possible in asymmetrical relationships, reciprocity is still possible in terms of mutual recognition of each party's equal worth and in that both parties contribute in some way towards the aim of the relationship. She acknowledges that the nature of asymmetrical relationships is to focus on the person cared for — the mother is concerned with her child's flourishing and the nurse is concerned with her patient's health — yet usually both parties must contribute to the aim of the relationship, for instance, by exchanging information, knowledge or emotions (Pettersen, 2012, p. 381-382).

Sometimes, and in certain types of relationships, one must attend to the other's needs and set aside one's own. In this light, there is an element of altruism and self-sacrifice in caring, which Hoagland warns against. Still, care-ethics does not encourage a systematic neglect of the carer, on the contrary it is emphasised that the needs of the carer must also be met. Even Noddings, to whom Hoagland directed her criticism, sees the importance of being attentive to one's own needs in order to care for others (Noddings, 1984 [2003], p. 105). The relational focus of care-ethics sets limits to self-sacrificing care. As Pettersen points out, the carer cannot care boundlessly for one person only, as she is likely to have others to care for too and must also care for herself (2012, p. 379). With the relational ontology, the focus shifts from the exclusive perspective of either of the persons in the relationship, to a focus on their shared aims through the relationship and their shared responsibility for making it a caring relationship. With an individual ontology, on the other hand, the perspective is either that of the caregiver who altruistically, dominantly or paternalistically *gives* care to a passive recipient, or that of the person cared for who is able to dictate the conditions of the relation and exploit the carer's resources. In this light, "caring" relations are no more than a struggle for power and dominance, or alternatively, involve a demand for one of the party's boundless benevolence. What is missed here is that care is not merely something one person gives to, or demands of, another — end of story. Rather, care is an ongoing relational activity requiring cooperation, dialogue and shared aims. Nor should caring relationships be thought of as single, closed entities. Being aware of the wider relational context of particular caring relationships opens up questions about how caring responsibilities are distributed in a social and political framework.

### **The Social and Political Relevance of Care-Ethics**

In her book *Caring*, Noddings (1984 [2003]) makes the distinction between "caring about" and "caring for". Caring about starving children in a distant country might simply involve sending a small amount of money, not even knowing if the money will be spent on food or

lost to corruption — it is “too easy” (Noddings, 1984 [2003], p. 112). As she argues, we might care about things, ideas, persons or causes in a general way, while caring for another entails commitment and active involvement in that person. Noddings’s point is to avoid the hollow notion of universal care, for, as she argues, it is not possible to genuinely care for everyone (1984 [2003], p. 18, 21). Held later adds to the discussion that the distinction between “caring about” and “caring for” is sometimes blurred: Really caring about world hunger will usually lead us to do something about it, and then a connection is established between ourselves and those we are trying to help (2006, p. 30). Tronto (1993; 2013) explicitly includes “caring about” in her description of caring as a process consisting of several stages. On Tronto’s account, “caring about” is the first stage of care, involving the recognition of a need for care, which is a precondition for the next stage of “taking care of” the need, which again is followed by the direct act of “care-giving” and the response to the care in “care-receiving” (Tronto, 1993, p. 106-108).

On closer inspection, Tronto’s first stage of “caring about” is not that different from Noddings’s (1984 [2003]) description of the person caring tuning into the other’s point of view. On both their descriptions, attentiveness is required: Noddings describes caring as an engrossment in the other and as receiving the other’s point of view, and Tronto writes that caring about involves “a suspension of one’s self-interest, and a capacity genuinely to look from the perspective of the one in need” (Noddings, 1984 [2003], p. 17, 30-33; Tronto, 2013, p. 34). Neither think giving money involves direct caring, but see it rather as a way of enabling care (Noddings, 1984 [2003], p. 112; Tronto, 1993, p. 107, 110). One of the main differences in their descriptions, as I see it, is their views on the scope of the caring process. While Noddings argues that “caring about” is not at all the same as “caring for”, Tronto includes elements of both notions in her description of care as a process. Tronto would surely agree that simply “caring about” is not enough to ensure proper care, for on her view it must be followed up through the next phases of care. On Tronto’s account, good care is marked by the integrity of the caring process, i.e. that the different phases and moral qualities of the caring process come together as a whole (1993, p. 136). Tronto, then, provides a wider analysis of caring, opening for the possibility of different persons and groups being involved at different stages of the process. Broadening the perspective of care-ethics allows us to see care in a wider social and political context. Questions arise concerning the distribution of care work: Who cares for who? Who cares for those who have caring responsibilities for others? What are the structural causes of needs and dependencies?

Tronto argues, for instance, that there are systematic differences in terms of power and status associated with the different stages of caring, and that in the low-status stages care



work is typically performed by those of low social standing in society. She argues that the relatively privileged in society will often be in a position to ignore basic caring responsibilities as they are not involved in the direct care work. While someone might say they pay their au pair or cleaner the “going rate”, they do not question whether the going rate is sufficient for the au pair or cleaner to be able to take care of her own and her family’s needs (Tronto, 1993, p. 105, 121-124). This is what Tronto calls privileged irresponsibility — where some are in a position to ignore certain types of responsibilities and overlook their own privilege in being excused from the discussion (1993, p. 120-122; 2013, p. 103-106).

Kittay also provides important analyses of the broader social and political context of care and caring relationships, crucially paying attention to the question of who is to care for the carer (1999, p. 65). She contrasts the situation of the carer and her dependent “charge”, to the ideals of equality, independence and voluntariness that are the pillars of political liberalism. Kittay argues, for instance, that because the carer must direct much of her time and resources to her care work, she is in danger of falling behind in the competition for goods in the market and is often dependent on a third party to provide for her and her charge (1999, p. 39). Kittay argues that everyone is entitled to a relationship in which they can be adequately cared for, but they are also entitled to social support so that they can take on caring responsibilities without jeopardising their own well-being (Kittay, 1999, p. 66). Kittay raises questions concerning the dependencies, vulnerabilities and responsibilities both within caring relationships and in the wider context of the carer’s social position outside the caring relationship.

Political scientist Fiona Robinson (1999) argues for the global relevance of care-ethics. She asks how care-ethics, being a morality of closeness rather than of distance, is applicable to the context of global relations: “Surely it is precisely that distance — the physical/spacial, cultural, and psychological distance between moral agents — that we must address and accommodate in thinking about international or *global* ethics?” (1999, p. 44-45, her emphasis). On the one hand, Robinson argues that distances seem to shrink in the contemporary globalised world, due to communication, transport, the internet and people being more equally vulnerable to ecological threats. She thinks it a mistake, however, to overestimate how a globalised world leads to increased solidarity and unity, for the increased interrelatedness takes place within the context of profound differences (Robinson, 1999, p. 45-46, 99-100). She mentions, for instance, how a globalised economy brings with it greater interdependence, but also “... increased competition, deepening hierarchies and patterns of exclusion” (1999, p. 99). Robinson suggests an ethic of care is needed in order to understand how social, political and economic relations are extending and becoming more intertwined, but

also in order to recognise these as relations of power, and be aware of the potential for exploitation and dominance (Robinson, 1999, p. 101, 110, 128, 132).

Care-ethics, then, has moved beyond the domain of the personal and private, and now includes important analyses of many social and political issues. While care-ethics focuses on care in relationships, this extends to a wide range of relationships — from personal to professional, national to international, between two persons or between groups of people, between individuals and institutions. The relational ontology of care-ethics recognises that each person or group is again part of a larger relational structure. This implies interdependence, not independence; the importance of particular attachment, not impartiality and separation; the possibility of cooperation, not competition. Together the relational ontology of care-ethics and the normative value of care can open our eyes to the importance of care and relationships. Further, this perspective shows how care concerns are affected by the broader context of social, political and economic structures.

## CHAPTER THREE

### A CARE-ETHICAL CRITIQUE OF MARKET THINKING

From the perspective of care-ethics, there are several problems with the underlying assumptions and principles of mainstream economic theory. It is standardly assumed that economic agents are rational and largely self-interested, interacting through mutually beneficial market transactions with the aim of maximising profits or individual utility. This general economic outlook of market thinking seems fundamentally opposed to the perspective of care-ethics, where the focus is on care in relationships, dependencies, care responsibilities, and the balancing of one's own interests with those of others.

In this chapter I argue that market thinking involves a dichotomy between self-interest and altruism, seeing these as two separate and opposing human motives. The implicit assumption seems to be that, while self-interest is relevant to economic decisions, it is clearly separate from ethics where the appropriate motive is benevolence. With the standard assumption of self-interest in economics, it is difficult to explain where the motivation to care for others comes from. Nor is it easy to interpret how caring responsibilities occur when each person is seen as independent and free — neither dependent on anyone in particular, nor having anyone in particular to care for. I argue that economic decisions are often not clearly separable from concerns relating to care. Having caring responsibilities, or being dependent on care, can easily lead to unequal bargaining positions in the market that over time form unjust structures (Kittay, 1999; Tronto, 2013; Young, 2011). However, these concerns are not easily addressed, or even noticed, within the framework of market thinking.

To be fair, mainstream economic theory is not a moral theory. The standard assumptions of rationality, self-interest and perfectly competitive markets are meant as models or tools for economic analysis, not as full descriptions of human agency or society. Economics is an independent field of study, interested in certain types of questions and equipped with certain tools for answering them. Economics is also generally thought a mainly descriptive discipline, concerned with factual analysis and predictions of economic events. Indeed, at first glance it is difficult to see how any ethical viewpoint, let alone care-ethical considerations, might fit in with the image of economics as only having to do with rational calculations and individual gain. Yet, I argue that market thinking has influence beyond what might be thought

a pure economic domain. Market thinking sets a standard, a norm, for human interaction and the organisation of our society. As such, it is not value-neutral, but a normative framework for thinking about persons and society. Nor are economic activities always easily separable from other areas of human life. Economic events are the result of human decisions and often have real impact on people's everyday lives — including their opportunities to care. I suggest therefore that economics is relevant to care-ethics, and that care-ethics can help us re-think the purpose of economic life and re-interpret the consequences of our economic structures.

### **Self-Interest and Rationality**

As we saw in chapter one, Smith made the point that it is self-interest, not benevolence, that is the driving motivation of economic decision-making. Indeed, it is the self-interested decisions of the many individuals in the market that together tend to promote those businesses that are most efficient and therefore benefit society as a whole (Smith, 1776 [2004], p. 12, 300). Thus, the market mechanisms serve as an invisible hand, implicitly promoting the most efficient businesses through the sum of the decisions of many self-interested individuals. On Mill's description, the economic man is motivated by the desire for wealth, and is able to rationally consider the most efficient means towards this end (1844 [1992], p. 137). The legacy from Smith and Mill is still present in contemporary economic theory. Economic agents are standardly assumed to be rational and self-interested, meaning that corporations seek to maximise profits and individuals seek to maximise their preferences (Bernheim and Whinston, 2008, p. 7-8; Harberger, 2008; Hausman, 2013, 1.1). Smith and Mill captured what seems to be an essential truth about economic interaction, namely that self-interest is the backbone of trade. The butcher, the brewer and the baker, to whom Smith referred, each create successful businesses by selling, not giving away, their goods (1776 [2004], p. 12). For trade to work, the various parties must focus on their own interests. When they do, the compound effect on a large scale is the market mechanisms, described by Smith as the invisible hand (1776 [2004], p. 300).

When Smith and Mill emphasised self-interest as the prevalent motive of economic decision-making, did they mean this as a factual statement or were they suggesting that self-interest *ought* be the prevalent motive? As mentioned in chapter one, while self-interest is a very common assumption in contemporary economics, it is not a necessary requirement that follows from the other standard assumption of rationality (Hausman and McPherson, 1996 [2006], p. 46). If rationality is interpreted as the agent's ability to consistently rank the alternatives she faces with reference to a set of individual preferences, then altruism is not in prin-

principle excluded (Hausman, 2013, 1.1). Precisely what each person's preferences consist of is left outside the discussion. A person's preferences are supposed to include *whatever* that person cares about. In practice, however, self-interest is a common additional assumption that simplifies economic analysis. Trade between equally rational and self-interested individuals will come about only when the result of the transaction is judged by each party as beneficial to themselves. This is summed up by the economic principle of mutually beneficial trade (Bernheim and Whinston, 2008, p. 111). As equally rational and self-interested, the trading parties will each try to ensure the best deal for themselves, and only trade for goods they themselves actually want. The impression is that rationality and self-interest are prevalent in economic decisions, and furthermore that they ought to be.

Philosopher Daniel M. Hausman and economist Michael S. McPherson (1996 [2006]) point out that the standard economic assumption of rationality is both expressive and normative. Saying, for instance, that it is rational to have an insurance policy is at the same time expressing approval and suggesting that people generally ought to be insured (Hausman and McPherson, 1996 [2006], p. 43). The same point can be made about the assumption of self-interest. In stating that self-interest *is* prevalent in economic decisions, it is implied that self-interest *ought* to be prevalent. If trade is the result of an exchange between equally self-interested persons, and further, if trade then tends to promote the most efficient businesses, and by implication the most efficient economy, this suggests that self-interest is *required* for trade or for ensuring the best economic outcomes.

However, as mentioned in chapter one, research in the field of behavioural economics has shown that a substantial portion of people are not motivated by self-interest in their economic decisions, but seem to make decisions based on ideas of fairness and reciprocity (Fehr and Fischbacher, 2002; Rabin, 2002). These findings suggest that in actual situations, self-interest is not the main motive for a significant number of people. On the other hand, it also shows that a substantial portion of the participants do in fact make decisions in line with the assumption of self-interest (Fehr and Fischbacher, 2002, p. C4; Rabin, 2002, p. 665). Apparently, then, there is a plurality of motives in actual economic decision-making. Yet, these results neither confirm nor disconfirm whether self-interest ought to be the main motive of economic decision-making.

As a thought experiment, how might one make sense of care in relationships on the basis of the economic model of rational and self-interested individuals? If we assume that a person's preferences are exclusively rational and self-interested, caring seems to make no sense unless it is seen as a mutually beneficial exchange of services or as an insurance for the coverage of future care needs. If caring for others is motivated by the person's self-interest

alone, it must mean that the carer expects something back. In line with the economic principle of mutually beneficial trade, the carer will expect something in return for her care that, in her eyes at least, is as valuable as her investment in this care. Some caring relationships may involve a fairly equal exchange of care, as for instance, between friends or partners. Yet, many caring relationships are asymmetrical in their nature, like the relationship between the mother and her infant child, the doctor and the patient, or the caring relationship to a severely disabled person. Here, attention to one party will demand much of the relationship's focus, or the degree of dependence of one party may exclude any possibility of an equal exchange.

If caring relationships are nothing more than a mutually beneficial exchange of services, then presumably parents care for their children only in order to ensure care for themselves in their old age. What motivation would parents have to care for a child that is severely disabled? The disabled child will never be able to return the parents' care. In any case, no child is ever in a position to freely accept or decline a contract demanding an equal exchange of care services with her parents. At least not until the child has reached a certain level of maturity, by which time she will necessarily already have relied extensively on the parents' care, or at least someone's care. Perhaps it could be argued that the child implicitly agreed to the contract simply by being born and being looked after. Furthermore, if she benefitted from her parent's care, does she not owe them some form of repayment? I would argue that the parents may *hope* that their child will return their care and even their love, but surely, from a self-interested perspective, this is a risky endeavour. Why, if we are motivated by self-interest alone, should we invest so much time, money, energy and emotion in a relationship that may never yield returns that match the investment? It would be more rational to spend that time and energy working or pursuing other interests, and save money as a means to pay for whatever care services we need when elderly and frail. The self-interested economic agent seems to have no incentive to care for others without adequate "payment". The motivation to care is, here, reduced to personal material gain and the caring relation itself to a disinterested exchange of services.

If we instead discard the assumption of complete self-interest, and open for the possibility of other-regard as part of the individual's preferences, caring for others makes more sense. For example, having children to care for, a parent may prefer to work less in order to spend more time at home. The parent may, then, choose a different work-leisure balance than a young, single person without children. On the other hand, the parent may choose to work more, rather than stay at home, in order to earn enough money to adequately provide for the children. Meanwhile, the young, childless person can live on less, and may choose to have more leisure time. This model can then include care in the individual's preferences, which can

explain why some people choose to work more, or less, in order to care for others. However, this gives the impression that choosing to care is a simple preference, as some people prefer chocolate to bananas.<sup>13</sup> An important fact, which is not immediately apparent here, is that the “preference” for care is a consequence of having caring responsibilities. Nor are caring responsibilities always freely chosen, but may arise within the relationships the person is already involved in.

From a care-ethical point of view, care should neither be reduced to an individual preference for personal gain, nor to an individual preference for benevolence. If the carer is assumed to be completely self-interested, it makes no sense to talk of her caring for any reason other than for her own personal gain. To be self-interested means, not simply that one follows one’s individual preferences, but that these preferences are for one’s own good (Hausman and McPherson, 1996 [2006], p. 79-80). Thus, a self-interested person does not truly care about anyone, except as a means for achieving personal gain. If care is interpreted as an individual preference where this is not completely self-interested, caring becomes an individual preference for benevolence. While there is an element of benevolence in caring, I argued in chapter two that care is fundamentally relational. As Pettersen (2012) points out, in principle, the interests and needs of the carer and the cared-for have equal weight (2012, p. 376-382). So, in the long run and through the various relationships we are part of, a balance should be sought between the carer’s own needs and the needs of others. The persons in a caring relation are not competing for each other’s benevolence, nor should a commitment to care be thought simply as some people’s individual choice to be altruistic (Held, 2006, p. 34; Tronto, 2013, p. 32). The point is, if care is interpreted simply as an individual preference, care is reduced to the individual’s personal taste for doing good. The relational quality of care is lost, along with the weight of care as a form of responsibility, which may demand more than one prefers. As the feminist economist Julie A. Nelson writes: “‘The economic man’, in contrast to real humans, neither ever needs care nor has any responsibility or desire to give it” (2011, 39).

---

<sup>13</sup> Fehr and Fischbacher end their paper thus: “People differ not only in their tastes for chocolate and bananas but also along a more fundamental dimension. They differ in regard to their inclination to behave in a selfish or reciprocal manner, and this does have impact on economic consequences” (2002, p. C30).

## Independence versus Caring Responsibilities

The economic principle of mutually beneficial transactions implies that each party is free to independently accept or decline an exchange of goods or services. Coupled with the assumption of the economic agent as rational, the principle further implies that each person knows their own best. This is sometimes referred to as the principle of individual sovereignty (Bernheim and Whinston, 2008, p. 9). The image, then, is of individuals as free to pursue their own interests, independent of all ties except those freely chosen and those beneficial to one's self. Thus, individuals seem to stand in relation to others in positions of equal bargaining power. What is lost in this picture is the fact that not every person is in the ideal circumstances of an independent adult or head of household (Held, 2006, p. 81). Care-ethics makes a point of human dependency. Every person is dependent on others to various degrees and at various stages of their lives. Even the ability to make independent decisions is not simply given, but learnt over time and within relationships to others (Held, 1993, p. 189-190; Tronto, 2013, p. 125). Assuming that every person knows their own best, for instance, means overlooking the obvious fact that small children, some mentally disabled adults or demented elderly cannot make their own decisions, and actually need others to make informed decisions for them. Further, some responsibilities and obligations are not simply freely chosen contractual agreements, but are the results of relationships or structures we find ourselves part of. Due to differences in age, health, social ties and responsibilities, levels of education, wealth, and so on, people are not equally, but radically *unequally*, positioned in the market.

Kittay (1999) argues that a conception of society as a free competition of goods between equally positioned self-interested and independent individuals overlooks the human fact of dependencies and responsibilities for care. She points out that not only does this conception ignore how some people are crucially dependent on the care of others, like children, frail elderly or disabled persons; it also ignores how the carers themselves are dependent on a third party to provide for them and their dependents, and to provide resources for sustaining the caring relation itself (Kittay, 1999, p. 29, 44-46). Here, Kittay describes two types of inequality: an inequality of capacity and an inequality of situation. The first type of inequality is found between the person caring and the person cared-for. As mentioned in chapter two, Kittay focuses on those crucially dependent on the care of others in order to function or survive in their environments, whom she calls the "charge" (Kittay, 1999, p. 31). The charge is dependent on care because she is not capable of taking care of herself, and thus, by virtue of the relation of care, there is an inequality of capacity between the carer and the charge (Kittay, 1999, p. 45-46). However, Kittay explains that an inequality of situation also arises between the carer and a third party or provider. As an example she refers to the traditional family mod-



el, where one adult, the head of household, provides for the family by participating in the economy while the other adult has the primary responsibility for their dependents — their children or elderly relatives. With the traditional family model, the provider makes available external resources on which the carer is dependent. Kittay argues that the carer vis-à-vis the provider is in a worse bargaining position because she is dependent on the cooperation of the provider in order to secure the resources necessary for meeting her own needs as well as sustaining the caring relation to her charge (Kittay, 1999, p. 43).

It may be argued that Kittay's distinction between an inequality of capacity and an inequality of situation is often blurred in reality. An inequality of capacity will likely involve an inequality of situation. For instance, a severely disabled person will always be highly dependent on others' care in a way that a fully functioning adult will not. There is then a difference in capacity *and* in situation. However, it seems Kittay wants to highlight that inequalities mainly arise from differences in situation, and not from differences in capacity as such. While the carer and provider, in her example, both have fairly similar capacities, they stand in radically different positions. The carer is bound by her caring responsibilities towards her charge, while in turn she is crucially dependent on the provider for the resources necessary to sustain the caring relationship. Yet, one might point out that the provider too, presumably is bound by a responsibility to provide for the carer and her charge. Kittay argues, however, that the carer's exit options are more restricted than the provider's. She explains this as being due in part to the carer's moral and emotional commitment to her charge and in part to the fact that her role as carer makes her more likely to tune into another's needs and to accept them as her own (1999, p. 43-44). Kittay's point seems to be that inequalities can arise not only from differences in capacities, but also from differences in caring responsibilities towards others, which again may lead to differences in the access to necessary resources for themselves and their dependents. Thus, in discussing inequalities between persons one must also pay attention to differences in their situations.

Kittay looks especially at unpaid care work, where the carer is kept outside the competition of goods because of her caring responsibilities (1999, p. 39). Her discussion shows how the perspective of market thinking ignores the positions of those outside the market and leaves unanswered the question of how they are to access market goods. With market thinking it seems to be simply assumed that individuals are free to enter the market if they choose, and once they enter, it is assumed that they will be equally positioned with others in the competition for goods. Kittay comments that, on the liberal model of society, the competition for social goods is like "a competition on a playing field, which, if not level, then is one in which the unevenness is uniformly distributed" (1999, p. 48). Yet, as she continues, those who enter

this competition with ties of responsibility “enter a race with one leg tied to a drag”. It may be argued that the lack of economic independence, the situation in which Kittay’s unpaid carer finds herself, is remedied by professionalising care work. As Kittay points out, professional care work may be directed towards others’ needs and have a non-self-interested character, in a similar way to the unpaid care work she initially focuses on. However, Kittay sees the potentially other-directed character of professional work as balanced by detachment, autonomy and achievement appropriate to the profession. She mentions how the doctor, for example, sets a diagnosis and prescribes medicine or further care that others carry out. Professional work is specialised, while the care work Kittay focuses on is more generally directed at sustaining the charge and the charge’s various needs. Kittay adds that specialised professional work includes honorary and monetary rewards — symbols of achievement and status. While more general care work is either unpaid or poorly paid, and has low status (Kittay, 1999, p. 38-40). Even if general care work were more widely professionalised, which is largely the case in Norway 15 years after the publication of Kittay’s book, still, *some* care work must fall on personal relations rather than on professional relations.<sup>14</sup> For example, the main responsibility for the care of children is left to the parents, at least for the first months or years. Even where there is access to child care, like day care centres and after-school programmes, the parents still have the main responsibility for ensuring that their child’s needs for care are properly met. Publicly or privately funded parental leave or welfare leave<sup>15</sup> are examples of a ways to economically compensate caring responsibilities in personal relations. However, it is only possible to address these issues if it is first acknowledged that caring responsibilities arise within relationships, that someone must take on these responsibilities, and that their care work has value. With market thinking these issues are hardly even visible. Following the lead of the market view would mean developing a society of complete individual independence, where care services are exclusively distributed through the market.

---

<sup>14</sup> It seems the Norwegian welfare system provides access to at least some of the general care services Kittay alludes to, exemplified by the general access to child day care centres for children from the age of one, after-school programmes, professionalised care of the elderly, and government-subsidised health care for children up to the age of 15. Yet, like any political system, the Norwegian welfare system is not set in stone, and is vulnerable to political changes in the direction of liberalisation and privatisation of social care programmes.

<sup>15</sup> I refer here to the Norwegian “*velferdspermisjon*” which is a fairly common right for employees to take leave of absence for personal reasons, like a death in the family, moving home, or going to the doctor.

## Structural Inequality

Tronto (2013), like Kittay (1999), looks into the problems of unequal bargaining positions, though focusing on the consequences not for those outside the market, but for those within the market. Tronto argues that unequal bargaining positions in the market, when multiplied thousands of times, lead to structural inequalities. She explains that this is due to the fact that one exchange in the market often sets the standard for the next, so having a less powerful bargaining position the first time round means a similarly weak position the next time. Tronto illustrates her point, in the same paragraph, with the negotiation of an employment contract: The power of the employee's position will affect the wage agreed on, and this sets the standard for the next time the parties meet to renegotiate (Tronto, 2013, p. 126). The market view brings with it a sense of timelessness where each transaction in the market is seen as starting anew, as if from neutral, ahistorical ground. Though in fact the history of earlier transactions will have an influence on the outcome of present transactions. The framework of market thinking only seems to be able to explain differences by the extent to which different people are willing to work hard. As Tronto points out, individualism seems to lead to a work ethic that implies that hard work is followed by success. Thus, those who do not work hard will not get what they need (Tronto, 2013, p. 83-85). With market thinking it is not acknowledged, nor even noticed, that problems of structural differences may develop over time. In care-ethics, on the other hand, time is an important dimension: Relationships are developed over time, dependency evolves and changes with time, and thus, personal and social history affects a person's sense of identity, autonomy, and future relations.

Structural problems are also analysed by political scientist Iris Marion Young (2011),<sup>16</sup> who specifically looks into what she called structural injustice. She defines structural injustice as social processes that systematically and negatively affect the positions of certain groups of people, reducing their opportunities to develop and exercise their capacities. As she writes: "Structural injustice occurs as a consequence of many individuals and institutions acting to pursue their particular goals and interests, for the most part acting within the limits of accepted rules and norms" (Young, 2011, p. 52). This form of injustice is a wrong that is difficult to pin to anyone or anything in particular, whether individual actions or political policies. As Young explains, this is because those who partake in these structures are often unaware of the unjust processes they are part of (2011, p. 45, 52). Young mentions the situation of garment workers in the global garment industry as an example of structural injustice. She argues that the whole market structure of production and distribution diffuses the responsibil-

---

<sup>16</sup> Young's (2011) *Responsibility for Justice* was published posthumously on the basis of Young's manuscripts and edited by Martha Nussbaum.

ity for the working conditions at the bottom of the supply chains. She explains that at each level of the distribution and production chain, the parties will see themselves as operating on the margin in a highly competitive market, and thus their situation is felt as a constraint on their opportunities to act or choose differently (Young, 2011, p. 125-134).<sup>17</sup>

Kittay, Tronto and Young all point at the consequences of differences in power and positions within a market structure. Kittay (1999) describes the difficult position of those who stand outside the market, either because they are dependent on the care of others, or because they are responsible for another's care and dependent on a third party for the resources to continue their care work. Tronto (2103) argues that differences in power in terms of market positions increase over time and result in unequal structures. Young (2011) addresses such unjust or unequal structures, and points to the difficulty of pinning blame on any particular action or policy; for it is the structure itself that is the problem rather than any particular individual action. With market thinking, on the other hand, it seems simply to be assumed that everyone stands on an equal footing. The arena of economic markets appears to be a space of free choice and a level playing ground. However, in reality it is an arena where structural inequalities easily take root, and lie concealed under the proclaimed ideal of free choice.

### **Unrealistic Assumptions**

The standard assumptions of mainstream economic theory have been criticised from different quarters for being overly simplistic. For instance, economist Paul Krugman comments on the state of economics after the financial crisis of 2008, and concludes that “[...] economists need to abandon the neat but wrong solution of assuming that everyone is rational and markets work perfectly” (2009, p. 8). His point is that reality, contrary to theory, is usually neither simple nor elegant. However, as discussed in chapter one, the standard assumptions of economic theory are not meant as full descriptions of reality. They highlight the elements thought most central to economic behaviour. Mill explicitly pointed out that his notion of the economic man was a deliberate simplification of human beings, and similar cautions are made by contemporary economists (Mill, 1844 [1992], p. 139; Mankiw and Taylor, 2011, p. 25-26). As also mentioned in chapter one, Friedman (1953) has further argued that it is the usefulness, not the realism, of the assumptions that are of consequence for economic theory. Does it matter whether the underlying assumptions of economic theory are realistic, as long the model leads to correct predictions? It seems reasonable to presume that the more accurately the

---

<sup>17</sup> I will return to the case of responsibility in the garment industry in the last chapter.

model represents the actual conditions of human decision-making, the more accurate the predictions that can be made. Yet, a model, by its very nature, cannot incorporate all aspects of reality, for it would then simply mirror real events rather than reveal the underlying causal patterns. *Some* assumptions must be made about what aspects of human life are to count as relevant. The economist and Nobel laureate James M. Buchanan defended the use of certain abstractions in economic modelling, arguing that: “Any theory is abstracted from the reality perceived by the senses, and theory derives its potential value precisely because it is *so* abstracted” (1987, p. 51, his emphasis). As I see it, there are two issues related to the criticism that the standard assumptions of economic theory are unrealistic: One is the use of models based on overly *simplistic* assumptions to explain and predict real events and human interaction; the other is the use of models that are based on simplistic and *mistaken* assumptions to explain real events and human interaction.

First, explaining human interaction with models that rest on too simplistic assumptions will mean that much of the detail of the actual situations is ignored. As Buchanan argued, the very nature of a model requires some simplification. General mechanisms are then required as explanatory tools, and these must be fairly universal, holding generally for most people in most situations. Assuming that economic agents are rational ensures that every agent will act according to the same principles, given similar conditions. Similar conditions are provided through the assumption of perfect markets. From a care-ethical point of view, the simplification involved in economic modelling is problematic in that it relies on extreme generalisations and universal principles. Part of the care-ethical critique of dominant moral theories like Kantian ethics, utilitarianism and political liberalism has been directed at their reliance on abstract and universal principles (Gilligan, 1993; Noddings, 2003; Held, 1993; 2006). The principle of impartiality, for instance, creates a distance to the complexity of actual moral dilemmas. Care-ethics, on the other hand, is concerned with the particular and actual, bearing a sensitivity to the situational context. The complexity of the situation is thought to hold the key to understanding how the moral problems arise in the first place and the appropriate means of addressing them. From a care-ethical point of view, extreme simplification is in itself problematic. Yet, care-ethics is also a *theory* attempting to make sense of a complicated real world, and so some simplifications will be necessary here too. I suggest simplistic assumptions are not the main problem. Rather, it is a question of which elements of the real world are brought to the forefront.

This leads to the second concern that economic theory may rely on simple and *mistaken* assumptions. From a care-ethical point of view, the standard assumptions of economic theory are, if not completely mistaken, then at best present only a sliver of actual human agency

and human interaction. At worst, the standard assumptions lead to a false view of persons as exclusively rational and self-interested, where the reality of dependency and caring needs — along with the possibility of unjust structures — is ignored. As argued in the previous sections of this chapter, rationality and self-interest alone cannot explain why we take on caring responsibilities, except as part of a mutually beneficial exchange of services. Asymmetrical care relationships, where the needs of one of the parties demand most of the other's attention, make little sense on the market view. Even with the modifications suggested by research in behavioural economics, much is left out that care-ethicists would include in a theory relevant to human interaction. A crucial difference is that the general economic outlook leads to an individualistic perspective, focused as it is on individual independence and assumed equality and freedom of choice. This leaves out the problem of unequal structures forming over time, or the consequences of being bound by caring responsibilities. Care-ethics, on the other hand, is fundamentally relational, emphasising how each person is situated within a web of relationships. Care and responsibilities make sense in that they arise within relationships, and the way these needs are met has consequences for a larger relational structure.

### **The Normative Implications of Market Thinking**

It may be protested that economic theory is, after all, not a moral theory. The aim of economic theory is to explain economic events and economic behaviour, not care, social relations or responsibilities. Generally, economists will separate positive economic analysis from normative analysis, leaving questions of what *ought* to be the case to politicians or others. Friedman has explicitly argued for a separation of positive and normative economic analysis, stating that “positive economics is, or can be, an ‘objective’ science, in precisely the same way as any of the physical sciences” (1953, p. 2). In fact, there seems to be a culturally accepted gap separating economics from other areas of human life: “While we may grant that interpersonal, family and civic life are laden with meaning, ethical depth and opportunities for care, we may believe that, in contrast, modern capitalist, market oriented, competitive economic life obeys its own impersonal and mechanical rules” (Nelson, 2011, p. 35). It is as if economic activities belong to a separate sphere, steered entirely by their own market mechanisms. These mechanisms are formed through the numerous, uncoordinated decisions of economic agents, each rationally seeking their own interests. Thus, ethical considerations, relevant in social, political, and personal life, seem alien in economic markets. It is as if economic activity neither is nor could be relevantly influenced by ethics. On a first glance, then, there seems to be no room for ethics in the domain of economic decision-making, let alone care-ethics which sets

the importance of care, relationships and responsibilities at the forefront. Yet, as the discussion so far in this chapter has suggested, I see market thinking as infused by a normative standard, and economic conditions as bearing influence on concerns of care and responsibilities. Market thinking is a framework for thinking about human behaviour and decision-making in economic terms, and is based on the standard assumptions and principles of mainstream economic theory.

My reasons for seeing market thinking as infused by a normative standard rest on two points. First, I consider an implicit normative standard to be present in that market thinking identifies certain elements of human behaviour and interaction as relevant at the exclusion of others. The assumptions of rationality, self-interest and individual independence, meant as descriptive tools for economic analysis, easily slip into a normative standard — both within and outside a purely economic setting. This leads to the second point, that economic activity does not belong to a sphere that is separated from the rest of human life. Economic events are the results of human decisions and human-made structures, and often have real impact on people's lives. As such, many economic decisions have moral significance.

Consider, first, the implicit normative message present in the standard assumptions of economic theory. Together the assumptions of rationality and self-interest, and the principle that economic agents generally prefer more to less, imply that we each seek ever more material gain. In putting precisely these assumptions and principles at the centre as *relevant* to economic decision-making, the implication is that these are the *only* features relevant to economic decision-making. While insights from behavioural economics can in part soften the standard assumptions of neoclassical theory, still, the framework of individual preferences is the same. From a care-ethical point of view, thinking in terms of individual preferences will in itself make it difficult to see caring as anything more than a personal taste for benevolence. The point is, simply by picking out certain features at the exclusion of others, as those most relevant to the theory, will in itself set a normative standard. As mentioned earlier in this chapter, Hausman and McPherson (1996 [2006]) argue that the assumption of rationality is both expressive and normative, and I suggest that the same is true of the assumption of self-interest. Stating that it is rational to, for example, choose the cheapest of two alternatives, is at the same time stating that one *ought* to choose the cheapest. Or, stating that any employee will try to negotiate for the highest possible pay for herself is at the same time stating that she *ought* to negotiate for the highest possible pay — she would be a fool not to. The normative message, then, is that rationality and self-interest are both acceptable and expected in economic decision-making. While self-interest is perhaps not required for good economic judgement, it is often implied that not being self-interested would be both unexpected and a bit stupid —

even *irrational*. If it is irrational for an employee not to try to secure the highest possible pay for herself, this implies that being self-interested is part of what it is to be rational, or that being self-interested is in this setting a good thing. However, it cannot be the case that rationality must entail self-interest. As economist and philosopher Amartya Sen comments: “Why should it be *uniquely* rational to pursue one’s own interest at the exclusion of everything else?” (1987, p. 15, his emphasis). Sen concludes that this would be absurd, as it would be the same as claiming that other-regard is in principle always irrational (1987, p. 15). Yet, the statement that it would be irrational for an employee not to try to maximise her pay level uses the word “irrational” in the normative sense of being a bad choice. This suggests that while self-interest is not strictly required by rationality, it is at least expected in economic decisions.

Thus, the notion of rationality works both as a descriptive and a normative concept. Self-interest is not only present in many economic decisions, but seems expected as part of good economic decision-making. In sum, we are left with the impression that material gain is a valid goal both at a personal and at a broader macroeconomic level. The general purpose of economic activity seems in turn to be economic growth. When economic growth is set forth as the purpose of economic activity, by implication it also becomes the ideal and measurement of economic success. When economic growth is the justified end of economic activity, then increases in efficiency, productivity and demand are justified means towards this end. Questions of sustainability or fair distribution may be difficult to fit into this framework, and this is precisely when, or because, they stand in the way of increased economic growth. In this way, the ideal of economic activity spills over into other domains as a general ideal for personal, social and political life. We are left with a framework for thinking about persons and social interactions in market terms. I argue that market thinking is not value-neutral but based on a set of normative propositions, emphasising certain themes — rationality, efficiency, independence and personal gain — but leaving out others.

### **Economics is not a Separate Sphere**

The second point in my reasoning that market thinking is infused by a normative standard is that not only is there a normative ideal present in market thinking, but this ideal cannot be ignored as it has relevance beyond what might be thought a pure economic sphere. Economics is not simply about monetary affairs: “Virtually every human decision involves the use of some scarce resources” (Mankiw and Taylor, 2011, p. 10). Economist and sociologist Gary S. Becker has perhaps drawn the market methodology and ideology the furthest, looking at various topics such as marriage, divorce, crime and discrimination through the lens of economic



theory. For instance, it was Becker who introduced the notion of human capital, referring to the economic value associated with human resources like education, training and skills.<sup>18</sup> The term is now both common and fairly uncontroversial, which exemplifies how economic concepts are, perhaps increasingly, used to think about persons and their motives. In his research, Becker does not adopt a narrow view of human motivation as exclusively self-interested or as driven by material gain, but he does assume that “[...] individuals maximize welfare as *they* conceive it, whether it be selfish, altruistic, loyal, spiteful, or masochistic” (Becker, 1996, p. 139, his emphasis). Thus, the framework of individual preferences is still firmly in place.

Becker’s research serves an example of how market thinking has an influence beyond what might have been thought purely economic issues. Held (2006) also argues that market thinking is spreading. Held sees the ideal assumptions of economic theory not as mere theoretical abstractions, but as a standard applied increasingly to new areas in the United States (2006, p. 107, 110). She writes: “We can recognize domains in which the individual pursuit of self-interest and the maximisation of individual satisfactions are morally permissible [...]” (Held, 2006, p. 120). But, she continues, other domains such as education, child and health care, culture and protecting the environment should be kept outside market norms “because markets are unable to express and promote many values important to these practices, such as mutually shared caring concern” (2006, p. 120). Held’s proposal is that we keep caring activities outside the realm of markets in order to ensure they are not corrupted by market ideals, such as profit maximisation.

Held’s arguments assume that the market ideals *can* be contained within their appropriate domains. As long as the market ideals are held within these boundaries, she seems to conclude that they are morally permissible. Smith (1776 [2004]) and Mill (1844 [1992]) similarly implied that the field of economics can be separated from other enquiries and that different activities and questions belong to different domains. Smith’s quote about the butcher, brewer and baker pursuing their business activities with self-interest, not benevolence, as their main motives, suggests that the two motives are set up against each other (Smith, 1776 [2004], p. 12). Mill’s account of the economic man suggests that human motivation is divisible into separate parts. While Mill considered a full description of human agency to involve a complex mix of desires and aversions, for the purpose of economic analysis he regarded the relevant motivation to be the desire for wealth (Mill, 1844 [1992], p. 139). In sum, the impression is that self-interest is the correct guide in economic decisions, while moral considera-

---

<sup>18</sup> See Becker, 1964, *Human Capital: A Theoretical and Empirical Analysis, with Special Reference to Education*, University of Chicago Press, Chicago

tions ask for something else, benevolence perhaps.<sup>19</sup> What should one do, then, if the issue at hand has both economic *and* moral implications? Is it self-interest or benevolence that is the right guide? And, does the simplified notion of the economic man still hold as a useful tool for analysis?

In practice, I see it as very difficult to achieve a clear delineation between a purely economic domain and other domains. It is clear that *some* economic issues, at least, are closely linked to moral issues. As Hausman and McPherson comment, moral ideas are perhaps not very relevant to the economist forecasting the price of wheat, but they are relevant to the economist concerned with improving the standard of living in poor countries, for instance (1996 [2006], p. 4). Further, think of the impact of the financial crisis of 2008. Beginning with the burst of a housing bubble in the United States, it spread through the financial markets via complex financial products and resulted in the collapse of several large banks, increases in national debts, and lasting unemployment in many countries (*The Economist*, 2013). What looked like purely economic phenomena — the trade of collateralised debt obligations (CDOs) — in fact had real and lasting consequences for ordinary people’s lives. As many people have lost their homes and their jobs, and seen their pensions and other social benefits decline, it has become clear that economic events also bear moral significance. Economic outcomes can cause real harm. Again, consider the typical economic reality of a garment worker in Bangladesh, for instance, who works long hours for little pay and is hardly able to support herself and her family.<sup>20</sup> She is fully aware that economic constraints can hinder the choices and opportunities one has, including one’s opportunities to care. Engster (2007) points out that economic resources are necessary for care, being the means to attain access to basic commodities like food, water, clothing and energy. He argues that we all depend on work, or on the work of others, in order to meet our own caring needs and the needs of our dependents (Engster, 2007, p. 117, 123). Economic conditions, then, are relevant to care-ethical concerns, both as potentially fostering or hindering care.

Not only do economic decisions and events have an influence beyond what might be thought the appropriate boundaries of “pure” economics, Nelson (2011) argues that social values and norms also influence economic activity itself. She considers the idea that economic

---

<sup>19</sup> The so-called Adam Smith Problem addresses what is an apparent contradiction in Smith’s work between altruism and egoism. His moral theory in *The Theory of Moral Sentiments* seems to explain morality as resting on a natural sympathy for others, though self-interest seems to be the prevalent motivational factor in his *The Wealth of Nations*. However, the debate seems now largely resolved, as most contemporary scholars reject such a simplistic interpretation of either of Smith’s works. See Weinstein (2008) for an overview of Smith’s theories.

<sup>20</sup> See the reports *Bangladesh: Seeking Better Employment Conditions for Better Socioeconomic Outcomes* by the International Labour Organization (ILO, 2013) and *Living Wage in Asia: Report* by the Clean Clothes Campaign (CCC, 2014).

activity belongs to a sphere separable from society, government and social values is a myth. Rather, according to Nelson, economic transactions depend on each of the party's trust and cooperation, and on social institutions like the legal system, governmental regulations, rating bureaus and business reputation. She concludes that if people did not care at all about social compliance or ethical norms, but rather were purely opportunistic, then "[...] every economic transaction would need to be tightly policed ... and then someone would have to police those doing the policing, and so on ad infinitum" (Nelson, 2011, p. 48). Nelson's point is that economic markets are not, and could never be, self-sufficient entities, solely obeying their own rules and steered by their own mechanisms. The sphere of economic markets is infused by values, norms and social institutions borrowed from society as a whole. This underpins my argument that the border between the economic domain and other domains is blurred. Both influence each other: The influence of market thinking seeps into social, political and ethical issues, while market thinking itself rests on a set of value-laden assumptions and creates a normative standard. Again, economic decisions and events have moral significance, to the extent that the consequences of economic decisions may cause harm or foster care in people's lives. In turn, market transactions themselves rest on social values and norms borrowed from society as a whole.

Part of the care-ethical critique of dominant moral theories was the point that the distinction made between the private sphere and the public sphere has been deeply gendered, and has involved an exclusion of issues relating to care, relationships and child rearing from the domain of morality (Held, 1993, p. 43-57). From a feminist perspective, there is no absolute boundary between the public and the private, because the one affects the other. From a care-ethicist's perspective, it is clear that personal, political and global relations can encourage caring practices and caring relationships — or distort and undermine them. Generally, the same applies to market relations, as the consequences of economic decisions can cause harm by reducing people's opportunities to care, or good by providing the resources necessary for care.

### **Rethinking the Purpose of Economic Life**

Engster (2007) asks whether a caring society could be a capitalist society, and answers that in principle there is no reason it could not (2007, p. 139). Nevertheless, he does add a fairly extensive list of principles and policies that would have to be in place, regulating economic institutions and ensuring minimum support for caring practices. He mentions, among other things, policies that would ensure a decent minimum wage, restrictions on working hours, and

government-subsidised care services (Engster, 2007, p. 140-148). With Engster's vision of the policies required by a caring society to regulate the economy, it is clear that he does not endorse a free-market version of capitalism. Tronto (1993) answers tentatively "no" to the question of whether a caring society could be a capitalist society. In *Moral Boundaries* she states that care-ethics is "probably ultimately anti-capitalistic because it posits meeting needs for care, rather than the pursuit of profit, as the highest social goal" (1993, p. 175). However, she also writes here that care is not a new cast of the old models of socialism either. Later, in *Caring Democracy*, Tronto (2013) opens for the possibility that markets can be caring, stating that it depends on how we think about markets and their purposes. She argues that as care is not a commodity in the standard market sense, we stand in danger of distorting the importance and value of care if we only use market terms to understand its place in society (2013, p. 115, 129). This is similar to Held's (2006) position, when she points to an inherent conflict between the aims of care-ethics and the aims of markets. The overarching principle of markets, according to Held, is that of maximised economic gain, and the only value recognised is a thing's instrumental, not intrinsic, value (Held, 2006, p. 109-110). Yet, even Held (2006), who is perhaps the most sceptical to markets, writes that: "Economies *could* produce what people really need in ways that contribute to human flourishing" (2006, p. 120, her emphasis).

While Tronto (2013) and Held (2006) refer to markets in general, it is clear that they both direct their criticism specifically at a neoliberal free-market system. Tronto explicitly states that her problem lies not with markets as such, as the means for providing care in society. The main problem, in her view, is the neoliberal market's aims: "If, however, the market's ends are taken to be only those that fit with the neoliberal preferences for entrepreneurship, accumulation of wealth, driving prices for all goods as low as possible, then such a market will interfere with, rather than support, making just arrangements for care" (Tronto, 2013, p. 129-130). It is clear, then, that neither Engster (2007), Tronto (2013) nor Held (2006) see care-ethics as compatible with a neoliberal free-market version of capitalism. While Held suggests that caring practices should be kept firmly outside the reach of economic markets, Tronto seems at least open to the possibility of providing care within economic markets, as long as market values and aims are appropriately redefined to accommodate care. Engster certainly sees the possibility of care being part of a market-oriented society, as he attempts to define the political and economic institutions necessary for a caring society.

As I see it, the real question is not whether care-ethics is compatible with capitalism in general, as opposed to socialism. While this might be an interesting topic in itself, posing the question as a comparison implies that the answer is either the one or the other. However, we live in a nuanced reality, a fact care-ethicists generally like to emphasise. What is of real in-

terest is where, between the two extremes, we think it right to draw the line. I suggest, therefore, that our real concern is how to fit the values of care-ethics in with an already market-oriented society. This involves opening our eyes to the implicit normative values of market thinking, and re-considering their usefulness and moral status. We can then move on to re-interpret the purpose of economic activity, and look at the relational structures of market transactions with new eyes.

Engster argues that the basic goal of a caring economy is to organise economic activities to support and accommodate caring practices (2007, p. 121). He sees a link of mutual dependence between care work and economic production. On the one hand, caring practices are a necessary foundation for economic production in that caring practices sustain and reproduce the labour force that makes economic production possible. He mentions that it is through caring practices that workers are replenished, the temporarily sick are nursed, and children are nurtured and educated so as to engage in economic production when they become adults. On the other hand, and as mentioned above, Engster argues that economic resources are necessary for making available the basic goods needed for care. From there being a mutual link of dependence between caring practices and economic production, Engster concludes that economic production is most fundamentally orientated around the moral goal of supporting human caring (Engster, 2007, p. 117, 121-123). Tronto similarly concludes that: “The purpose of economic life is to support care, not the other way round” (2013, p. 170). Production, Tronto argues, is not an end in itself but a means towards living as well as we can. On her view, one of the major problems with neoliberal market-based democracies is that the neoliberal market values of economic growth and production are put in the foreground, pushing the values of care to the background (Tronto, 2013, p. 139). The question, then, is how to make room for caring values within a market-oriented society.

While there are some serious problems with market thinking from a care-ethical perspective, there are aspects of economic activity that resonate with care-ethical themes. Cooperation, shared aims, interdependencies and relational structures are features present in both economic activity and caring practices. As mentioned earlier in this chapter and the first, trade seems fundamentally rooted in competition and self-interested motives. When Smith emphasised the self-interest of the butcher, brewer and baker, he pointed to an essential aspect of market transactions being the result of individuals’ concern with their own interests (1776 [2004], p. 12). Competition suggests an ongoing tension between the parties’ opposing interests, and as a consequence a conflict between positions of power. Think of the textbook example of the buyer and seller negotiating a price: The buyer wants to buy at the lowest price possible and the seller wants to sell at the highest price possible. On the other hand, I also see

an aspect of cooperation present in market relations. Once someone teams up with another, as the entrepreneur teams up with shareholders and employees, they are partners in trade. As partners, they are engaged in some common aim that binds them together in an economic relation. At a more general level, some cooperation and trust is required for market transactions to be possible at all. This is what Nelson is pointing out, when she states that the economic sphere in fact rests on a whole system of norms and social institutions (2011, p. 48). Thus, cooperation seems important to economic activity, alongside competition. Cooperation suggests that individuals in the market also form relations built on common interests and shared aims.

Furthermore, individuals in the market are interdependent, depending on each other and on the general workings of the national and international economy at large. Fundamentally, economic markets are about the exchange of goods and services. This means that the need for self-sufficiency is replaced by the possibility of specialisation. Increased specialisation means increased interdependence. In modern economies, almost all persons crucially depend on economic markets for access to work, housing, savings accounts, loans or other basic commodities and services. It is true that the neoclassical assumptions of “perfect” market conditions, rule out any form of particular dependence between economic agents in the market. So, ideally no agent is large enough to influence market prices, or the demand or supply of goods. However, with market failures, such as the existence of monopolies, particular dependencies and power relations are in fact at the core of the issue.

Cooperation through shared aims and relational structures of interdependence are important themes in care-ethics. However, the care-ethical perspective can also recognise and address differences in power and structural inequalities. This is useful as it can present an alternative understanding of market relations and economic activity, compared to the perspective presented through market thinking. For example, consider the notion that markets will meet the needs that arise through consumer demand. In *Caring Democracy*, Tronto (2013) argues that a major problem with markets is that they are centred towards meeting some people’s wants, not all people’s needs. She quotes the political scientist Robert E. Lane: “The market gratifies the wants of those with money, which already excludes the most miserable and impoverished individuals, and among those with money, it gratifies preferences according to the amount of money they have, not according to the urgency of different people’s wants and certainly not according to needs” (Lane in Tronto, 2013, p. 122). The quote shows how the notions of needs and wants, and value and price become conflated on the standard market-view. With the perspective of market thinking, people’s needs and people’s wants are reduced to the same thing, namely market demand. The value of a good becomes the same thing as the

good's market price. From a care-ethical perspective, it is easier to notice the difference between needs and wants, and value and price, as these notions are understood in the light of the normative values of care. Value is then not simply the same as market price or people's willingness to pay, but connected to the principles of extended non-maleficence and restricted beneficence (Pettersen, 2011). Similarly, people's needs are understood in terms of their needs for care, not simply as their wants or their ability to pay. In short, with care-ethics there is a clear difference between the willingness to pay and the ability to pay. In consequence, it is possible to notice that with the standard market system, power and freedom are associated with financial resources, because having the means to pay entails having the opportunity to voice one's needs and wants, and to ensure one's own needs are prioritised.

I see market thinking as presenting *one* way of approaching questions of human interaction and social organisation, while care-ethics presents *another* way. I have argued in this chapter that market thinking involves an implicit normative standard. This is due in part to the fact that simply by selecting certain features as relevant to economic decision-making, other features are left out. While the features of rationality, self-interest and individual preferences are highlighted in market thinking, other features are overlooked, like care, dependence and responsibilities arising within relationships. I have argued, for instance, that with the emphasis on individual preferences and self-interest, market thinking implies a dichotomy between self-interest and benevolence. With care-ethics, on the other hand, this would be downplayed and the focus would instead be on the shared aims of caring relationships. I further argued that market thinking is normative also in the sense that the selected assumptions seen as relevant to economic decision-making are by implication taken as being required for economic decision-making. Rationality and self-interest seem both expected and acceptable in economic decision-making, and economic growth seems to be the all-purpose aim of economic activity in general.

The normative implications of market thinking are of interest to care-ethics, because market thinking seems to be spreading as a framework for analysing many issues that are not purely economic. In my view, market thinking cannot simply be contained within an economic sphere separable from other spheres of society and politics, because the imagined boundaries between economics and the rest of human life are blurred. Economic markets are not independent, self-regulating entities, but human-made structures. Nor are economic decisions made by exclusively rational and self-interested economic agents, but by real human beings with a complex set of motives. Again, the consequences of actual economic events and people's actual economic situations have real impact on people's lives, including their opportunities to care for themselves and others. Recognising that economic events are the results of

human structures and decisions, and that economic decisions have real impact on people's lives, should lead us to see that many economic considerations are also of moral concern. I suggest therefore that economics is relevant to care-ethics, and that care-ethics is in turn relevant to economics.

My position is not that economic activity should be interpreted as a caring activity, or that market relations are in some sense relationships of care. Rather, I suggest that with the relational perspective of care-ethics and the normative value of care, we are equipped for an alternative analysis of economic decisions and economic structures. Market transactions can be seen as relational structures, and economic agents can be given moral responsibilities. I have argued that some features of economic activity resonate with care-ethical themes, like cooperation through shared aims and interdependence through relational structures. This exemplifies how market thinking and care-ethics can highlight different aspects of economic activity. It is partly a question of which features we choose to take notice of and emphasise, and which we choose to downplay. Market thinking, based on the assumptions of mainstream economic theory, provides an alluring model of human behaviour; it is both simple and elegant. The danger is that we forget that this model assumes "perfect" conditions, and that it ignores important information about human beings and their social environments. Certain facts of the human condition, like being dependent on the care of others, having caring responsibilities, standing in unequal positions in relation to others and forming particular attachments, are not visible in the market model centred around individualism and independence. The question, as I see it, is how a society informed by care should live with, respond to, or change the conditions of our economic lives.



## CHAPTER FOUR

### A CARE-ETHICAL INTERPRETATION OF RESPONSIBILITY

The perspective of care-ethics makes it possible to challenge our standard way of thinking about economic activities and market relations, as we saw through the discussion in the previous chapter. In this chapter I set out to explore what a care-ethical approach might amount to in terms of providing a positive contribution to the same questions. Specifically, what would a care-ethical interpretation of moral responsibility entail?

I begin by looking into three alternative care-ethical arguments for our moral obligation to care, as presented by Kittay (1999), Engster (2007) and Pettersen (2011). These are arguments for why we should accept the care-ethical approach in the first place. They are important, as our acceptance of a care-ethical interpretation of responsibility depends on the underlying question of why we should bother about care at all. As we will see, Kittay (1999) links the entitlement to care to a particular human relationship, Engster (2007) argues from the universal fact of human dependence, and Pettersen (2011) appeals to a universal experience of care. I suggest that Kittay's and Pettersen's arguments are the most promising. From there I discuss the notion of social responsibility for care, as set forth by Kittay (1999), and compare this to a minimal interpretation of personal responsibility, which Tronto (2013) sees as a characteristic feature of neoliberalism. Yet another approach to responsibility is found in Young's (2011) discussion of shared responsibility, which I suggest resonates well with a care-ethical perspective. However, I also discuss some troubling aspects of this notion. In particular, it seems at risk of being so far-reaching and vague that the specifics of each person's share of responsibility are lost. Finally, I sum up what I see as the most important features of a care-ethical interpretation of responsibility. I suggest it would be based on the relational ontology of care-ethics with an emphasis on reciprocity and relational commitment. I further suggest that a care-ethical interpretation of responsibility would be somewhat flexible, being able to approach questions of responsibility from different angles.

## Our Moral Obligation to Care

In an attempt to make clear what a care-ethical interpretation of responsibility might amount to, the first question that springs to mind is why we should care at all. On Kittay's (1999) account it all comes back to the fundamental importance of human connection. She writes: "We are all — *equally* — some mother's child" (1999, p. 25, her emphasis). With this statement she points to the fact that we have all equally been highly dependent on the care and concern of a mother or some mothering persons. The premise is that we are all, metaphorically speaking, entitled to the care, respect and love of a mother. Kittay explains that while philosophical theories usually start an argument for equality on the basis of some property we as individuals possess in common, as for example rationality, she suggests we instead base the notion of equality on the notion that we are all some mother's child (1999, p. 25). That we are all equally some mother's child, involves the postulate that we are equal by virtue of our relation to others, not by virtue of some individual property we have in common with others. That is, we are equal in terms of our relation to another, or rather, in terms of another's relation to ourselves. Respecting a person as some mother's child involves recognising how human connection is made possible, argues Kittay, and honouring the importance of human connection itself. She writes: "When we respect an individual as some mother's child, we honor the efforts of that mothering person and symbolically of all mothering persons" (Kittay, 1999, p. 69).

From the acknowledgement that we are all some mother's child, Kittay (1999) argues for an understanding of equality as connection-based, as opposed to a conception of equality as always equal in reciprocity. She explains that the connection based equality assumes a fundamental need for human relationships, and involves both the entitlement to care, if and when we need it, and to social support, if and when we must care for others. She further argues that the moral obligation to care rests on the real needs of a vulnerable person, who also in some way stands in a prior relation to the person assuming the role as carer. Kittay maintains that we have an unqualified obligation to assume responsibilities for care when the other's needs are basic, the vulnerability is extensive, and their prior relation to ourselves involves a moral warrant for taking on the care work (1999, p. 64-66). Moreover, Kittay states, the obligation to care requires that the carer assumes her caring responsibilities even at substantial cost to her own immediate interests and projects: "This is what every mother and every father who gets up at four o'clock in the morning to tend a sick child knows so well" (Kittay, 1999, p. 65). Yet, who is to care for the carer? Kittay argues that we also have a moral obligation to meet the carer's needs. On her account, we owe to the carer, who set's aside her own projects and interests in meeting her caring responsibilities, that these responsibilities are not unjustly forced upon her. If we disregard this obligation towards the carer, Kittay continues, we in fact

treat the carer as of lesser worth than both the person she cares for and those who have thrust upon her the role as carer. If we are all equally some mother's child then we are all, including the carer herself, equally entitled to the respect and care of being some mother's child (Kittay, 1999, p. 65).

Engster (2007) builds a somewhat similar argument to Kittay's (1999), grounding the obligation to care in our common dependence and need for care. He assumes first that we all as human beings generally value our survival and development. Further, he sees it as a fact that we all depend on the care of others to survive, develop and maintain our basic capabilities. Thus, Engster suggests we all, at least implicitly, value caring as a necessary good and make claims on others to care for us if and when we need it. Next, he argues, in claiming care from others we imply that those capable *ought* to care for those in need, at least when they can do so without overly compromising their other caring obligations. Engster concludes that because we all depend on the care of others and because we implicitly claim that capable individuals should care for others in need if and when they can do so, we should also recognise that we ourselves are morally obliged to meet others needs for care. According to Engster, this holds at least when doing so does not involve significant danger, long-term compromise of our functioning, or undermine our ability to care for others. He therefore states that those who fail to recognise their moral obligation to care, not only disregard the logical principle of non-contradiction, but also leave unacknowledged the web of caring relationships that their own lives, society, and human life in general depend (Engster, 2007, p. 46-49). With the principle of non-contradiction, as Engster explains, an individual's claim on others for their care is rationally justified by the fact they too have claimed the care of others for themselves. Engster writes: "We have duties to care for others because we have appealed to others for care, and other individuals have duties to us because they have appealed to still others" (2007, p. 50).

On Engster's account, then, we are obliged to care because we have already necessarily made claims on others for their care simply by virtue of our dependence as human beings. As a consequence we have obliged ourselves to similarly acknowledge the moral validity of other's claims on ourselves to care for them in turn. A potential problem with Engster's argument is that it seems to jump fairly quickly from is to ought: From the *fact* that we are all dependent on others' care, he argues we should recognise the *moral obligation* to care. The question is why one should acknowledge that our dependence on care makes us in turn morally obliged to care. Why not free ride on others' care, and disregard their claims on us to care for them in turn? In part, Engster provides an answer to this criticism by his suggestion that everyone implicitly values caring as necessary to their survival and flourishing. Yet, one might imagine some self-centred persons as valuing their own survival and flourishing, but

still not caring much about others' survival and flourishing. By contrast, Kittay (1999) rests her argument for the obligation to care in the broader context of her criticism of Rawls's (1971) *A Theory of Justice*. She argues that a commitment to care should be recognised as a primary good, on line with those initially suggested by Rawls, such as basic liberties and the social bases of self-respect. She writes: "A justice which does not incorporate the need to respond to vulnerability with care is incomplete, and a social order which ignores care will itself fail to be just" (Kittay, 1999, p. 102). Thus, Kittay seems to avoid the problem of free riding and a sudden shift from is to ought, by appealing to the notion of fairness, and grounding the obligation to care in a conception of justice. Engster (2007) does acknowledge a certain circularity in his argument, but holds fast that although there might be some point in the distant history of evolution where the first claim for care was made, he maintains that here and now, the fact is we have all made claims on others for care. On his view, it therefore follows that we are all obliged to care for others in turn. He argues that refusing to accept other's claims on our care involves a logical inconsistency and is simply a contradiction. He explains that it is not the contradiction itself that makes the refusal morally wrong. Rather, it is wrong because it undermines the web of caring relationships and the value and practice of care that have made our lives possible, along with our society and humanity in general. He writes: "[...] what is immoral about refusing to care for others is that it involves us in acting contrary to moral principles that we are all implicitly committed to by the very nature of our dependent existence" (Engster, 2007, p. 52). Engster's intention, then, is to ground the moral obligation to care by the fact of human dependence, and appeal to logical consistency as the reason for acknowledging the universality of the obligation.

Pettersen (2011) provides a third argument for why one should accept the obligation to care. She presents two reasons for why a narrow concern for oneself or a particular group should instead be replaced by the recognition of mature care. First, Pettersen argues, care-ethics appeals to a common experience of care. She suggests that the values and themes of care are part of a shared human experience, and can be revived in almost all persons. As discussed in chapter two, Pettersen interprets the core normative values of care as a balance between the principles of extended non-maleficence and restricted beneficence. Pettersen explains that the experience of care should not be seen as a subjective set of emotions or sentiments, or as grounded in a specific culture, religion or class. Instead she suggests the experience of care is virtually universal to all humans. Thus, she sees the experience and values of care as recognisable to almost all people, even to those who are hostile, aggressive or violent. As she points out, those who are abusive or aggressive in one situation may nevertheless be excellent carers in another, and will certainly have experienced care themselves. They may

therefore feel the appeal to the shared experience of care as acutely as others. Pettersen's second reason for why a self-centred person should accept an appeal to mature care is that it is rational. She suggests that by recalling the experience of care, the person will also recognise the importance of care for others. It is rational to accept the appeal to care, because one cannot consistently claim something for oneself and at the same time deny others the same opportunity (Pettersen, 2011, p. 54, 58-59).

Thus, both Engster (2007) and Pettersen (2011) appeal to reason in their arguments for the obligation to care. They point out that consistently claiming something of others, while denying their claims on us in turn, involves a logical contradiction. However, Pettersen, unlike Engster, specifically addresses the question of why a self-centred person should recognise and accept an appeal to care. If care is a shared, virtually universal human experience, as Pettersen suggests, then it seems likely that all people potentially can remember and revive the values and knowledge of care. Of course, some may simply refuse to listen to such an appeal, or refuse to extend their caring beyond the limited scope they care within. Pettersen addresses this by arguing that if the person in questions is able to care within a limited scope, then an appeal to their reason should make them recognise how care is equally important to others. By comparison, Engster's appeal to reason is an appeal to the recognition that as we ourselves are dependent on others' care, so others in turn our dependent on our care. His account seems not to provide a completely clear answer as to why the fact of dependence in itself involves a moral claim on care.

On the other hand, there are some unanswered questions relating to Pettersen's arguments too. Hers rests on the assumption that care in fact is a shared, almost universal, human experience, and that virtually all people can and do care even if only within very limited settings or groups. Yet, she does not spell out what the common experience of care amounts to, nor how easy or difficult it would be to broaden the scope of care to include a wider group of people. For instance, does the common experience of care rely on conscious memories? Does it require memories of mature care? What is it about the experience of care that makes it almost universal in its nature? Still, Pettersen (2011) is clear that a naive understanding should be avoided. She does not think that simply by appealing to people's empathy or reason, all harm, violence and conflict should dissolve. She acknowledges that some people are truly unable to empathise and identify with others, perhaps due to pathological disorders. Yet, she suggests appealing to rational identification and empathy represents two possible approaches made available by care-ethics (Pettersen, 2011, p. 59).

While Pettersen's description of a shared human experience of care might be interpreted as involving conscious memories of care, Kittay's emphasis on the particular human

relationship of mother and child seems rather to appeal to the importance of human connection and human relationships in general. Again, while Kittay and Engster both appeal to human dependence, Kittay emphasises the relational context of dependence. The relationship between mother and child represents the fundamental fact of human dependence, but also points to the fundamental importance of human connection and relationships. Kittay, then, grounds her argument for our obligation to care in a particular human relationship, which works as a metaphor for human dependence and connection in general. Engster grounds his argument in the rational recognition of the universal fact of human dependence, while Pettersen argues from the basis of a universally shared human experience of care and a rational identification with others. Of the three, I prefer Kittay's argument as it rests so fundamentally on the relational connection of human beings. Yet, as her argument for the obligation to care works as part of her re-interpretation of a fair conception of social justice, it will perhaps not work as well when taken out of this context. Pettersen's arguments, on the other hand, stand firmly on their own ground. I see Engster's arguments as the least solid of the three, as he seems not to provide a clear reason for why the fact of dependence justifies a moral claim.

### **Social Responsibility**

Kittay extends the entitlement to care to a social and public concept of care, which she calls the principle of "doulia". Her term "doulia" is based on "doula", the caregiver who in some cultures attends to the mother after giving birth, enabling the mother to care for her newborn child. Kittay's principle of doulia captures the obligation to care also for those who have caring responsibilities for others. She writes that: "Just as we have required care to survive and thrive, so we need to provide conditions that allow others — including those who do the work of caring — to receive the care they need to survive and thrive" (Kittay, 1999, p. 107). The principle of doulia involves acknowledging that every person is entitled to care, both those dependent on direct care for their survival and functioning and those who have caring responsibilities to others. Kittay sees the principle of doulia as mandating, both a social responsibility to enable caring relationships that are satisfactory to the cared-for and carer, and social institutions that enable carers to meet their caring responsibilities without being held back in the competition for goods and benefits in society (Kittay, 1999, p. 109).

Kittay's principle of doulia encompasses the social responsibility of care, and from here she argues for social welfare policies of care. First, Kittay argues that with the principle of doulia, it should be recognised that all care work, whether caring for children, the ill, the aged or disabled, are social contributions that should be acknowledged and reciprocated. She

explains that it should not be up to the person cared for to repay or return in equal amounts the efforts of the carer, but instead up to the larger social circle in which the caring relation is placed. Second, Kittay argues, the concept of *doulia* involves acknowledging the carer's efforts as work where the care worker, like other workers, should have the right to holidays, exit options and retraining if their caring work changes in nature or comes to an end (1999, p. 143). She maintains that care work, like other types of work, should not be gendered. Third, Kittay argues that with the principle of *doulia* care work should be well-paid (1999, p. 144). She points out that in the United States paid care workers are the most poorly paid workers relative to their education and that female-headed households are the poorest of families. Finally, Kittay sees *doulia* as accepting all types of family constellations as long as the care work is adequately realised (1999, p. 140-145).

The basic logic of Kittay's argument is clear. The more dependent a person is on others' care, the more difficult it will be for her to return the care she receives or repay the carer for her efforts. Think for example of a severely disabled person highly dependent on another's care for her own survival and functioning. It is impossible for her to reciprocate in equal amounts the care she receives. Nor will a severely disabled person be likely to have a personal income from wage-earning work. Thus, her funds for paying for the care she receives are also likely to be limited. The example shows how the very nature of a caring relationship to a highly dependent person demands that the care flows in her direction. Such a relationship is centred on the care of the dependent person. However, Kittay's argument further applies a similar logic to the case of the carer. The more demanding the carer's responsibilities are, the less time and energy is left for her to meet her own needs and secure the resources necessary for sustaining her care work. Thus, the social responsibility entailed in the concept of *doulia*, involves recognising that care work requires sustenance and resources from the larger social web that surrounds the caring relationship.

One should remember that Kittay defines the person cared for as the "charge", a person who is highly dependent on others' care for her own survival and functioning (1999, p. 31). It may be argued that not all caring relationships are asymmetrical, nor are all asymmetrical caring relationships so unequal as the example of the severely disabled person suggests. For instance, partners, friends or colleagues may generally be expected to reciprocate on fairly equal terms the care they give to each other — at least over time. Other caring relationships that are asymmetrical, like that between a dentist and a patient or between a teacher and a pupil, do not necessarily involve the same crucial dependence as Kittay's account suggests. For instance, it seems likely that one would be able to function and survive without ever seeing a dentist, though one might have bad teeth. Again, while a minimal amount of knowledge,

like literacy and numeracy, are important for functioning in today's society, mastering a foreign language may not be. However, precisely by focusing on highly asymmetrical caring relationships, Kittay is able to make the point that asymmetries and dependencies in caring relationships cannot simply be taken as exceptions from normality. Asymmetries are not only common in caring relationships, but also crucial to human survival and functioning in general. In Kittay's words: "[dependencies] are unassailable facts about human existence" (1999, p. 29). Her focus on asymmetrical caring relationships makes it clear that care is often justified in flowing towards the person cared for — the dependent. Yet, I see her argument as also holding generally for all types of caring relationships. At the core, it shows the importance of acknowledging the effort involved in caring, the value of care work and the necessity of resources, like time and money, that make it possible to sustain caring relationships. That caring involves an effort and that the carer herself also has needs that must be met are facts that hold for any caring relationship. While some caring relationships may involve a fairly equal distribution of effort on both parties over time, as might be the case for relationships between friends or partners. Still, at any point in time where the one needs the care of the other, the caring party must have access to the resources which makes it possible to sustain the effort of care there and then. In the end, it is a question of the distribution of care work. How should care work be acknowledged and compensated? Who stands in a position to do so? Kittay's proposition is that the responsibility for care should be distributed as a social responsibility, as entailed in her principle of *doulia*.

### **Social Welfare versus Privatised Care**

Kittay (1999) discusses the traditional family model as one possible approach to meeting the social responsibilities of care. She explains that the idea behind the traditional family model is that the family, as a unit, is self-sufficient. The "provider" of the family is employed through the market, supporting the family members with the necessary resources for care. No additional social support should then be necessary. Yet, as Kittay argues, the apparent self-sufficiency of the family unit is no more than "[...] a chimera of the capitalist economy" (1999, p. 141). As she explains, the provider of the family depends on an employer and an economy that values the skills or services offered, similarly to how the carer of the family depends on the provider. Kittay's point is that neither the provider nor the carer is completely independent. She finds a second problem with the traditional family model in that it presupposes the existence of adequately paid employment, while in fact not all providers are able to find employment, let alone employment sufficient to support a family (1999, p. 141). As a



final point, Kittay adds that the carer in the traditional family is especially vulnerable in her relationship to the provider. As mentioned in the discussion in chapter three, Kittay argues that the carer stands in a worse bargaining position and has limited exit options, compared to the provider. On her account this is in part due to the carer's moral and emotional commitment to her dependents and in part due the fact that to her role as carer leads her to easily tune into other's needs and makes her susceptible to accepting them as her own (1999, p. 43-44). Kittay concludes that the traditional family model does not ensure that care work is properly valued and fairly compensated.

Instead of meeting care responsibilities through the traditional family, Kittay proposes a universalised and socialised compensation system for care work, for instance through government funding (Kittay, 1999, p. 141-143). She mentions compensating mothers who care for their children or providing them with the option of day-care, enabling a son or daughter to care for an elderly parent or providing them with financial support to pay someone else to do it for them. She sets as requirements that the level of compensation is sufficient for the carer and dependent not merely to survive but have adequate resources to care well. Also, determining the specifics of the arrangements of compensation must involve the care workers themselves (Kittay, 1999, p. 142-143). In short, she argues for a social welfare system that supports caring practices. Engster (2007) similarly sees the need for social, political and economic institutions that will support care in society. He argues that through our moral obligation to care, we are further obliged to establish and support institutions that provide care for those we cannot ourselves care directly for. He writes: "Since we can personally care for only a few individuals by ourselves, our obligation to care for others further directs us to establish collective caring institutions that can aid and support individuals beyond our reach or means" (Engster, 2007, p. 123).

Tronto (2013), like Kittay (1999), questions the traditional family model as providing a fair distribution of care responsibilities. She argues that with the neoliberal framework responsibility is interpreted as meaning only personal responsibility. The ideological message is that we are each responsible only for our close family, our local community and ourselves (2013, p. 37-38). Personal responsibility, in Tronto's view, is not enough because it ignores how patterns of exclusion and inequality have an effect on individual's and public life. In *Caring Democracy*, Tronto (2013) is concerned with the questions of how care responsibilities are distributed in society. Who controls the setting of responsibilities? Why are some granted a free pass out of being assigned responsibilities? Particularly, she asks whether markets can work as appropriate institutions for providing care. Tronto argues that those who answer yes to this question typically invoke two "responsibility passes," as she calls them,

namely the “bootstrap pass” and the “charity pass”. She sees these as two sides of the same coin, working together as an argument for a minimal interpretation of personal responsibility and for seeing economic markets as sufficient instruments for providing care in society. Tronto describes the bootstrap pass as the idea that individuals meet their own needs through the market. Thus, people should care for themselves, or ensure the care they need by creating families, buying insurances or care services directly through the market. Tronto describes the charity pass as the claim that since some people actually do choose to give to charities, those who are truly unable to care for themselves will in fact often be taken care of. At the bottom line, the bootstrap and charity passes see the meeting of caring responsibilities in society as a matter of personal responsibility and individual charity (2013, p. 58, 117-118).

Tronto’s description of the neoliberal interpretation of personal responsibility and the accompanying responsibility passes, fits with the American model of a market oriented society with a fairly minimal social welfare system. In a system with minimal or non-existent social welfare, the bootstrap pass involves the assumption that either all persons are independent, healthy, working adults, or that they are part of a traditional family structure where one working adult acts as provider and the other has the main caring responsibilities for children or relatives. In such a context, the bootstrap pass simply ignores the situation of the single parent who must both earn wages and care for children, or the long-term or permanently disabled person with no provider. As the argument of the charity pass goes, some may choose to care for those who are especially unfortunate. Yet, the possibility of systematic background causes that create inequalities or make some more dependent than others, easily goes amiss. As we saw Kittay pointed out above, the possibility that there exists jobs where the pay is insufficient to live on, or insufficient to provide for a family, would on this view be interpreted as no-one’s responsibility other than the workers themselves who accepted the low-income job in the first place. Tronto argues that with the charity pass the claim that some people derive positive utility from being charitable is used as an excuse for the rest of us to avoid thinking seriously about other’s needs for care (2013, p. 118). The neoliberal interpretation of personal responsibility implies that contributions to charities are personal choices. The question of whether to donate, to whom, and how much, is answered solely by the individual’s own conscience, interests and preferences. Tronto argues that wants and interests, not necessarily needs, determine what gets met through charity, so that in the end there is no “reason to think that enough, or the right kinds, of charitable contributions will be made” (2013, p. 120-121).

Certain parallels between Kittay’s (1999) and Tronto’s (2013) discussions are apparent. Both are concerned with the distribution of care work and care responsibilities in society, and both argue against a purely privatised arrangement for care. According to Tronto, the no-

tion of personal responsibility and the accompanying bootstrap and charity passes mark the ideological background of a neoliberal market system. This interpretation of responsibility stands in stark contrast to Kittay's (1999) notion of social responsibility. From a care-ethical point of view, the problem with the personal responsibility of neoliberalism is that structural causes of inequality or injustice are not addressed, nor even noticed. In principle, it is a question of how we choose, as a society, to organise care work, assign caring responsibilities and meet caring needs. The personal responsibility of neoliberalism rests on the assumptions of individualism and independence also present in market thinking. This leads to the understanding of responsibilities as restricted in scope to a limited group, and also makes it difficult to explain how responsibilities can be anything other than voluntarily assumed obligations. By contrast, Kittay's discussion shows that a care-ethical interpretation of responsibility would rest on the grounding premise of a relational ontology. The focus then shifts from an underlying assumption of the independence of individuals, to an underlying assumption of their relational interdependence. With a relational ontology, the emphasis is on the relational context of persons and on responsibilities as arising within relationships. Thus, responsibilities need not be presumed voluntarily assumed commitments, but may be seen as arising in the form of justified claims that are tied to particular relationships and social structures. Rooting responsibilities in particular relational contexts means it is possible to extend the scope of responsibility from the individual level to the broader social level. This is because every particular relationship is again part of a larger social web of relationships. The scope of responsibility on this relational interpretation will likely include a responsibility to one's family or local community, as the personal responsibility of neoliberalism also does. Yet, the relational interpretation of responsibility would not automatically limit responsibility to these groups only, nor would it exclude others from bearing part of the responsibility for these same groups.

### **Shared Responsibility and Structural Injustice**

Young (2011) defines structural injustices as social processes that systematically and negatively affect the positions of certain groups of people, hindering their opportunities to develop and exercise their capacities. While we usually think of injustices as caused by the particular actions of certain individuals or institutions, structural injustices are the results of the actions of many individuals and institutions pursuing their own aims, largely acting within the law and accepted norms, and often unaware of the structure their actions are part of (Young, 2011, p. 48, 52). Young points out the difficulty in addressing structural injustices within the standard framework of moral and legal responsibility. On the standard model of justice, Young

argues, moral and legal responsibility is connected to the particular actions of an agent. She calls this standard framework the “liability model of justice”. On the liability model an agent is held responsible only if the particular harm is the result of a voluntary act, which can be said to be causally connected to the harm inflicted, and which was done with knowledge of the consequences and circumstances of the situation. An agent may also be held responsible for what was not, but should have been, done as with the concept of culpable negligence. Young argues that the liability model is concerned with assigning responsibilities for the purpose of sanctioning, exacting compensation or demanding redress, and as such it is backward-looking and equates responsibility with blame. As she argues, the difficulty in addressing structural injustices within this standard model of justice is that no-one in particular is to blame, yet some people nevertheless face injustices (Young, 2011, p. 96-98).

As a response to the problems of using the liability model for assigning responsibilities in relation to structural injustices, Young introduces the alternative framework she calls the “social-connection model of justice” with the accompanying notion of “shared responsibility” (2011, p. 105-113). According to Young, the social connection model does not isolate a guilty party, but focuses on the background conditions of the injustice. She explains that the purpose is not to assign responsibility as a backward-looking blame-game, but rather to see responsibility as a forward-looking move towards change. In cases of structural injustice, Young suggests that those who participate with their actions towards the unjust outcomes rightly bear a responsibility for them, but they are not directly at fault as they have usually acted within the law and accepted norms (2011, p. 106). Thus, Young differentiates between responsibility and blame. On her account, bearing a shared responsibility does not necessarily mean that one is to blame, but neither will acting within the law and accepted norms automatically absolve ones responsibility in being part of an unjust structure. She argues that if we accept the existence of a particular structural injustice, we are at the same time claiming that some of the accepted rules and norms we act in accordance with are morally questionable (Young, 2011, p. 107).

According to Young’s account, the responsibility part of the social connection model of justice is shared and only discharged through collective action (2011, p. 105, 109-113). She writes: “As I understand it, a shared responsibility is a responsibility I *personally* bear, but I do not bear it alone. I bear it in the awareness that others bear it with me; acknowledgement of my responsibility is also acknowledgement of the inchoate collective of which I am a part, which together produces injustice” (Young, 2011, p. 109-110, her emphasis). Young differentiates her notion of shared responsibility from collective responsibility. She explains that a collective, like a corporation, may be held responsible for something without any of the per-

sons working for the corporation being personally and determinately responsible for it. With shared responsibility, Young argues, each is personally responsible for the outcome but in a partial way: “[...] the specific part each plays in producing the outcome cannot be isolated and identified, however, and thus the responsibility is essentially shared” (Young, 2011, p. 110). Notice that while both Young (2011) and Tronto (2013) use the term personal responsibility, they are describing two very different interpretations of responsibility. Young’s shared responsibility is a responsibility born personally by each and every agent who contributes to the processes and structures that produce unjust outcomes. It is a shared form of responsibility in the sense that it is distributed between all those who partake in these structures. When Tronto writes of the personal responsibility that accompanies neoliberalism, she is also describing a responsibility we each personally bear, but unlike Young’s shared responsibility, this is a responsibility limited in scope to only oneself, one’s closest family or local community. It is also worth noting that Young does not intend to replace the liability model, nor is Tronto necessarily against personal responsibility. Young’s point is that the liability model of justice is inappropriate in certain contexts because it cannot address structural injustices. Presumably, her social connection model is meant as a supplement to the liability model, specifically addressing structural injustices. Tronto, on the other hand, argues that the neoliberal interpretation of personal responsibility is insufficient in ensuring a fair distribution of care work.

Young’s (2011) notion of shared responsibility resonates to some extent with Kittay’s (1999) notion of social responsibility. Although Kittay’s describes a responsibility specifically for ensuring social support for care, it is also a responsibility that is shared with others. Young’s shared responsibility extends to all those who contribute with their actions to unjust social structures, while Kittay’s social responsibility, extends to those who form the larger social web surrounding particular caring relationships. On both descriptions many agents are bound to a common responsibility, and as such both descriptions involve an acknowledgement of how responsibilities are knit together in personal and social relations. Also, compared to the personal responsibility of neoliberalism, the scope of social and shared responsibilities extends broadly to social structures or political and social institutions. Kittay, for instance, uses her notion of social responsibility as part of her argument for a social welfare system that would ensure a fair compensation for care work (1999, p. 142-143). The scope of Young’s shared responsibility is even broader, transcending national borders and including all forms of structural injustices. Her notion of shared responsibility involves a personal responsibility for one’s participation in diffuse, complex and far-reaching social structures — so complex in fact that she argues it is impossible to trace the exact extent to which each agent’s actions con-

tribute to the unjust outcome. This is why Young maintains that shared responsibilities are only discharged through collective action (Young, 2011, p. 109-111).

There are some problematic aspects relating to Young's account of shared responsibility. As a consequence of it being a forward-looking responsibility where the aim is not to punish a guilty party for past injustice but to inspire to change, it seems culprits can "get away" with harmful actions. Demanding compensation, for instance, as a form of punishment for illegal activity seems important in order to set a principle for accepted conduct. It also ensures some form of acknowledgement and repayment to the injured party. However, Young's point seems to be that this is not *sufficient* for creating structural change. The required compensation on the guilty party would only work as a superficial remedy, though have no lasting effect on background causes. As long as the social connection model of justice is meant as a supplement, not a replacement, to the standard liability model, there seems to be no real problem here. As two complementary approaches, those found guilty of injustice in the liability sense would still be punished or required to pay compensation for the harm inflicted. Yet, those who inadvertently contribute to unjust structures would also be held responsible for creating change, although not directly to blame.

However, a further problem arises with Young's insistence that shared responsibility can only be discharged through collective action and that it is impossible to determine the exact degree of each person's contribution to unjust outcomes. As a result it seems practically impossible to go about creating change, because what one's responsibility actually amounts to seems vague and the prospect of collective action towards structural change seems completely overwhelming. Young acknowledges that the sheer enormity of having shared responsibility for all the structural processes we contribute to through our actions, is an overwhelming, even paralysing, prospect. Yet, she argues, not accepting such a responsibility on the grounds that it demands too much of us will allow us to complacently tell ourselves that we are doing enough and all that can be expected of us. Young suggests we instead move towards action (Young, 2011, p. 123-124). Nevertheless, the question of how we should move towards action is not satisfactorily answered by this response. The specifics of one's own degree and share of the responsibility still seems lost in the sea of all those contributing to the social processes that bring about the injustice. If it is impossible to determine the exact extent of each individual's contribution to the structural injustice, it seems contra intuitive that the notion of shared responsibility is a *personal* responsibility. There is a certain ambiguity in Young's discussion. On the one hand, she writes: "Because the particular causal relationship of the actions of specific individuals or organizations to structural outcomes is impossible to trace, there is no point in trying to seek redress from only and all those who have contributed to the outcome,

and in proportion to their contribution” (Young, 2011, p. 109). But she also mentions the intuition that different people bear different degrees of responsibilities, stating that: “Such differences, I suggest, derive in large measure from the social *positions* agents occupy in relation to one another within the structural processes they are trying to change in order to make them less unjust” (Young, 2011, p. 144, her emphasis). While the above quotations seem to pull in opposite directions, they also suggest that Young’s notion of shared responsibility is less vague and overwhelming than first implied. It seems clear that Young does not believe it is possible, nor useful, to divide a shared responsibility into exact individual portions as each person’s contributions to the injustice is, in her eyes, impossible to trace. Yet, it also seems clear that she nevertheless does think it useful to differentiate between degrees of responsibility of persons or groups and their abilities for creating change. This becomes clearer when she next moves on to discuss what she calls parameters for reasoning about a shared responsibility for change. I will discuss these in the following section.

### **Tools for Thinking About Responsibilities**

Young’s (2011) parameters for reasoning about the course of action towards change are tools for thinking about the shared responsibility for structural injustices. They include considering the parties’ social positions of power and privilege, the parties’ interest in change or status quo, and the collective ability of the parties to use already existing social groups as vehicles for change (Young, 2011, p. 144-147). Young suggests that social positions of power involve the actual or potential power to influence unjust processes, which imply that those in positions of power hold a greater share of the responsibility. She mentions how large multinational apparel corporations, for instance, may be appealed to in relation to unfair working conditions for garment workers. She explains, that while the multinational corporations may not be responsible in the liability sense for their suppliers, they may nevertheless have the power to pressure the suppliers to change their practices. Young points out that those who are in a position of power in relation to a structural injustice generally also gain some privilege from their position, and other less powerful groups will likely benefit from the structure as well. For example, Young mentions how middle-class consumers in the developed world are privileged in that they benefit from cheap clothing as the result of low production costs of low-income nations. Young argues that as beneficiaries of the structural process, the privileged bear a greater share of the responsibility to change the structure. Furthermore, as privileged beneficiaries the cost of creating change will likely not be so high for this group, as it might be for others (Young, 2011, p. 144-145).

Young also discusses how those who stand in positions of power or privilege often are not interested in creating change. Instead they may be interested in the continuation of status quo. She points out that while the powerful and privileged do not necessarily intend the injustice that results from the established structure, they may be reluctant to change it involve the loss of their benefits (Young, 2011, p. 147-148). Young's discussion here bears similarities to Tronto's (2013; 1993) notion of "privileged irresponsibility". Tronto describes privileged irresponsibility as a mechanism that allows relatively privileged groups to ignore certain responsibilities or certain hardships, simply due to their social positions. She sees this as a moral and political problem as it lets some individuals or groups shrink from responsibilities, which are then left to, or forced on, others (Tronto, 1993, p. 120-121; 2013, p. 58, 103-105). Thus, through Young's and Tronto's discussions we see the importance of considering power, privilege and differing interests in an analysis of responsibility. Young further argues for the importance of considering the interests of those individuals and groups who suffer from structural injustices themselves. She suggests that as these are likely to be most interested in creating change, they should also bear a share of the responsibility for bringing an end to the injustice they suffer. She mentions how low-income factory workers in the garment industry in part contribute to the structural processes that are unjust, simply by accepting unfair working conditions and low wages. Her point is to emphasise how those suffering under structural injustice should not be seen merely as passive victims. While she makes clear it should not be up to those suffering the injustice to alone create change, they should be the ones who call attention to the harm inflicted and voice what needs must be met (Young, 2011, p. 146-147).

### **A Care-Ethical Interpretation of Responsibility**

From the perspectives, themes and problems discussed in this chapter, certain features stand out as characteristic to a care-ethical interpretation of responsibility. I suggest the most important feature of a care-ethical interpretation of responsibility is that it is grounded in a relational ontology. As highlighted by Kittay's (1999) notion of social responsibility, caring responsibilities arise within relationships and meeting these responsibilities requires support from a larger social network. On her account, the obligation to care rests on the vulnerability of another person, but also on that person's prior relationship to oneself. Fundamentally, she grounds the entitlement to care in an acknowledgement of human relationships and human connection itself (Kittay, 1999, p. 25, 64-65, 107-109). As discussed in chapter two, the relational ontology of care-ethics is important in order to avoid paternalistic, dominant or overly self-sacrificing care. As Pettersen (2012) argues, a relational ontology characterises mature



care, which sets weight on reciprocity, dialogue, the ability to balance interests and the acknowledgement of each party's equal worth.

Seeing responsibility as grounded by the relational ontology of care-ethics, implies that responsibility is reciprocal, linked to a shared commitment and tied to a relational context. This does not necessarily mean that both, or all parties, in a relation are responsible for contributing in equal amounts. Rather, I suggest it implies that both, or all, parties are responsible in terms of being equally committed to the aim of the relationship and to it not becoming a harmful one. This interpretation resonates with Kittay's notion of a connection-based equality, as opposed to seeing equality as an equal exchange. As discussed in chapter two, Kittay also makes the point that while the person caring has a special obligation towards the person cared for, both are responsible for not letting the relationship become dominant or abusive (1999, p. 34. 66). The interpretation of responsibility as relational is also supported by Pettersen's (2008; 2011) proposal that the core normative values of care involve a balance between the principles of extended non-maleficence and restricted beneficence. Thus, a care-ethical interpretation of responsibility suggests an active commitment to the wellbeing of others and our relationships to them, while also acknowledging the limit to each individual's care resources. That an individual's care resources are limited rests on the fact that one person cannot alone care for everyone, nor can one alone sustain the care demands of a highly dependent person over time, without social support or access to material resources. The recognition of the limitations of an individual's care resources and the acknowledgement of the relational context of care, makes a care-ethical interpretation of responsibility open for distributing or sharing responsibilities through social networks or relational structures. This is explored in Kittay's (1999) discussion of a social responsibility for care, and her argument for a social welfare system that supports care and distributes care responsibilities. Engster (2007) similarly maintains that we are obliged to support care through social, political and economic institutions that distribute care in a wider social setting. Young's (2011) notion of a shared responsibility for structural injustice, takes the idea of shared and distributed responsibilities even further. Young's shared responsibility involves an acknowledgement of the interdependence of individual persons through social structures and it emphasises responsibility as an active commitment. Without forcing her ideas into the mould of care theory, I nevertheless suggest her analysis deeply resonates with a care-ethical approach to thinking about responsibility.

The care-ethical perspective is generally sensitive to the particular relational context of moral dilemmas. Yet, a particular relational context may stretch far into the social and political arena with relational structures that either foster or hinder care. Young's (2011) analysis addresses such complex structures, which may transcend the boundaries of the traditional

family unit, the local community or a nation's borders. While a care-ethical interpretation of responsibility would tie responsibilities to particular relationships or larger relational structures, what relationships to include in the scope of the responsibility would likely vary depending on the specific questions at hand. Moreover, instead of determining responsibilities on the basis of a few universal and absolute principles, a care-ethical approach will likely approach these questions through dialogue or public discourse. As each party is assumed to have equal worth and as the responsibility rests on a shared commitment and active engagement in maintaining or changing relationships, it seems important that each party has an opportunity to influence the process of responsibility setting. Like Young's (2011) parameters for reasoning about responsibilities for structural injustices, considering questions of power, privilege and interest seem important to a care-ethical process of assigning responsibilities. I suggest, each party's degree of dependence and vulnerability, and their additional care burdens, should also be taken into account. After all, questions of human dependence and the distribution of care responsibilities are recurring themes in care-ethics, present for instance in Kittay's (1999), Tronto's (1993; 2013) and Engster's (2007) discussions.

In sum I suggest a care-ethical interpretation of responsibility would rest on the relational ontology of care-ethics, which I see as entailing an emphasis on reciprocity through shared commitment and an active engagement in the wellbeing of others through one's relationship to them. It would entail that responsibilities are tied to, and shared within, relationships and relational structures. In assigning and determining responsibilities, each party's positions of power, privilege, interest and dependence should be considered. Further, it would involve a focus on the particulars of specific relational contexts, while at the same being aware of how background conditions and structures influence particular moral dilemmas. I therefore see a care-ethical interpretation of responsibility as somewhat flexible, both in being open to a dialogue in the process of determining and assigning responsibilities and in being able to alternative between the different perspectives of a narrow and a wide context.

Keeping these general features of a care-ethical interpretation of responsibility in mind, we can now move on to the more specific discussion of the moral responsibility of economic agents in the next chapter.

## CHAPTER FIVE

### MORAL RESPONSIBILITY IN MARKET RELATIONS

While the previous chapter focused on the reasons for accepting an appeal to care and examined a care-ethical interpretation of responsibility as social and shared, this chapter discusses the relevance of a care-ethical approach to responsibility for market relations. Could a care-ethical interpretation of responsibility extend all the way into economic markets? Could it justify holding economic agents morally responsible for their actions? I approach these questions by looking in detail at Engster's (2007; 2011) arguments for the moral responsibility of businesses. In "Care Ethics and Stakeholder Theory", Engster (2011) attempts to extend the notion of a social responsibility for care to include businesses' moral responsibility for certain groups that are especially dependent on the business's activities. He grounds this approach in what he sees as a fundamental link of dependence between business activities and caring practices.

Examining Engster's (2007; 2011) arguments is a useful starting point for discussing the problems and possibilities of a care-ethical justification of the moral responsibility of businesses, and by extension, the moral responsibility of economic agents in general. As I see it, the problem at the core of this discussion is that, as it is standardly assumed that the aim of economic activity is individual gain or profit maximisation, it is not obvious why or how these aims should be restrained by moral considerations. Furthermore, while it is not easy to grasp how economic agents in general should be held morally responsible, the moral responsibility of businesses seems an especially slippery concept. After all, businesses and corporations are not persons in the usual sense, but are made up of collectives of persons. A discussion of the moral responsibility of businesses therefore seems a good place to start for understanding the moral responsibility of economic agents in general.

In order to provide a context for Engster's (2011) arguments *for* the moral responsibility of businesses, I compare his position to Friedman's (1962 [2002]; 1970) rather well known arguments *against* businesses' social responsibility. While I see Engster's care-based business approach as an interesting starting point to the question of businesses' moral responsibility, I also discuss several potential problems with his account. The first relates to the problem of free riding on care, which I see as following from a weakness in Engster's underlying argumentation. The second relates to the question of businesses' moral personhood, which I sug-

gest can be successfully countered. The third relates to the standard business aim of profit maximisation. Here I suggest that the problem is not with the pursuit of profit in general, but with unrestrained profit maximisation. I end by suggesting that the main problem with Engster's account is that, contrary to his intention, it seems to interpret economic activity as a caring practice. I will instead set forth an alternative care-ethical argument for the moral responsibility of businesses that rests on the relational ontology of care-ethics and the normative values of care.

### **From Social Welfare to Business Responsibility**

As we saw in the previous chapter, Kittay (1999) and Engster (2007) argue for a social welfare system that provides and supports care in society. While the discussion in the previous chapter focused mainly on Kittay's reasons for distributing care responsibilities through a social welfare system, this chapter turns to Engster's account, which is more focused on the practical application. Engster (2007) sees it as following from our moral obligation to care that we should establish and support institutions, including economic institutions, that promote care in society. He then moves on to draw up a list of the economic principles and policies a caring government should implement. These include the general responsibility to ensure a sufficient level of economic productivity and a minimally fair distribution of economic resources in order to meet the population's needs for basic goods, like food, energy and infrastructure. His list also includes policies that are meant to ensure access to work, decent working conditions and social support for care. Specifically, he mentions access to work with fair wages and feasible work hours, and support and accommodation for care through sick leave, parental leave, and assistance for the unemployed. Finally, he also mentions individuals' entitlement to retain a portion of their resources to secure their own and their dependents' care needs (Engster, 2007, p. 123, 141-148). Engster thereby provides a practical framework for governmental regulation of economic institutions appropriate to a caring society. However, Engster (2011) goes further still with his proposal for a care-based approach to business. Through the following discussion, we will see that he uses the notion of social responsibility to support care, not only to justify the organisation and regulation of political and economic institutions, but also to justify businesses' moral responsibility. In effect, his project is to extend the scope of social responsibility for care from the individual, social and political levels right out to the economic sphere of business activity.

Before pursuing Engster's (2011) arguments for a care-based approach to business, I will first set the scene by introducing Friedman's (1962 [2002]; 1970) by now classic argu-

ments against businesses' social responsibility. Friedman's position involves a minimal interpretation of the social responsibility of businesses. As he states, in a free economy "[...] there is one and only one social responsibility of business — to use its resources and engage in activities designed to increase its profits so long as it stays within the rules of the game, which is to say, engages in open and free competition, without deception or fraud" (1962 [2002], p. 133). His position has become known as the stockholder theory, as it emphasises the responsibility of the business manager to the stockholders. A business manager, according to Friedman, has direct responsibility to the particular shareholders who own the business, and the manager is duty bound to run the business according to their aims. As he makes clear, the shareholders' aims are usually, though not necessarily, to maximise profits. On Friedman's view, the relation between the shareholders and the manager is a voluntary contractual agreement like that between employer and employee. The only constraints are that the manager keeps the business's activities "within the rules of the game", meaning in line with free market competition and in accordance with the law and ethical custom (Friedman, 1962 [2002]; 1970).

Stakeholder theory is often set up as an opposing position to the stockholder theory. With stakeholder theory the scope of businesses' responsibilities is broadened beyond their responsibility to the shareholders to include all those who have a "stake" in the business.<sup>21</sup> A business's stakeholders are generally thought to include its employees, suppliers, customers and the local community, in addition to the business's shareholders. However, other groups may also be included, like the business's competitors, special interest groups, the media or the government. In the *Stakeholder Theory: The State of the Art*, Freeman and his co-authors (2010) resist a definite description of stakeholders and argue instead for a pragmatic approach. They explain that on the stakeholder theory, the primary responsibility of a business is to create value for its stakeholders. They argue that the best way to do this is not by single-mindedly focusing on maximising profits, but instead by focusing on the business's purpose and its stakeholder relationships. Yet, they point out that the stakeholder approach is not in fact fundamentally opposed to Friedman's stockholder position. They see both approaches as aimed at creating as much value as possible for the business, and on both approaches this is seen as the main aim of business activity. The difference lies in how the aim of creating value is achieved and who this value is created for (Freeman et al., 2010, p. 10-12, 24-29, 206-211). On the stakeholder theory, the success of a business depends on its ability to build good relationships between stakeholders with shared interests and a common aim. The focus on rela-

---

<sup>21</sup> The origin of stakeholder theory is associated with R. Edward Freeman's (1984 [2010]) *Strategic Management: A Stakeholder Approach*, but see also Friedman and Miles (2006) and Zakhem et al. (2007) for an overview of the stakeholder literature.

tionships, shared aims and interests are features that clearly resonate with the general approach of care-ethics. Therefore, it is perhaps not surprising that Engster sees the possibility of combining a stakeholder approach to business activity with a care-ethical approach. Engster (2011) suggests that care-ethics could inform a stakeholder approach by providing a philosophical justification for why corporations have a moral responsibility towards their stakeholders, and further clarifying who the stakeholders are and how to prioritise among them. I will mainly focus on Engster's reasons for why businesses should have a moral responsibility in the first place, as this provides the basis for the whole approach. Which groups should count as the stakeholders and how they should be prioritised are of secondary concern.

### **Engster's Argument for the Moral Responsibility of Businesses**

Engster's (2011) argument for why businesses have a moral responsibility to support care rests on what he sees as a fundamental link of dependence between business activities and caring practices. His argument consists of two stages. First, he states that the most fundamental social and moral purpose of economic activity is to support human life. As he writes: "We farm, mine manufacture, transport, and buy and sell goods most fundamentally in order to produce and obtain the goods necessary for our survival and functioning" (Engster, 2011, p. 100). Caring, on his view, involves using the goods and resources made available through business activities to caring ends, which on his view means directly to support human survival and functioning. As examples he mentions that when we use food as nourishment or clothes for cover and protection, we are involved in caring (Engster, 2011, p. 100-101). He elaborates on this point in *The Heart of Justice*, stating there that productive work provides us with the resources necessary for care and as such, "[...] commodity production may be said to be most fundamentally oriented around the moral goal of supporting human caring" (2007, p. 119-127). The second stage of Engster's argument is that he sees the existence of business activities themselves as depending on care. He points out that caring activities are necessary for the reproduction of human life and society, including business activity itself (Engster, 2011, p. 100-101). In *The Heart of Justice* he writes: "Caring practices sustain and replenish workers so that they can engage in commodity production, prepare children to enter the work force, and help temporarily sick and disabled individuals to return to work" (Engster, 2007, p. 117).

In sum, Engster's position is that businesses have a moral responsibility to support caring practices. His argument is that as the fundamental purpose of business activity is to support care and as business activity itself fundamentally relies on caring practices for its own existence, so businesses should in turn acknowledge their responsibility to support care. Thus,

Engster (2011) concludes, when business activity hinders caring practices, this in fact undermines the internal moral and social justification of business activity itself. He writes: “If the fundamental moral and social purpose of business activity is to support caregiving, then it would seem wrong by the moral and social logic of business activity itself to engage in activities that controvert this goal” (Engster, 2011. p. 100). In short, Engster’s argument is that businesses have a moral responsibility to support care because not only do caring practices fundamentally depend on resources being made available through economic production, but also business activity itself fundamentally relies on background care for sustaining, maintaining and reproducing the human resources necessary for business activity.

However, Engster’s argument is not without its problems. In the following I will look at three objections to his position and use this as the basis for a general discussion of the problems and possibilities of justifying the moral responsibility of businesses. I will finally summarise what I see as the essential problem at the heart of Engster’s position, and propose an alternative care-ethical reading.

### **The Problem of Free Riding on Care**

The first objection to Engster’s argument is that even if it is true that business activity relies fundamentally on practices of care for its existence, yet, one may argue, this is only at the very general level of all human activity fundamentally relying on caring practices for its existence. While one may accept that society and humanity in general depend on care, the question remains why any particular business should accept responsibility for supporting such general care. Why should a business not free ride, benefiting on others’ care work without contributing to the care of others? The problem of free riders is especially difficult to tackle in relation to businesses. If the primary aim of businesses is to maximise profits and free-riding helps them do just that, then it seems logical that businesses both would and should free ride whenever that yields the highest profits.

Engster does not discuss the problem of free riding. However, in my opinion Engster’s best hope for countering this objection would be to appeal to his initial argument for the moral obligation to care. As discussed in the previous chapter, Engster (2007) argues that because we implicitly value care as a necessary good due to our dependence on care for our survival and functioning, so we are implicitly stating that those capable of caring *ought* to care. If we then fail to recognise that we in turn are morally obliged to care for others, we are, according to Engster, not only involved in a logical contradiction but also undermining the web of caring relationships that make our own lives and society as a whole possible. He next extends

the moral obligation to care directly for others to a social responsibility for indirectly supporting care through social and economic institutions that foster a caring society (Engster, 2007, p. 46-49, 123). Engster could attempt to meet the objection that businesses would free ride on background care, by transferring his argument for the moral obligation to care to the case of businesses. This seems to be his intention, as he states that business activities that hinder care are in fact undermining their own internal social and moral justification by depleting the social structure of care that made their existence possible in the first place (2011, p. 100-101). Engster could then argue that in the long run it is not sustainable for businesses to withhold support for care because this means depleting the pool of care resources while adding nothing to it. While the human and social resources made available through caring practices are not perhaps in immediate danger of being “used up”, this is only due to the fact that many persons nevertheless *do* care. Engster might argue, as Kittay (1999) and Tronto (2013) have done, that when the work involved in caring goes unnoticed and its value unacknowledged, the result is an unfair distribution of care work. For instance, as we saw in chapter three, Kittay (1999) argues that those burdened with considerable care responsibilities are not on an equal footing with others in the competition for goods in the market. Similarly, Engster might argue that it is morally wrong for businesses to disregard their responsibility to support care because they are then reaping the benefits of others’ care work while not acknowledging, or supporting, the efforts of the carers.

However, again there are problems with my proposed defence of Engster’s account. The argument has now turned into an argument about fairness: It is not fair that businesses free ride and use the resources made available through caring practices without supporting caring practices in turn. Yet, why should businesses care about fairness? This already assumes that businesses do in fact acknowledge a moral aim beyond the standard business aim of maximising profits, which in this case involves the moral framework of justice. What is lacking in my proposed defence of Engster’s account is an argument for why businesses should acknowledge a moral framework and an accompanying moral responsibility in the first place. According to Engster, as we saw above, businesses that fail to recognise the moral responsibility to support care undermine their own existence. This could also mean that businesses thus undermine the internal *reason* for their existence. If, as Engster suggests, the fundamental purpose of business activity is to support caring practices, then it follows that business practices that hinder care are involved in a logical contradiction. But again, this already assumes that the fundamental purpose of business activity is to support care — which is precisely the question up for discussion. Furthermore, if it is true that the fundamental aim of business is to support care, how does this relate to the standardly assumed business aim of profit



maximisation? Does the fundamental purpose to support care trump the profit aim? If so, the question is when and why.

It seems reasonable that business activity fundamentally relies on caring practices for its existence in the very general way that all human activity relies on caring practices. Nevertheless, an acknowledgement of this fact seems too weak to bind any particular business to a moral responsibility to support care in turn. An additional argument based on fairness is needed. Furthermore, Engster does not make it clear when the general responsibility to support care should trump the standard business aim of profit maximisation. Thus, I suggest the problem of free riding points to an underlying weakness in Engster's argumentation.

### **The Problem of Businesses' Moral Personhood**

The second objection to Engster's argument for the moral responsibility of businesses relates to the notion of the moral personhood of businesses themselves. One might accept that persons are bound by a moral obligation to care and a social responsibility to support care, yet it does not necessarily follow that this form of responsibility also applies to businesses. One could point out that the care-ethical notion of social responsibility, in line with Kittay's (1999) principle of *doulia* and Engster's (2007) arguments for supporting caring social institutions, is a responsibility held by individual persons, albeit individual persons together. With regard to businesses, the question is on whom or what precisely this social responsibility should fall. Should one, for instance, see the business as a collective of individual persons or as an entity in its own right? Or is it the business executive or the shareholders who bear this responsibility? Friedman (1970) questions the notion of a social responsibility of business on precisely these grounds, arguing that only persons have responsibilities and pointing out that corporations are not real, but merely artificial, persons. Friedman concludes therefore that if businesses do have social responsibilities, these must lie with the corporate executive. He continues: "As a person, [the corporate executive] may have many other responsibilities that he recognises or assumes voluntarily — to his family, his conscience, his feelings of charity, his church, his clubs, his city, his country. [...] If these are 'social responsibilities', they are the social responsibilities of individuals, not of business" (Friedman, 1970). Friedman's point is that corporate executives, as private persons, may have many and varying responsibilities. In their roles as corporate executives however, they are responsible only to their employers, namely the shareholders. Engster (2011), in turn, is unhelpfully vague in his discussion of a care-based business approach with regard to who or what precisely is bound by the responsibility to support care. He writes, for instance, that "businesspeople" should take into account

the impact of their actions on people's ability to care; he mentions how "business activity" and "business practices" can be judged moral or immoral; and he writes interchangeably of the "firm's", the "employer's" and the "manager's" obligations to certain stakeholders (Engster, 2011, p. 100-104).

Nevertheless, I suggest it is possible to make a successful argument for the moral personhood of businesses, based on a care-ethical approach. Consider again Friedman's argument against the social responsibility of businesses. As we saw at the beginning of this chapter, he argues that the one and only social responsibility of businesses is generally to maximise profits as long as the business's activities stay within the rules of the game. By this he means that businesses should avoid deception and fraud, and adhere to the law and ethical custom (Friedman, 1962 [2002], p. 133; 1970). He writes: "[The executive] has direct responsibility to his employers. That responsibility is to conduct the business in accordance with their desires, which generally will be to make as much money as possible while conforming to the basic rules of society, both those embodied in law and those embodied in ethical custom" (Friedman, 1970). Friedman's view is clear: The notion of a business's responsibility only makes sense in terms of its executive's responsibility to the shareholders, and shareholders generally expect the executive to maximise the business's profits. Note, however, that in effect Friedman's argument presents both the possibility of businesses bearing some kind of responsibility and the possibility that the standard business aim of profit maximisation should be restrained to some extent. I will discuss these possibilities in what remains of this section.

When Friedman states that the business executive bears a responsibility only to the business's shareholders, he is in fact stating that the business executive bears responsibility for the business's activities in ensuring as high profits as possible. Thus, it need not be thought impossible or absurd for the business executive to be held responsible for the business's activities as such. The question is what kind of responsibility the executive holds, and to whom the executive is accountable. I believe Friedman is mistaken when he makes a clear division between the business executive as a private person holding many voluntarily assumed responsibilities, and the business executive in the role as executive holding only a responsibility to the shareholders. I argued in the previous chapter that a care-ethical interpretation of responsibility would not rest on the assumption that responsibilities are simply voluntarily assumed commitments. Instead, the emphasis would be on the relational context of responsibility. Therefore, the weight of others' claims on us would in part depend on whether the relationships or larger relational structures we are already part of renders us especially responsible to them. In line with Young's (2011) analysis, this would depend on the parties'

differing positions of power, privilege or interest, but I also suggested the degree of dependence of each party and their share of care burdens would be important. From a care-ethical perspective, then, it seems odd that the role of executive automatically absolves her from all responsibility apart from that to the shareholders, while her role as a private person may include several responsibilities as voluntarily assumed commitments. Friedman's position implies that the responsibility of the executive to the shareholders is a strong, binding and non-negotiable type of responsibility, and one that overrides all other potential responsibilities. It also implies that the private person's responsibilities to family, country or conscience are weaker forms of responsibility or even optional commitments. The reason for this distinction seems to rest only on the different roles the person has as executive or private person, though no argument is given for why this difference in roles is of importance.

By contrast, a care-ethical perspective would see the degree, type and weight of responsibility as grounded in the relational context of the person. It would then seem reasonable that the executive bears some responsibilities to the employees, for instance, in addition to the shareholders, as the employees are crucial to the joint venture that the business in fact is. Without employees there would be no business. Though, without shareholders and without an executive there would likely not be a business either. Thinking about responsibility in terms of relationships would involve recognising that the executive, shareholders and employees are all tied to a common relational structure by their contributions to the purpose, aims and activities of the business. It would also entail some degree of reciprocity between the parties. So, while it seems reasonable that the business executive bears an important share of the responsibility for the business's activities, a care-ethical approach would not see the executive as bearing this responsibility alone. The employees and shareholders are also likely to bear a share of this responsibility, as they too are involved in the business's activities, may have some degree of influence over decisions relating to the business, and may have a common interest in the business's purpose and projects. Therefore, I suggest that we think of a business's responsibilities along the lines of Young's (2011) notion of shared responsibility discussed in the previous chapter. Young described the responsibility for structural injustices as shared between all those who contribute to the social processes that bring them about. Similarly, the responsibility of a business could be seen as shared between all those who partake in the business's activities and have a common interest in its purpose and aims.

However, when leaning on Young's (2011) analysis here, two concerns immediately arise. One is that Young clearly states that her notion of shared responsibility is not the same as a collective responsibility, as sometimes applied to corporations. She argues that the problem with collective responsibility is that it may hold the corporation responsible without any

of the persons working for it being held personally responsible. She emphasises that her notion of shared responsibility is one that each person personally bears, albeit together with others. The other concern relating to Young's analysis is that she is sceptical to the idea of delineating the exact contribution to the unjust outcome made by each party, maintaining that this form of responsibility is in essence shared and discharged only through collective action (Young, 2011, p. 109-110). In relation to determining the moral responsibility of businesses, I suggest we should accept Young's insistence that a shared responsibility is one that we each personally bear, but I would maintain that the share of each person's responsibility should, as far as possible, be determined. Thus, it should be possible to avoid the problem that the specifics of each person's share of the responsibility disappear in the sheer enormity of the whole relational structure. It should be possible to determine, at least to some extent, the degree of each person's responsibility for the business's actions by considering their positions of power and influence within the corporate structure, their privilege through the business's activities, their interest in changing or maintaining the business's aims or the business culture, and their dependence on the business's activities. It seems possible then to apply Young's (2011) notion of shared responsibility to the case of businesses by interpreting businesses as relational structures. All those who partake in the business's projects and have a shared interest in its purpose, also share the responsibility for the business's activities, though possibly to varying degrees.

In the previous chapter I further argued that a care-ethical interpretation of responsibility would imply an ability to approach the question of responsibility from different angles. This follows from the general care-ethical focus on the particular relational context of moral problems, while also looking to the background causes manifested in larger social and political structures. Thus, as I see it, the care-ethical approach involves balancing and shifting between a narrow and wide relational perspective. With regard to determining the responsibility of businesses, a care-ethical approach might then open for alternating between views on the personhood of businesses. I argue that while it should be acknowledged that all those who partake in the business's activities bear some share of the business's responsibility, a care-ethical approach should also be able to recognise that a business is more than the collection of people working in it any point in time. A business is also an entity in its own right, with assets and liabilities, a brand identity, a purpose, a history and a culture. While these are characteristics that evolve and change over time and through the influence of those working within the business, they are nevertheless features of the business itself not the specific group of people working there. The business as an entity in its own right may hold a position of power and influence, for instance through its brand identity, its market share or the value of its assets,

that stands apart from the power or influence of the group of people contributing to the business's activities at that time. Therefore, I see it as important that a business should also be held accountable in the standard liability sense, as recognised in the legal notion of an artificial person. In sum, I see it as possible to challenge the objection that questions the moral personhood of businesses. Businesses can be held morally accountable, in part through the shared responsibility of all those individual persons who partake in the business's activities, and in part by the artificial person of the business as an entity in its own right.

Let us then move on to the possibility of restraining the standard business aim of profit maximisation. When Friedman states that businesses should keep their activities within the law and in accordance with ethical custom, he argues in effect that the profit aim both can and should be restrained. The question, then, is where to set the boundaries of restraint. While the law ideally reflects a widely accepted and morally justified view of right and wrong, nevertheless it will likely not be a perfect representation of morality. In consequence, adhering to the law alone demands too little, as the law may be incomplete and leave loopholes that make some unethical activities legal. As many businesses now operate in global markets, this becomes even more apparent as the law varies significantly among nations and regions. One example is the avoidance of corporate tax by moving part of a business's activities to a tax haven, a loophole that many businesses are ready to take advantage of.<sup>22</sup> While such activity would be in line with the standard business aim of profit maximisation, it involves significantly reducing the business's contribution to public welfare through taxation and would be considered by many unethical. On the other hand, adhering to the law alone may also demand too much if the law itself is morally questionable, for instance if it involves discrimination of certain groups. Furthermore, the requirement that businesses adhere to ethical custom is also problematic. Ethical custom varies between different cultures and regions, and again, custom is not the same as a justified moral position. Thus, while Friedman sees the appropriate restraints on profit maximisation as the limits of law and ethical custom, I see this as an arbitrary and ill justified place to draw the line. Instead, I will argue that the appropriate boundaries for profit maximisation should be determined by the normative values of care-ethics.

### **The Problem of Profit Maximisation**

The third objection to Engster's (2011) argument for the moral responsibility of businesses is one he briefly discusses himself. According to this objection, even if one accepts for the sake

---

<sup>22</sup> See, for instance, Richard Brooks's comment in *The Guardian*, 5 November 2014: "Havens like Luxembourg turn 'Tax Competition' into a Global Race to the Bottom".

of argument that businesses should support care, it could still be maintained that the most efficient way to do so is by single-mindedly pursuing the aim of profit maximisation, as this would generate the greatest supply of resources (Engster, 2011, p. 101). In part this objection rests on the empirical question of whether a single-minded pursuit of profit maximisation in fact yields the greatest profit. This seems to be the general approach of stakeholder theory, as it is argued here that while the aim of businesses is to create as much value as possible, the best way to do this is by building solid stakeholder relationships (Freeman et al., 2010, p. 10-12). In part the objection rests on the question of a morally justified distribution of resources, and in particular the resources necessary for care. Would a single-minded pursuit of profit lead to an efficient distribution of care resources? Would this distribution be fair?

Again, I see this objection as a variation of Friedman's argument for the minimal interpretation of the social responsibility of businesses as solely to comply with the shareholders' aim of maximising profits. With reference to Adam Smith, Friedman argues that the general good of society is most efficiently attained through individuals' pursuit of their own interest, though he adds that it is the responsibility of the rest of us to establish a framework of law that makes this feasible (1962 [2002], p. 133). Friedman's reasoning is that if a business manager were to take some of the corporation's resources and spend them on charitable projects that lie outside the business's realm, the manager would actually be taking resources that belong to the shareholders, the employees or the customers. Friedman argues that in effect this would be the same as if the manager were to claim taxes and single-handedly decide how to use the tax revenues. Friedman concludes that it should not be up to the business manager, but a democratically elected official, to decide where and how to distribute society's resources. As a final point he argues that if the manager uses some of the corporation's resources on what looks like a charitable project but in fact yields a profit in the long run, then these are actually investments that are in the business's own interest (Friedman, 1970). Note that Friedman's argument implies that the business manager faces two opposing options: either to pursue maximum profit, which is in the business's self-interest, or to pursue unprofitable charitable projects in the name of social responsibility. Thus, Friedman makes use of the dichotomy of self-interest and altruism, which I argued in chapter three is characteristic of market thinking. Friedman is then able to ridicule the very notion of a social responsibility of business, by equating this responsibility with unprofitable, altruistic charity. Yet, from a care-ethical point of view the dichotomy of self-interest and altruism is neither very useful nor a correct representation of reality. It ignores how persons through their relationships may have common interests and shared aims. From a care-ethical point of view, there is no logical con-

tradition in a business pursuing projects that in the long run are profitable to the business but are also in the interests of some other groups or institutions.

Furthermore, it is implied through Friedman's (1962 [2002], 1970) discussion that profit maximisation means maximised shareholder value. This follows from his reasoning that the business manager is only responsible to the business's shareholders, who again are usually interested in maximising profits. Consider the proposition that businesses should aim at maximised shareholder value in light of the initial objection that the most efficient way businesses can support care is to make available the greatest amount of resources through profits. While the maximisation of shareholder value might generate the largest net total value, there is no reason to think that the shareholders are the only ones in need of resources for care, or indeed those most in need. The efficiency of supporting care through the pursuit of profit depends largely on the distribution and use of the value created. In practical terms, this would depend on the levels of private and corporate taxation, and also on the business's own decisions concerning its investments, the projects it pursues, and the levels of wages, bonuses and returns to its employees and shareholders. While Friedman may be right that the details of the tax system are the responsibility of democratically elected politicians and public officials, it still does not follow that businesses are automatically excluded from all forms of moral responsibility. In particular, it does not follow that businesses are justified in pursuing profits at all costs, nor that the principle share of a business's profits should go to the shareholders.

In effect, Friedman's position is in line with Tronto's description of the "responsibility passes" characteristic of the neoliberal interpretation of responsibility (2013, p. 58, 117-119). This is perhaps not too surprising considering that Friedman is well known as a neoclassical economist positioned on the political right. However, from a care-ethical point of view, Friedman's argumentation is problematic as it allows businesses to disregard any responsibility beyond that of maximising profits and shareholder value. It involves the claim that as business activity is only about profit maximisation and as social responsibility is only about unprofitable charity, businesses cannot pursue social responsibility. Using Tronto's terms, businesses are in effect granted a free pass out of responsibility by dint of the overriding business aim of profit maximisation. Yet, no solid argumentation is provided for why this business aim is justified in overriding all other moral considerations. Similarly, the initial objection that support for care is best achieved through profit maximisation also involves a responsibility pass. It involves the claim that, as maximising profits makes the most resources available, businesses need not consider any further moral responsibility. The problem is, of course, that this approach does not ensure a fair distribution of resources. Nor does it ensure that the resources made available through business activity are used to support caring practices.

Engster (2011) attempts to counter the objection that maximising profits is the most efficient way of making care resources available, by referring to a set of principles he has established for prioritising between different subjects in need of care. According to these principles, we are justified in giving priority to: those who are in close proximity to ourselves, those who we stand in a close relationship to, and those whose needs are most urgent. He points out that the need for prioritising care rests on the fact that a person's caring resources are limited and that no one will be able care for everyone. Engster acknowledges that the three principles may come into conflict with each other as they pull in different directions, and so he maintains that much still depends on the specifics of the situation at hand. He nevertheless sees them as providing general guidelines for the prioritisation of care resources. Engster therefore concludes that disregarding the question of whether the pursuit of profit maximisation leads to the greatest net total of resources, businesses are generally required to care first for those who stand in close proximity to them and those most dependent on their activities. He states that when the pursuit of profit directly hinders the ability to care for these groups, it violates caring values and is therefore morally wrong (Engster, 2011, p. 98-100; 2007, p. 56-58). Without going into the details or examining the soundness of Engster's set of distributional principles, the main question of interest for the discussion here is why, or to what extent, the pursuit of profit is morally wrong in the first place. If, as Engster suggests, a single-minded pursuit of profit involves a morally wrong prioritisation of care resources, does he mean that the pursuit of profit is always wrong? I am fairly certain that he does not. After all, part of his initial argument for holding businesses morally responsible is that caring practices depend on economic resources being made available through business activity (Engster, 2007, p. 119-127; 2011, p. 100). Businesses cannot be expected to give up the pursuit of profit. The viability of any business requires that its costs do not consistently exceed its revenues. Profits ensure some flexibility above the minimum requirement of solvency, providing the business with an opportunity for growth and development. As I see it, the question is not whether the pursuit of profit in itself is acceptable, but rather whether an unrestricted pursuit of profit maximisation is morally acceptable. Furthermore, one should ask which groups or individuals in fact benefit from the business's profits.

According to Engster's (2011) care-based stakeholder approach a business has a special responsibility to its main stakeholder groups of shareholders and employees, as he sees both groups as depending directly on the business for resources necessary for their own care and caring activities. While consenting that few shareholders will go hungry without their annual return from a particular business, Engster still argues that many investors generally depend on their investments as income, pension or insurance. The business's responsibility to



its employees involves paying at least a living wage, allowing them adequate time away from work to care for themselves and their dependents, ensuring a safe and healthy work environment, and providing work that does not undermine their basic capabilities. Apart from the responsibilities towards shareholders and employees, Engster sees the business as also having limited, secondary responsibilities to its customers and the local community. This involves not harming the local environment, and acknowledging the investment of local communities in terms of tax incentives, or access to land and infrastructure. In relation to its customers, a business is responsible for providing safe products and truthful information (Engster, 2011, p. 101-106). Thus, on Engster's stakeholder account, the business manager acting on behalf of the business would need to balance her responsibility to the shareholders with her responsibilities to the other stakeholder groups. The distribution of the business's profits should then reflect an acknowledgement of all the stakeholders' interests and needs. Engster (2011) sees it as the general aim of the business executive to promote the continuation and success of the business. He further states that the goal of business survival has high priority. Within the limits of this first goal, he sees the business executive as responsible for ensuring a fair balance between the interests and needs of the stakeholder groups. This would entail, among other things, providing a fair return for shareholders, paying workers at least a living wage, ensuring a safe and healthy work environment and giving the workers sufficient time off to meet their care responsibilities. However, Engster also acknowledges that the general aim of business survival may come into conflict with the business's responsibilities to its stakeholder groups. In these cases he proposes that maintaining jobs, for instance, should generally be prioritised over profits and returns for shareholders. Still, he makes it clear that at some point the business's solvency would set a limit to the business's options. In the long run, cutting back on costs may be necessary for the survival of the business. Engster concludes that while the overall aim of business activity is to ensure the success and survival of the business, the interests and needs of the stakeholder groups generally weigh more. Thus, he states that when the pursuit of profit directly impedes the caring practices of those in closest proximity to the business's activities or those most dependent on them, the business is committing a moral wrong (2011, p. 101, 105).

From Engster's discussion it is fairly clear that the pursuit of profit itself is not the problem. Rather, the key issue is the prioritisation of stakeholder groups in relation to the standard profit aim. I have argued that the proposition that profit maximisation would be the most efficient way for businesses to support care involves a responsibility pass in line with Tronto's (2013) analysis. I find no justification, on Friedman's account, for why the standard business aim of profit maximisation should override all other considerations. Yet, neither do I

find a solid justification on Engster's account for why support for care should take the lead as the main purpose of businesses. Engster's argument for why the responsibility for stakeholders should be prioritised over profits is that: "Since the firm exists at root to promote the survival, health and functioning of its stakeholders, any action that directly infringes on these goods falls outside the scope of moral business activity" (Engster, 2011, p. 105). In short, the fundamental purpose of businesses is to support care in general, and to support the caring practices of its stakeholder groups in particular. Thus, we are again at the core of Engster's argument for the moral responsibility of businesses.

### **The Root of the Problem**

The viability of Engster's whole stakeholder approach rests on his initial argument that business activity fundamentally relies on care, and that the fundamental purpose of business is to support care. The problem of free riding addresses the first claim, pointing to the difficulty in making any particular business accept a general obligation to support of care without relying on an additional argument from fairness. However, Engster's second claim, that the fundamental purpose of business activity is to support care, is also problematic. Engster states that economic production provides us with the resources necessary for care, like food, raw materials, wages and others goods, and thus he sees economic production as fundamentally oriented towards the goal of supporting care (2007, p. 123). Engster makes the important point that caring is not a self-sustaining activity, but relies crucially on the availability of a range of goods, the economic prosperity of society at large, and not least the distribution of economic resources. This, then, is a similar argument to Kittay's (1999) principle of *doulia*, which emphasises the importance of social support for those who have caring responsibilities for others. Kittay shows how any particular caring relationship is dependent on, and deeply interconnected with, the broader social community it is part of. While Kittay argues for the recognition of the social value of care, and uses this as the basis for an argument for social welfare, Engster (2011) wants to argue for the moral importance of care for business activity. Part of the problem with Engster's account is that, although it is certainly clear that caring practices rely on commodities being made available from economic production, many commodities are nevertheless not used for caring aims. Unsustainable consumerism and warfare are activities that equally depend on commodities being made available through economic production, though I would maintain they are not caring activities. The question is in what way Engster sees business activity and economic production as fundamentally oriented towards supporting care.

According to Engster (2007), caring involves directly helping individuals to meet their biological and developmental needs. He states that economic activities may be indirectly aimed at supporting care, but they usually have other more direct aims, like growing, harvesting, manufacturing, shipping, selling, and so on. As discussed in chapter two, Engster differentiates between caring and non-caring activities with reference to their direct aims. As he sees it, the test question is whether the activity could be successfully completed without meeting the direct aims of caring. As examples, he mentions that the tomato farmer's immediate aim is growing tomatoes, the truck driver's immediate aim is to transport the tomatoes to the canning factory, and the restaurant chef's immediate aim is to prepare meals. While the farmer, truck driver and chef are all indirectly working towards the ultimate aim of producing food which is a resource necessary for caring, Engster maintains that their efforts usually do not directly depend on whether the prepared meal is in fact eaten. Engster concludes that economic production can be caring or non-caring depending on the activities' direct aims. Yet, he also states that the fundamental purpose of most economic production is to support caring practices (Engster, 2007, p. 121-123). This suggests that when we peel away the most immediate aims of economic production, like harvesting, producing, transporting, selling, and so on, the fundamental or underlying aim of most economic production is nevertheless to support care.

I argued in chapter two, that Engster's reliance on a clear distinction between direct and indirect aims would in practice be difficult to uphold. The difference seems especially diffuse in relation to commodity production on a large scale. For example, in a large-scale production line, the concrete activities at each stage may have direct aims like "attach this part to that", "sew this seam", "design the packaging" or "create a program that will calculate an efficient transport route". These activities may together result in the production of medical tents that are sent to regions in conflict or hit by natural disasters, and as such they would be used to support the work of meeting urgent care needs. The tents would then be commodities important to the care work of the doctors, nurses and volunteers on the ground. On the other hand, a batch of these tents could just as well be sold as party tents and used for activities unrelated to care. The point is that whether an activity's aims are seen as direct or indirect depends in part on what perspective one views the activity from. From a broad macro perspective the production of medical tents seem caring, while the production of party tents seems non-caring. Yet, the direct aims of the activities at each stage of the production of the tents may be exactly the same in both cases. From a narrow micro perspective, the activity of producing the tents seem unrelated to their end purpose or use. The specific activity of sewing a seam, for instance, is successfully completed once the seam has been properly sewn. To me it

seems that the determination of the direct or indirect aims of an activity would vary according to the perspective from which it is viewed. Thus, I am sceptical to Engster's approach to differentiating caring and non-caring activities.

However, the main problem is that Engster's (2007) argument apparently involves two contradictory propositions. On the one hand, he states that the *fundamental* purpose of business activity and economic production is to support care. On the other hand, he defines caring activities as those *directly* aimed at caring. The problem is that Engster uses the distinction of direct and indirect aims as the defining characteristic of caring activities; this is what differentiates caring activities from others. Yet, his notion of the fundamental purpose of an activity needs to be solid enough to give weight to the argument that businesses have a moral responsibility. For, as Engster argues, the moral responsibility of businesses rests in part on their fundamental purpose to support care. Thus, he seems to be stating that economic production is not in general directly aimed at caring, while at the same time maintaining that economic activity is fundamentally oriented towards caring. Engster presumably wants to exclude economic production from his definition of caring practices to avoid the same problem that Tronto (1993; 2013) faces with her broad definition of care. If the definition of caring practices is stretched too wide then the meaning of care is washed out. Contrary to his intentions, however, Engster's account is vulnerable to the same criticism. It seems to follow from his reasoning that economic activities are caring activities. Otherwise, how could the fundamental purpose of economic activity bear any weight in a claim for the moral responsibility of businesses? Alternatively, if Engster's proposition means that economic activity is not caring, the justification for his care-based stakeholder approach to businesses' responsibility is at risk of crumbling altogether.

If economic activity *is* in fact a caring practice, and economic relations *are* caring relationships, then it makes sense that these activities and relationships should be guided by the values and aims of care-ethics. While this line of thinking would give meaning to the idea of businesses having a moral responsibility for care, it is in other respects a problematic approach. From a care-ethical point of view, the problem with such a broad definition of care is that it would encompass activities like the production, distribution and sale of goods, and various financial services like banking, market analyses and financial trade. Caring would then include activities relating to objects, both physical and abstract. As I mentioned in chapter two, I see the relational ontology of care-ethics as demanding at least a living connection, as the relational aspect depends on some degree of reciprocity, communication and shared commitment through a relationship. The proposition that economic activities should be seen as caring practices would likely be hard to swallow for business people too. It would involve

exchanging the standard business aim of profit maximisation — or alternative business aims like producing quality goods, providing innovative solutions or meeting customer demands — with the core values of care. As I also suggested in chapter two, caring practices should be informed by the principles of extended non-maleficence and restricted beneficence, as Pettersen (2008; 2011) argues. While caring involves an active commitment to do good and avoid causing harm, care should also involve a balance between the interests of each party and an acknowledgement of the potential harm involved in neglect or ignorance. Completely replacing economic aims with the values of care would seem to demand too much of business activity.

I suggest that economic activities and relations should not be interpreted as caring practices and caring relationships. Such an equation would seem to demand too much of economic activities, and too little of the definition of care. I see this as the main problem with Engster's argument for the moral responsibility of businesses. However, I still believe that care-ethics can provide an argument for the moral responsibility of businesses, and of economic agents in general. In the following section I propose an alternative care-ethical reading that rests on the relational ontology of care-ethics and appeals to the normative values of care.

### **An Alternative Care-Ethical Argument**

At the heart of the discussion of moral responsibility, I see two fundamental questions: First, can economic agents be held morally accountable for their actions, in the sense of having a moral personhood? Second, if economic activities are not caring practices, then why should they be informed or restrained by care values?

I argued in chapter three that the apparently deep-seated notion that economic agents and economic considerations lie outside the realm of ethics is in fact not well grounded. It rests on what I see as an implicit normative standard present in market thinking. With market thinking the standard assumptions of economic theory have been transformed from tools for descriptive analysis into an implicit normative proposition for acceptable economic behaviour. Thus, the assumptions that economic agents are driven by rational self-interest and pursuit of individual gain have acted both as an explanation and an implicit justification for ignoring moral considerations in economic decision-making. As a consequence, economic agents are not generally *expected* to take moral considerations into account. As I see it, the implicit normative standard of market thinking has in effect given economic agents a free pass out responsibility, as Tronto (2013) might have put it.

I argued in chapter three that economic activity does not belong to a sphere separate from the rest of human life, but is influenced by social values and norms, and often also has a real impact on people's lives. Recognising that economic activity rests on human decision-making and that businesses are human-made institutions should lead us to acknowledge that economic agents are generally not abstract entities, but ordinary persons. Economic agents are precisely the persons who bear the roles of employers, employees, consumers, business leaders, shareholders, or investors. In their economic roles they may be concerned with various economic aims, have differing or shared economic interests, and engage in economic decision-making of various sorts. Yet, there is no reason to assume that these roles in themselves automatically absolve them from all form of moral responsibility or accountability. As human beings it is reasonable that employees, consumers and business leaders are held morally accountable for their actions. Furthermore, in their roles as employees, consumers or business leaders, they will likely be driven by a plurality of motives and feelings. While it may be true that rationality and self-interest are present in many settings of economic decision-making, research in the field of behavioural economics has found that reciprocal motives are generally just as common. Either way, the motives people actually display in different decision-making settings, says little about the motives or reasons they *ought* to have followed.

On the other hand, it is true that the notion of economic agents does not merely describe individual persons in their roles as employees or consumers, but also encompasses economic institutions like businesses. Determining the moral personhood of businesses is more troublesome, as a business consists of many individual persons, and moreover seems to be an entity in its own right. However, through the discussion in this chapter, I have suggested that a care-ethical approach would take both these considerations into account. Acknowledging that businesses are human-made structures would open for an interpretation of business responsibility as shared between all those who partake in its activities and have a common interest in its purpose. Thus, from this angle, a business is interpreted as a relational structure that binds many individual persons to a shared responsibility for the impact of its activities. Thinking about businesses' responsibility in terms of shared responsibility represents one approach to the question of businesses' moral personhood. While businesses are certainly human-made institutions and structures, they are also something more than the collection of individuals that partake in the businesses' activities at any point in time. Recognising that businesses may have power, influence and interests through the value of their assets, brand identities or market positions, should make it clear that businesses are also entities in their own right. Therefore, I argued that the legal notion of an artificial person is important as it works as a means to hold businesses accountable for harm inflicted in their name.

In sum, businesses' moral personhood could be approached from two different angles. On the one hand, businesses could be seen as relational structures where all those who partake in the structure also share the responsibility for the business's activities. On the other hand, businesses could be seen as entities in their own right, accountable in terms of their artificial personhood. Ideally, the two different perspectives would work together as complementary approaches to determining and assigning business responsibility. This implies an ability to alternate between perspectives, which I see as a characteristic feature of a care-ethical approach to moral problem solving. Thus, I suggest a care-ethical approach would entail the ability to alternate between different perspectives on responsibility, from legal accountability to shared responsibility, and from a broad perspective of relational structures to a narrow perspective of each individual's or group's position within that structure. Balancing these perspectives would likely involve relying both on a legal court system and on public discourse as a means to address problems of responsibility. However, a care-ethical approach would still hold fast that responsibilities are tied to the particular relationships or relational structures they arise within. Thus, going back to the question of whether economic agents can be held morally accountable for their actions, I maintain that with a care-ethical approach the answer is "yes".

The second question was why economic activities should be informed or restrained by the values of care if they are not in fact caring practices. I maintain that a care-ethical interpretation of responsibility would see responsibility as arising within the relationships we are each already part of. I suggested in the previous chapter that this relational understanding of responsibility would entail an emphasis on reciprocity through a shared commitment to the relationship's purpose. It would also entail an active engagement in ensuring that the relationship does not become harmful, and judge the strength of others' claims on us in part by the relational context they arise within. In short, I see care-ethics as holding persons morally responsible through the relationships and relational structures they are part of. Our reasons for accepting this interpretation of responsibility fundamentally rest on our reasons for accepting the values of care and the approach of care-ethics in the first place. I suggested in the previous chapter that Kittay (1999) and Pettersen (2011) provide the most promising arguments here. Kittay argues for the universal entitlement to care by appealing to the fundamental link of human connection, and Pettersen argues that an appeal to empathy and rational identification through the universal experience of care should lead to the recognition of the values of care-ethics.

I argue, then, that although economic activity is not the same as a caring practice, still, care-ethics holds persons morally responsible through the relationships and relational struc-

tures they are part of. Economic activity is informed by specific economic aims and economic considerations, and different economic questions will be important to a greater or lesser extent in different types of relationships. Yet, recognising that it is through human beings placed within a relational context that economic activity is initiated should lead us to acknowledge that economic activity is also relational. Thus, economic activity does not belong to a sphere that is separate from the rest of human life, but is instead already ingrained in specific human relationships and relational structures. This means that an appeal to the moral responsibility of economic agents is not an additional goal or requirement, simply added to the standard business aim of profit maximisation or added to the standardly assumed aim of individual utility maximisation. If it were, there would seem to be an unsolvable conflict of interests. How could businesses, for instance, both pursue an unrestrained maximisation of profits and at the same time accept a responsibility for taking other moral considerations into account? If moral responsibilities were simply added to the standard business aim of profit maximisation, it would likely result in businesses accepting these responsibilities only as long as doing so would not restrict their pursuit of profit. However, that might defeat the whole purpose of the responsibility in the first place. In a conflict between profit maximisation and other moral considerations, there would be no clear reason why the latter should trump.

Therefore, I maintain instead that the argument for the moral responsibility of economic agents rests on an appeal to the recognition of the relational context of economic activity. Economic agents, whether as individual persons, larger collectives or human-made institutions, are already part of particular relationships and relational structures. A care-ethical interpretation of responsibility as relational would therefore hold economic agents responsible through their involvement in relationships or relational structures. Thus, I maintain that economic agents should be held morally responsible in terms of sharing a commitment to the aims of the particular relationships they operate within and by actively seeking to ensure that the relationships do not become harmful. So, for instance, while the pursuit of profit seems to a large extent both reasonable and justified in business activity, I see no moral grounds for justifying the pursuit of profit at any cost. On the contrary, the normative care value of extended non-maleficence would justify a restraint on profit maximisation when the pursuit of profit actively inflicts harm or leads to harm through neglect or ignorance. Thus, while I disagree with much of Engster's argumentation, I largely agree with his conclusion: "When the pursuit of profits and production of goods directly interferes with the abilities of individuals who are close to us or dependent on us to care for themselves and others, it violates caring values" (Engster, 2011, p. 101). Although economic activities are not the same as caring prac-



tices, the normative values of care may inform and restrain economic activity that has an impact on people's opportunities to care within a specific relational context.



## CONCLUSION

The underlying question running through this thesis has been whether, and in what way, care-ethics can inform our thinking around economic activity. Particularly, I have sought to answer the question of whether a care-ethical interpretation of responsibility could provide justification for holding economic agents morally responsible.

Looking at this question through the perspective of care-ethics has opened for an alternative approach to the whole topic of the relevance of ethics to economics. Through the discussion in chapter two, we saw that the relational ontology of care-ethics emphasises the relational context of persons rather than their individual independence. With the normative values of care, as Pettersen (2008; 2011) argues, there is an appeal to an active commitment to do good and avoid harm, but also an acknowledgement of the limitation of each person's care resources and an awareness of the possibility of harm being caused through neglect or ignorance. The relational ontology and the normative values of care-ethics make it clear that care is a relational activity. The perspective of care-ethics stands in stark contrast to the basic principles and assumptions of mainstream economic theory, which depicts economic agents as largely rational, self-interested and driven by the pursuit of profit or individual utility. However, the discussion through the course of the thesis has demonstrated that, while the themes and methodology of care-ethics are very different to those of economics, the perspective of care-ethics can nevertheless lead to an important conclusion: Responsibility, too, is relational.

Through the discussion in chapter three, I demonstrated how the standard economic assumptions of economic agents as rational and self-interested work as both descriptive and normative propositions, describing what is *expected*, but also what is *accepted*, behaviour in economic settings. Through market thinking, we are left with the impression that economics only deals with rational calculation and individual gain. This results in the view that economic agents are not *expected* to take ethical considerations into account, and that there is no room for ethical considerations in economic activity and economic decision-making. This is the general problem I wanted to address in this thesis: the presumption that economic activity and economic considerations lie outside the realm of ethics.

The problem with the market view, as I demonstrated in chapter three, is not only that economic activities and institutions are the results of human decisions and human-made struc-

tures, but also that economic conditions have real impact on people's lives. I therefore argued that market thinking cannot be contained within the hypothetical sphere of "pure" economics, because economic activities and economic considerations are already deeply infused in human relationships. Through the discussion of Kittay's (1999), Tronto's (2013) and Young's (2011) analyses in chapter three, it became clear that concerns relating to care responsibilities, dependence and the existence of structural background constraints on people's choices were ignored on the market view. I also argued that market thinking implies a dichotomy between self-interest and altruism, an assumption on which the motivation to care and the reality of care responsibilities make little sense. At the core, I found that the framework of market thinking rests on an individualistic ontology, highlighting individual independence, but ignoring the relational context of persons.

I argued, in chapter four, that a care-ethical interpretation of responsibility as relational would emphasise how responsibilities arise within, and are tied to, particular relationships or larger relational structures. Leaning on Kittay's (1999) and Pettersen's (2012) arguments, I suggested that this relational emphasis entails reciprocity, in that each party would be expected to share a commitment to the aim of the relationship and be actively engaged in preventing the relationship from becoming harmful. Placing responsibilities within a relational context further implies that responsibilities could be shared or distributed through social networks or even extensive social structures. I here discussed Kittay's (1999) notion of social responsibility for the support of care and Young's (2011) notion of shared responsibility for addressing structural injustice. I argued that a care-ethical approach to determining and assigning responsibility would likely require the ability to alternate between a narrow and wide perspective, balancing a sensitivity to the details of particular contexts with an awareness of background structural causes. Thus, Young's (2011) suggestion of considering each party's position of power, privilege and interest would be important, but so would each party's degree of dependence and their share of care burdens.

From the basis of the care-ethical interpretation of responsibility, I next provided an argument for the moral responsibility of economic agents. Contrary to what I suggested was the main flaw in Engster's (2007; 2011) argumentation for the moral responsibility of businesses, I maintained that economic activities and market relations are not the same as caring practices and caring relationships. Rather, I argued that economic activities and constraints are already deeply ingrained in particular human relationships and broader relational structures. I suggested, therefore, that a care-ethical interpretation of responsibility as relational would make economic agents responsible through the particular relational context of their activities. This approach would justify holding individual persons morally responsible for

their actions, even in their economic capacities as consumers, employees, business leaders or investors. Moreover, businesses too would be held morally accountable, not only as entities in the form of an artificial person recognised by law, but also through the shared responsibility of all those who contribute to the business's activities and share a common interest in its aims. Thus, while I maintained that economic activities are not caring practices, I nevertheless suggested that the normative values of care would inform and restrain economic activities through the relational context of the economic agents themselves. This interpretation would justify a restraint on businesses' pursuit of profit where this entails actively or inadvertently causing harm within the particular relational context of its activities.

The main focus of the discussion has been on the reasons for accepting a care-ethical interpretation of responsibility and the justification for applying this to market relations. The importance of focusing on the underlying reasons for accepting a moral responsibility in the first place was demonstrated through the discussion of Engster's (2011) account of a care-based business approach. Without a solid argument for *why* economic agents should be held morally responsible, there seems little hope of bringing about real change in the conduct of economic agents.

Therefore, it is crucial to first establish an argument that is strong enough to hold economic agents to the requirements of moral responsibility, even when this leads to a conflict with the standard business aim of profit maximisation. My proposition is that a care-ethical interpretation of responsibility is able to do just that. If this is indeed the case, it would open for a profoundly new approach to assigning and determining responsibility in market relations.



## BIBLIOGRAPHY

- Becker, G.S. 1996, *Accounting for Tastes*, Harvard University Press, Cambridge, Massachusetts.
- Bernheim, B.D. and Whinston, M.D. 2008, *Microeconomics*, McGraw Hill Irwin, Boston.
- Blanchard, O., Amighini, A. and Giavazzi, F. 2010 [2013], *Macroeconomics: A European Perspective*, 2<sup>nd</sup> ed., Pearson Education Ltd., Harlow, England.
- Brooks, R. 2014, “Havens like Luxembourg turn ‘Tax Competition’ into a Race to the Bottom” [online] *The Guardian*, Guardian News and Media Ltd., published Nov 5 2014. Available at <http://www.theguardian.com/world/2014/nov/05/luxembourg-tax-haven-competition-global-grand-duchy-corporate-law-administration> [06.12.2014]
- Buchanan, J.M. and Brennan, G. 1987, “The Normative Purpose of Economic “Science”: Rediscovery of an Eighteenth Century Method” in Buchanan, J.M., Tollison, R.D., Vanberg, V.J. (eds.) *Economics: Between Predictive Science and Moral Philosophy*, Texas A&M University Press, College Station.
- Clean Clothes Campaign and the Asia Floor Wage Alliance, 2014, *Living Wage in Asia: Report*, Merk, J.(ed.). Available at <http://www.cleanclothes.org/resources/publications> [08.10.2014]
- Economist, The, 2013, “Crash Course: The origins of the financial crisis” [online] *The Economist Newspaper Limited*, published Sep 7 2013. Available at <http://www.economist.com/news/schoolsbrief/21584534-effects-financial-crisis-are-still-being-felt-five-years-article> [07.03.2014]
- Engster, D. 2007, *The Heart of Justice: Care Ethics and Political Theory*, Oxford University Press, Oxford.
- . 2011, “Care Ethics and Stakeholder Theory” in Hamington, M., Sander-Staudt, M. (eds.) *Applying Care Ethics to Business: Issues in Business Ethics*, Vol. 34, Springer, Dordrecht, Heidelberg, London, New York, p. 93-110.
- Fehr, E. and Fischbacher, U. 2002 “Why Social Preferences Matter — The Impact of Non-Selfish Motives on Competition, Cooperation and Incentives”, *The Economic Journal*, vol. 112, no. 478, p. C1-C33. Available at <http://www.jstor.org/stable/798356> [11.11.2014]

- Freeman, R.E., 1984 [2010], *Strategic Management: A Stakeholder Approach*, 2<sup>nd</sup> ed., Cambridge University Press, Cambridge, New York.
- Freeman, R.E., Harrison, J.S., Wicks, A.C., Parmar, B.L. and Colle, S. 2010, *Stakeholder Theory: The State of the Art*, Cambridge University Press, Cambridge, New York.
- Friedman, A.L. and Miles, S., 2006, *Stakeholders: Theory and Practice*, Oxford University Press, Oxford.
- Friedman, M. 1953, “The Methodology of Positive Economics” in *Essays in Positive Economics*, University of Chicago Press. [online] The University of Minnesota. Available at <http://www.econ.umn.edu/~schwe227/teaching.s11/files/articles/friedman-1953.pdf> [25.02.2014]
- . 1962 [2002], *Capitalism and Freedom*, 3<sup>rd</sup> ed., The University of Chicago Press, Chicago, London.
- . 1970, “The Social Responsibility of Business is to Increase its Profits” *The New York Times Magazine*, Sep 13th 1970. Available at <http://www.colorado.edu/studentgroups/libertarians/issues/friedman-soc-resp-business.html> [09.09.2014]
- Gilligan, C. 1982 [1993], *In a Different Voice: Psychological Theory and Women’s Development*, 2<sup>nd</sup> ed., Harvard University Press, Cambridge, Massachusetts, London.
- Harberger, A.C. 2008, “Microeconomics” [online] *The Concise Encyclopedia of Economics*, Library of Economics and Liberty. Available at <http://www.econlib.org/cgi-bin/cite.pl> [accessed 14.02.2014]
- Hausman, D.M. 2013, “Philosophy of Economics” [online] *Stanford Encyclopedia of Philosophy*, Zalta, E.N. (ed.). Available at <http://plato.stanford.edu/archives/win2013/entries/economics/> [14.02.2014]
- Hausman, D.M. and McPherson, M.S. 1996 [2006], *Economic Analysis, Moral Philosophy, and Public Policy*, 2<sup>nd</sup> ed., Cambridge University Press, Cambridge.
- Held, V. 1993, *Feminist Morality: Transforming Culture, Society, and Politics*, The University of Chicago Press, Chicago and London.
- . 2006, *The Ethics of Care: Personal, Political, and Global*, Oxford University Press, Oxford, New York.
- Hoagland, S.L. 1992, *Lesbian Ethics: Toward New Value*, Institute of Lesbian Studies, Palo Alto, California.
- Hoover, K.D. 2008, “New Classical Macroeconomics” [online] *The Concise Encyclopedia of Economics*, Library of Economics and Liberty. Available at <http://www.econlib.org/library/Enc/NewClassicalMacroeconomics.html> [14.02.2014]



- International Labour Organization, 2013, *Bangladesh: Seeking Better Employment Conditions for Better Socioeconomic Outcomes*. Available at [http://www.ilo.org/global/research/publications/WCMS\\_229105/lang--en/index.htm](http://www.ilo.org/global/research/publications/WCMS_229105/lang--en/index.htm) [16.10.2014]
- Kittay, E.F. 1999, *Love's Labor: Essays on Women, Equality, and Dependency*, Routledge, New York, London.
- Krugman, P. 2009, "How did Economists Get It So Wrong?" [online] *The New York Times*. Available at [http://www.nytimes.com/2009/09/06/magazine/06Economic-t.html?\\_r=0](http://www.nytimes.com/2009/09/06/magazine/06Economic-t.html?_r=0) [06.02.2014]
- Mankiw, N.G. 2008, "New Keynesian Economics" [online] *The Concise Encyclopedia of Economics*, Library of Economics and Liberty. Available at <http://www.econlib.org/library/Enc/NewKeynesianEconomics.html> [14.02.2014]
- Mankiw, N.G. and Taylor, M.P. 2008 [2011], *Microeconomics*, 2<sup>nd</sup> ed., South-Western Cengage Learning, United Kingdom.
- Mill, J.S. 1844 [1992], *Essays on Some Unsettled Questions of Political Economy*, Thoemmes Press, Bristol.
- Narayan, U. 1995, "Colonialism and Its Others: Considerations On Rights and Care Discourses" *Hypathia*, vol. 10, no. 2, p. 133-140. Available at <http://www.jstor.org/stable/3810285> [04.04.2014]
- Nelson, J.A. 2011, "Care Ethics and Markets: A View from Feminist Economics" in Hamington, M., Sander-Staudt, M. (eds.) *Applying Care Ethics to Business: Issues in Business Ethics Vol. 34*, Springer, Dordrecht, Heidelberg, London, New York, p. 35-53.
- Noddings, N. 1984 [2003], *Caring: A Feminine Approach to Ethics & Moral Education*, 2<sup>nd</sup> ed., University of California Press, Berkeley, Los Angeles, London.
- Petterson, T. 2008, *Comprehending Care: Problems and Possibilities in the Ethics of Care*, Lexington Books, Rowman & Littlefield Publishers, Inc., Lanham.
- . 2011, "The Ethics of Care: Normative Structures and Empirical Implications", *Health Care Analysis*, vol. 19, no. 1, p. 51-64. Available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3037474/> [04.04.2014]
- . 2012, "Conceptions of Care: Altruism, Feminism, and Mature Care," *Hypatia* vol. 27, no. 2, p. 366-389.
- Rabin, M. 2002, "A Perspective on Psychology and Economics," *European Economic Review*, vol. 46, p. 657-685. Available at <http://www.sciencedirect.com/science/article/pii/S0014292101002070#> [07.11.2014]

- Rawls, J. 1971, *A Theory of Justice*, Harvard University Press, Cambridge, Massachusetts.
- Robinson, F. 1999, *Globalizing Care: Ethics, Feminist Theory, and International Relations*, Westview Press, Boulder, Colorado.
- Rubinstein, A. 2007, "Afterword" in Von Neuman, J., Morgenstein, O., *Theory of Games and Economic Behavior; 60th Anniversary Commemorative Edition*, Princeton University Press, Princeton, N. J., p. 633-636.
- Ruddick, S. 1989 [1995], *Maternal Thinking: Toward a Politics of Peace*, 2<sup>nd</sup> ed., Beacon Press, Boston.
- Sen, A. 1987, *On Ethics and Economics*, Basil Blackwell Ltd., Oxford, UK.
- Silvers, A. 1998, "Disability" in Jagger, A.M., Young, I.M. (eds.) *A Companion to Feminist Philosophy*, Blackwell Publishers, Malden, Massachusetts, p. 330-340.
- Slote, M. 2010, *Moral Sentimentalism*, Oxford University Press, Oxford.
- Smith, A. 1776 [2004], *The Wealth of Nations*, Edited by C. J. Bullock, Barnes & Noble, New York.
- Tronto, J.C. 1993, *Moral Boundaries: A Political Argument for An Ethic of Care*, Routledge, New York.
- . 2013, *Caring Democracy: Markets, Equality, and Justice*, New York University Press, New York, London.
- Weinstein, J.R. 2008, "Adam Smith (1793-1790)" [online] *Internet Encyclopedia of Philosophy*. Available at <http://www.iep.utm.edu/smith/#H2> [06.05.2014]
- Weintraub, E.R. 1993, "Neoclassical Economics" [online] *The Concise Encyclopedia of Economics*, Library of Economics and Liberty. Available at <http://www.econlib.org/cgi-bin/cite.pl> [14.02.2014]
- Young, I.M. and Nussbaum, M. 2011, *Responsibility for Justice*, Oxford University Press. Available at [oxfordscholarship.com](http://oxfordscholarship.com) [28.01.2014]
- Zakheim, A.J., Palmer, D.E., Stoll, M.L., and Bowie, N.E. 2007, *Stakeholder Theory: Essential Readings in Ethical Leadership and Management*, Prometheus Books, Amherst, Massachusetts.



