DOSSIÊ CRISES, DESIGUALDADES E CUIDADOS. EXPLORANDO EXPERIÊNCIAS NACIONAIS

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Conceptualizing care inequalities and modalities of resistance

Heidi Gottfried Wayne University, Detroit, Michigan, usa https://orcid.org/0000-0001-7699-3609

Introduction

Covid-19 intensified and heightened the crisis of social reproduction. The examination of the crisis directs our attention towards human precariousness and societal inequalities, as well as to resilience and resistance. As a result of the lockdown, invisible labor came out of the shadows highlighting the necessary labor of women on the frontlines caring for the elderly, children, and the well-being of the general population. This new visibility of "essential" workers did not always include in-home care workers, especially migrants. While crisis takes different shapes and undergoes various phases, a crisis tends to entangle itself with already-existing crises, fueling or even exacerbating those, while fostering new crises entanglements. Examining crisis illuminates how these entanglements can be counteracted, navigated, and resisted.

New research highlights the changing capitalist economy as care is becoming more commodified and corporatized (Nadasen, 2023; Guimarães *et al.*, 2024; Farris and Marchetti, 2017; Gottfried *et al.*, forthcoming). Paid care is a burgeoning, diverse and fragmented sector. Neo-liberalism is shifting priorities of states, austerity policies reducing public funding and financialization of the sector are reorganizing, diversifying, and degrading the quality of the delivery of paid care with differenti-



ated working and employment conditions, creating new fault-lines of inequality and further segmentation of care labor markets. Even in the more regulated European welfare states, faced with ever-rising eldercare costs, States have reduced public provision, generating a "hidden welfare market" of paid in-home care that co-exists alongside formal labor markets (Ledoux *et al.*, 2021, p. 40).

This paper reflects on new conceptualizations of care work in the expansive care economy. Mapping the care economy makes visible the spectrum of care work, inequalities between types of care, and segmentation of care labor markets. Research by teams of scholars in Brazil, Canada, Colombia, France, UK, and the US have examined the structure of the care economy at the macro-level to the organization of work and civil society responses¹. Each brings new perspectives on conceptualizing care, demarcating the heterogeneity and hierarchies of care labor, identifying multiple and complex inequalities. Caring practices are theorized not only as work but also as resistance. In different ways, this research outlines relational understandings of care and caring and the array of activities and social relationships involved in maintaining people, both on a daily basis and intergenerationally. It points to a new understanding of the heterogeneity and inequalities within and across the care economy and to care as a modality of resistance.

Conceptualizing paid care work: New research

For background during the pandemic, Table 1 presents a comparative picture of domestic work across the 6 countries represented in Transatlantic Platform "Who Cares?" project. Paid domestic work makes up between 30 and 50 percent of the care sector across Latin America, whereas employment in education and health are the larger sectors among the mature welfare states of North America and Europe. Similarly, Colombia and Brazil feature high informality, less social protections, and precarity. Table 2 shows the severe and disproportionate impact of the pandemic on domestic workers' employment. Domestic workers faced higher likelihoods of unemployment in countries with weak welfare states. The US stands out as "exceptional" in relationship to welfare state protections among other wealthy countries.

1. The Transatlantic Platform project, "Who Cares?" consists of an interdisciplinary network of scholars specializing in labor, health, and care from six countries transregionally: Latin America (Brazil and Colombia), North America (Canada and the US) and Europe (France and the UK), spanning differing welfare regimes, level of inequalities, social organization of care, and health systems (https://cuidado.cebrap.org.br/o-projeto/). The NSF grant funded the research conducted by the United States team of the Transatlantic Platform project. Research was conducted with the approval by the Institutional Review Boards of the three principal investigators.

TABLE 1
Paid Domestic Workers, 2019 (2018) ILO

Country	Number	As % of total	Number	Number	% TOTAL EM- PLOYMENT	% TOTAL EMPLOYMENT
		%	Women	Men	Women	Men
Brazil	6,276,316	6.8	5,781,594	494,722	14.2	1
Colombia	669,113	3.2	615,822	53,291	7.1	0.4
Canada	802,280	4.3	432,626	369,655	4.9	1.1
US	1,909,829	1.2	1,691,561	218,268	2.3	0.3
France	370,362	1.4	343,467	26,895	2.6	0.2
UK	48,134	0.1	33,668	14,466	0.2	0.1

Source: Panel A, (ILO, 2021, p. 280), France, p. 35; 2018 for both Canada and France; Annex 5 (ILO, 2021), Brazil and Colombia, p. 271; Canada and US, p. 272, France and UK, p. 273, France and UK, 2018.

TABLE 2
Decrease in the number of domestic Workers, 4th quarter 2019 to 2nd quarter 2020 (ILO)

Country	Decline in Number of Domestic Workers Compared to Non-domestic Workers as %
Brazil	-26.6 / -12.3
Colombia	-50.6. / -22.2
Canada	-21.8. /-14.7
United States	-37.7. / -14.8
United Kingdom	-15.6. / -1.2

Source: ILO, 2021, p. 233.

The comparison demonstrates the high risks faced by domestic workers as compared to non-domestic workers.

Two noteworthy recent publications propose cross-cutting analytic conceptualizations of care, finding heterogeneity and inequalities within the care economy, within and across "circles of care" (Guimarães and Pinheiro, 2024; Milkman, 2023). Paid domestic and in-home care work consists of a range of occupations (from housecleaning, cooking, childcare, to elder care) stratified by class, race, ethnicity,

and migration status (also see Boris and Parreñas, 2010). However, these two conceptualizations emphasize different dimensions of inequality.

The halo, with its concentric circles and nucleus of domestic care is a new typology, demarcating segmentation of care labor markets and how these are gendered and racialized (Guimarães and Pinheiro, 2024). Through a decomposition of the care economy, the authors seek a fuller understanding of the complexity of social relations in care labor markets, expanding the horizon of care and its heterogeneity when arrayed together. Determining boundaries of each concentric circle is based on the context in which work relations come about: within a home setting through domestic employment, or outside it without a domestic employment relationship. The "nucleus" at the center defines the specific characteristics of the management and control of the work performed in the private sphere, where relationships and hierarchies are permeated by interpersonal relationships (Kofes, 2001) within an intimate setting. Significantly, they find that care labor markets are structured differently with limited pathways for mobility in the nucleus relative to outer circles. In the nucleus of care, Guimarães and Pinheiro (2024) postulate that caregiving is more intensive when care work is performed in direct, recurring interactions, within a home environment imbued by interpersonal and intimate relationships. Seemingly disparate circles, the innermost (nucleus) and outermost circles (janitors, cleaners and cooks) in their diagram, share precariousness, low-wages, and lack of social protection and racialization of labor relations.

Conceptualized as a halo underscores characteristics of the social relationship underlying caring work. The five circles visualize an extensive care economy and its centrality to the overall economy (Folbre, 2024; Duffy, Armenia and Price-Glynn, 2023). When the authors divide the 70 care occupations into these five concentric circles, the results interestingly suggest that these circles are not only different in size, but also that such differentiation denotes the rising importance in the ways of providing care as it becomes increasingly commodified. It thus recognizes the extent to which society relies on care work and social reproduction. It also lends itself to comparative analysis of the care economy (Castiblanco *et al.*, 2025). At the same time, arraying care into concentric circles (halo) can lose power dynamics (hierarchies within the care system) within the care economy. Nonetheless, the halo's theory-driven approach reveals the extent to which society relies on care work and makes more visible the labor of social reproduction.

Another approach by Ruth Milkman (2023) further deconstructs the divisions within the nucleus, exposing stratification and inequalities among workers in the United States. She focuses on workers at the bottom of the labor market, looking at stratification among in-home care workers: nannies, house cleaners,

and care for older persons. A complex mix of factors shape the pay and conditions of US domestic workers, including geographical location, union status, and employment informality. The US neo-liberal, marketized, fragmented care system's minimal safety net and meager social provision likely adds to this heterogeneity, as does the State-based programs of Medicaid, a means-tested health care program for low-income individuals and Medicare, the age-graded system of health care coverage, payment rates, and extensive inequality in employers' ability to pay for these vital services. The stratification among domestic workers illuminated by Milkman is significant not only in its own right, but also because it adds to the already formidable challenge involved in organizing or advocating for this growing and often marginal sector of the workforce. The analysis contributes to a deeper understanding of the complex and heterogeneous mix of employment in this sector. Generally, in-home care workers are concentrated at the bottom of the US labor market. Yet, there is also substantial stratification among and within each of these occupations.

Both studies point to new directions for research. One direction is connected to whether a household hires the domestic worker directly (either through a digital platform or social networks) or indirectly through a private agency or service provider, and whether the state subsidizes in-home care work. A growing body of literature explores care platforms changing and reinforcing precarious labor conditions and employment relations (see Lima, 2024; Andrada *et al.*, 2024). Others document the socio-demographic characteristics of paid domestic workers, in what some have called the shadow economy, or the "gray market." Gray market work tends to elude social protections, leaving care workers vulnerable to abuse. Growth of undeclared work and the gray market have prompted new research to better understand this labor market segment.

What are the boundaries of care and the wider halo of care? Parreñas (2000), among others, contrast care work to reproductive labor with the latter encompassing the 'array of activities and relationships involve in maintaining people both on a daily basis and intergenerationally. Reproductive labor entails a wider array of activities than care work, including the purchasing of household goods, preparing food, laundering, dusting, sweeping, maintaining community ties, caring for adults and children, socializing children and providing emotional support. Social reproduction is a structural term, one that "has its own lineage of debates stemming from socialist feminism and revolving around whether such labor is productive or unproductive, creates use values or exchange values, or refers to hegemonic socialization, the generation and sustenance of labor power, or the maintenance of existing order of things." Whereas care is a term deployed in political debates and easily attaches to

sector, work, economy, and policy (Gottfried and Boris, 2024). The growing body of research on care is debated among feminist scholars.

Landscapes of domestic workers' organizations: From Arborescent tree-like to rhizomic organizations

Bridging these new conceptions of paid care work, Acciari (2024) argues for an approach that extends the notion of care beyond a set of labor tasks, to rights claims, ethics, practices and affects. She broadens what we mean by solidaristic practices to ways of being and considering others to bring people together to resist. The pandemic prompted domestic workers to mobilize around "the right to care and be cared for in times of crisis," which Acciari contends constitutes an act of resistance (Acciari, 2024).

Domestic workers' campaigns put forward a vision of society that is inclusive and based on love and solidarity. This recognition of the household as a site of socially necessary domestic labor for the reproduction of capitalism advanced the larger project of expanding what constituted work. Fraser (2016, p. 21) argues that the sphere of social reproduction embodies a distinctive "normative and ontological grammar" such as the ideals of care, mutual responsibility, and solidarity. Similarly, feminist standpoint theory "focused on caring labor, embracing its differences from industrial production as a potential source of alternative epistemologies and ontologies" (Weeks, 2001, pp. 226-27). The insight that caring labor is a potential source of critique and politics can be carried over to situate reproductive labor in economic and gender justice projects and repertoires of resistance.

The landscape of organizations and modalities of resistance in this sector have been shaped by historical legacies, national labor regulations, and political forces, (whether left/right, alliances in a political field). Domestic workers face barriers to organizing in this sector due to the nature of work scattered in individual households. As a result, hybrid associational forms have arisen out of new geographies of power in which vulnerable, precarious workers must aggregate resources beyond a single workplace. Drawing on Peter Evans (2010), associational hybrids structured like "rhizomes" organize horizontally and through networked relationships, maneuvering across spaces and places within (cities) and across scales (local, national, regional, transnational) in contrast to traditional unions rooted in "tree-like" arborescent structures organized vertically and bureaucratically. Domestic workers' mobilizations tend to resemble rhizomic modalities, fluid, horizontal organizational forms contrasting with tree-like arborescent, top-down organizations.

On the one hand, the vestiges of domestic servitude shape employment and power relations, and on the other, employers (that is, clients) are potential allies with care

workers in pursuit of care as a right to be cared for and as a public good. On the other hand, the logics of capitalism contradict the ethos of care generally pitting employers against workers in a class relation in which the former extracts "surplus" value from workers. Structural barriers further disrupt solidaristic potentials: racialized domestic workers, many of whom hail from rural areas or small interior cities, are employed by elite families in urban metropolitan areas, particularly in the cases of Colombia and Brazil. In the US, however, there are signs of solidarity. A small employers' association is allied with the National Domestic Workers' Alliance², organizing around the ethos of care as a right. Such alliances depend on the constellation of power relations and take root in local terrains and thus will vary across contexts.

New domestic workers' associations, burgeoning during the pandemic, are challenging conceptions of care and the inequalities inherent to the care economy. The rise of these new movements and organizations raises several questions. To what extent, and how, is the domestic sphere (the nucleus of the halo) distinctive from other institutional contexts of care work? Are the repertoires of resistance (logic of collective action) identified here intrinsic to caring across the full spectrum of care or distinctive to domestic work, in particular? Or to put another way, does the sphere of social reproduction embody a distinctive "normative and ontological grammar" framing modes of resistance? Or are new social imaginaries rooted in the continuities between reproductive work in the private sphere and care work in waged workplaces? Do these movements and practices prefigure more radical emancipatory alternatives that interpolate new political subjects? Is the domestic sphere distinctive due to the nature of recurring interactions and intimate interpersonal relationship? What are the implications of the care halo on solidaristic practices, and alliances across the five circles? What challenges do these boundaries (segmentation and hierarchies) pose (stratification among domestic workers) for building a cross-class, cross-occupational movement in the care economy?

Closing remarks

The covid crisis exposed inequalities and vulnerabilities as well as exacerbated inequalities among the low-wage care workforce. Recent evidence suggests that the covid-19 pandemic has had severe and disproportionate impacts on domestic workers' employment. As a large segment of the care workforce, domestic workers

 The National Domestic Workers' Alliance was established in 2007, merging 13 organizations and now, 70 grassroots affiliate organizations and chapters across the United States, and a growing online community of 250,000+ workers. provided essential services to households; yet they were at high risk of experiencing reduction in their hours worked, losing their jobs as a result of their informal status and lack of social protections. Conceptualizing and mapping the care economy is consequential for determining gaps in protections addressing conditions of employment and inequalities among workers in the domestic care sector, revaluing care, and the potentials for organizing and forging political alliances.

Understanding the dynamics of the provision of care by different actors allows us to understand, among other issues, the different circuits through which care is offered, the significance of each sector in providing this service, how the State becomes involved and shares responsibility in the provision of care, and the challenges to the quality of the care relationship and the quality of the caregiver's work. The State's prominent role as a care provider means not only committing to acknowledging care as a right of all people but also devising policies to lessen disparities in the access to this right, diminish the effects of the unequal access to care and, consequently, reduce broader societal inequalities.

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Abstract

Conceptualizing care inequalities and modalities of resistance

This paper reflects on new conceptualizations of care work in the expansive care economy. New conceptualizations of care demarcate heterogeneity and hierarchies of care labor, identifying multiple and complex inequalities among home care workers and between care workers across the care economy. Caring practices are theorized not only as work but also as resistance. In different ways, this research outlines relational understandings of care and caring and the array of activities and social relationships involved in maintaining people, both on a daily basis and intergenerationally. Conceptualizing and mapping the care economy is consequential for determining gaps in protections, addressing conditions of employment and inequalities, revaluing care, and realizing potentials for organizing and forging political alliances.

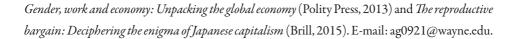
Keywords: Modalities of resistance; Caring practices; Inequalities; Social reproduction; Crisis.

Resumo

Conceituando desigualdades e modalidades de resistência no cuidado

Este artigo reflete sobre novas conceituações do trabalho de cuidado numa economia do cuidado em expansão. Novas conceituações de cuidado demarcam a heterogeneidade e as hierarquias do trabalho de cuidado, identificando múltiplas e complexas desigualdades, tanto entre cuidadores domiciliares, como entre cuidadores nos diversos domínios da economia do cuidado. As práticas de cuidado são teorizadas não apenas como trabalho, mas também como resistência. Esta pesquisa delineia as diferentes compreensões relacionais do cuidado e do cuidar, tanto quanto a gama de atividades e relações sociais envolvidas na manutenção de pessoas, no cotidiano e intergeracionalmente. Conceitualizar e mapear a economia do cuidado é fundamental para identificar lacunas de proteção, para abordar as condições de emprego e as desigualdades, bem como para revalorizar o cuidado e tornar efetivas potencialidades para organizar e forjar alianças políticas. Palavras-chave: Modalidades de resistência; Práticas de cuidado; Desigualdades; Reprodução social; Crise.

HEIDI GOTTFRIED is an associate professor in the Department of Sociology at Wayne State University, USA. She obtained her PhD in 1987 from the University of Wisconsin-Madison, USA. Her recent publications include *Care and pandemic. A transnational perspective* (Brill, 2025); *Global labor migration: New directions* (University of Illinois Press, 2023) (with Eileen Boris, Julie Greene, and Joo-Cheong Tham); "Care work in transition: Transnational circuits of gender, migration, and care", a special issue of Critical Sociology (with Jennifer Jihye Chun);



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