The Care Crisis: What Caused It and How Can We End It?

Emma Dowling

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In this powerful, credible and well-argued book, Emma Dowling considers the issue of care, what it is, how it is provided and what good it does in the context of the UK. She begins with the impact of austerity and the concatenation of effects it has had in combination with Brexit and the coronavirus pandemic. This situation has revealed the insufficient staffing and resources available for the entire system of care, from that needed by the very youngest to the elderly. Care, she claims, is in crisis and this provides one of the main framing devices of the book:

> "In an unequal world, no crisis affects everyone equally. To speak of crisis is thus to ask the question, a crisis for whom? It means to highlight class and inequality in the way the crisis is experienced, and in the way that care is organized to entrench division and pit us against one another. It means asking: who is cared for and who is not (p.6)."

The examination of care is, therefore, a deeply political issue because it involves the distribution of scarce resources – even scarcer because of the events mentioned above. Recent Conservative Prime Ministers (and there may be another one in post by the time this review is published) have made it very clear that the resources that do exist are distributed either for naked electoral gain or for ideological purposes which reward the rich and punish the poor. It is very clear that the distribution of resources reflects political choices and the conception of what is possible. Money is immediately found to bale out the banks but when it comes to hungry children and homeless people, there is, as Theresa May put it, 'no magic money tree' to provide the funds needed. However, for the current incumbent, Liz Truss, the magic tree can at once disgorge up to £65 billion in unfunded tax cuts that would overwhelmingly favour the rich and intensify both inequality and public squalor. It is a particularly timely moment, therefore, to consider in detail the impacts that these

decisions have on actual people, focused particularly on the UK but with conclusions that are widely generalizable.

Care is, fundamentally, a social activity that has been historically provided mostly by women. It is part of the endless demand for domestic and emotional labour that households generate. In the premodern world, this demand would have been met unceasingly by women and a few others in an unchanging routine. However, modernity, defined here as the onset of economic development, meant important changes in social relations, not the least of which is the removal of women from the domestic workplace and their entry into the industrial workplace. As Dowling puts it, "As more women have entered the labour force without a significant transformation of the sexual division of labour, this reproductive resource has been depleted (p.194)." At the same time, the Taylorisation of work has meant that people who once had the time and space to do their jobs properly have found both squeezed so that the social element of the process has been ended. This is done for the sake of efficiency. I know from an anecdotal basis how this has worked. My father spent most of his working life as a postal worker. For years, he had a round across local areas in Berkshire that were still mostly rural. He would ride his bicycle to sometimes remote communities or households where no one else might have visited all day. He would know the people on the round and they would know him – part of his job was to represent the state in its absence by checking whether everyone was all right or whether there was a need for extra help. Naturally, doing all of this took a little extra time. Technology and then neoliberalism demanded changes: deliveries could be done more quickly and fewer workers would be needed, thereby saving money for the taxpayer. Delivery staff would be moved from round to round so that relationships would not be established with customers that would slow down the process. Customers would be issued with a call centre number if they wanted to talk about the service they had received. This process is all the more intensive with the case of care because providing care properly requires not just time but the establishment of trust. Instead, care workers are forced to spend less time with each person, so their case load increases and the overall labour cost is decreased. It is now common for a care visitor to the house now to be required to spend less than 15 minutes inside. Even that is not enough for the sake of efficiency as the care worker is paid only for the time spent inside and not for the time travelling from place to place. The work has become precarious and fewer people are willing to endure these privations and the ones that do suffer extra stress and alienation. Dowling includes stories of care workers in residential homes who are called upon to deal with disruptive behaviour by some individuals. Low-paid workers with little motivation, who might even be agency staff with no connection to the home, would deal as best they could with the disruption on a daily basis. Previously, before the work became precarious, the care worker would have spent time with the disruptive individual to seek to identify the causes rather than the symptoms and thereby find a solution to the disruptive behaviour. This is happening at the same time that freedom of movement has been ended and contributed to a shortage of labour willing to work in such poor conditions and for such low wages.

Dowling's work is particularly strong when she considers these aspects of care and she is acute when it comes to identifying the creeping privatization of services and the necessary change of priorities that entails from providing good care to fellow citizens (well, subjects) and the extraction of profits from them. These is also a chapter on self-care and the relationship of the individual to the online world in that context which is interesting but feels as if it does not really belong with the rest of the book but was, instead, included in the book proposal and, so, here it is. There is, of course, a conclusion that seeks to draw together all that is covered and to provide some recommendations for how things might be made better, which suffers from the problems that all such prescriptions tend to encounter – it is not possible to say that we should go back to how things were before and the application of the now-you-see-it-now-you-don't magic money tree would be unconvincing. As a result, it is necessary to come up with some new ideas which non-specialist readers might struggle to imagine in detail.

The current situation in the UK is difficult enough (I am able to observe it from a distance) and it seems likely to become worse very quickly with an economy in which the markets are rapidly losing confidence, thereby adding transaction costs to nearly every agreement. The cost-of-living crisis is worsening and a difficult winter is looming in which the National Health Service may be facing an existential crisis. Dowling's work shows what is likely to happen to a whole range of essential public services, if they still continue at a meaningful level.

John Walsh, Krirk University