THE HEART OF THE MATTER

THE CONTRIBUTION OF THE ETHIC OF CARE TO SOCIAL POLICY
IN SOME NEW EU MEMBER STATES

EDITED BY SELMA SEVENHUIJSEN AND ALENKA ŠVAB
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INTRODUCTION:
TRACING CARE IN SOCIAL POLICIES
SELMA SEVENHUIJSEN AND ALENKA ŠVAB

The present book is the second product of three years of cooperation between the Peace institute, Ljubljana, Slovenia and professor Selma Sevenhuijsen from Utrecht University, the Netherlands. We started in 2002 with an introductory workshop on citizenship and the ethic of care, with some of the Slovenian experts who deal with care theoretically and practically in various fields, such as health care, social policy, family policy, housing etc. Some of the participants wrote papers on the situation in Slovenia. As a result we published the book titled *Labyrinths of Care: The Relevance of the Ethic of Care Perspective for Social Policy* (Ljubljana: The Peace Institute, 2003), which includes critical analyses of Slovenian social policies done from the ethic of care perspective.

While preparing *Labyrinths*, it soon became clear that it would be useful to extend the project to a wider international environment, especially to those countries then called accession countries: countries who were official candidates to become members of the European Union. In order to qualify for membership they had to draft documents on their future social policies that had to meet EU standards. To discuss the way in which this was done and to evaluate this from the ethic of care, in January 2003, the Peace Institute, together with Selma Sevenhuijsen organised the international workshop “The Use of the Ethics of Care in Social Policy.” This was done within the Open Society Institute’s East East Cooperation Center, this time inviting experts from Estonia, Poland, Czech Republic, Slovakia, Hungary and Slovenia. The aim of the workshop was to introduce the core ideas and leading concepts of the ethic of care and especially the *Trace* method for normative policy analysis from the ethic of care perspective, designed by Selma Sevenhuijsen. As an outcome, we wanted to carry out policy analyses in various countries by applying *Trace*. The present book presents the results of these analyses.
The book includes six papers, starting with an opening paper, “Trace: A method for normative policy analysis from the ethic of care,” written by Selma Sevenhuijsen. She gives a presentation of Trace, a method that she has developed over several years for analysing the normative frameworks of care in policy documents. The aim of working with Trace is to broaden the discursive space for an ethic of care in policy making and to contribute towards turning care into an aspect of citizenship. Sevenhuijsen first explains the kind of documents on which Trace can be used, and what problems policy analysts can encounter when tracing the normative dimension of policy discourse. Then she elaborates its four steps: tracing, evaluating, renewing and concretising, and provides examples of her own work with Trace. At the end of the chapter some evalulative remarks that spring from her experience of applying and teaching Trace in several contexts are made. For academics Trace has proved a valuable tool of analysis, but it is more complex to change the thinking of policy makers themselves.

Subsequent chapters present concrete policy document analyses done by five authors from new EU member states. The text “Caring about family and work: The concept of reconciliation of family and work in Slovenian family policy” by Alenka Švab deals with the analysis of the relationship between employment and family or, more precisely, with one of the aspects of this relationship—the concept of reconciliation of work and family (and responsibilities in both spheres). The analysis is done from the ethic of care perspective, which serves as the lens for analysing family policy and at the same time enables analysis of conceptualisation of care in concrete policies. The article is organised around two main (interconnected) ideas. First, the author criticizes the concept of reconciliation of work and family, claiming that in reality the family dimension is subjected to the work sphere. This is clearly seen in the preference for the model of the independent employed individual, which defines the normative framework of family policy. The second idea is that care is a common denominator in both dimensions—work and family—and that realisation of the concept of reconciliation of work and family depends on the conceptualisation of care within a concrete policy. Both ideas are exemplified through an analysis of the basic family policy document in Slovenia: the Resolution on the Principles of Formation of Family Policy.
The “Care in Hungarian human resources policy” by Anikó Vida attempts to apply Trace to human resources policy fields. In the normative framework of the Hungarian Programme, care is subordinated to labour market participation. Another finding of the analysis that care tasks are unambiguously defined as female jobs. The second half of the study focuses on renewal and concretizing of the document.

From the ethic of care perspective, social inclusion policies should consider other factors in addition to policies of employment and social services. Furthermore, activities of care should be recognized as a possible form of social participation and a democratic practice.

In the paper “The contested site of human nature: Applying Trace to the strategic action plan of the Estonian Ministry of Social Affairs, 2000–2010” by Kadri Simm the strategic action plan of the Ministry of Social Affairs is taken as an illustrative representation for analysing Estonian social welfare policy, its values and objectives for the years 2000–2010. The basis of the applied critical analysis is situated within an ethic of care approach that aims to identify and draw out the (often implicit) assumptions concerning the content of the notion of human nature along with the accompanying normative standards. The article contests the neoliberal theoretical ideals of self-sufficiency and independence and suggests new perspectives for including and valuing dependency as a norm and virtue in human existence and active citizenship.

The paper entitled “The concept of equal opportunities for women and men, or how to care for equal opportunities,” written by three authors from Slovakia, Mariana Szapuová, Katarína Pašková, and Zuzana Kiczková, deals with the main policy document on equal opportunities policy in the Slovak Republic, using Trace as the method for normative policy analysis. The authors concentrate on the context in which the document has been elaborated and adopted and on the ways in which the key concepts of the document are conceptualised. In tracing the normative framework of the document, the authors analyse the problem definition and the values underlying it, and they also evaluate the philosophical background of this policy paper. They concentrate on the issue of the reconciliation of family care and paid work, which is seen as crucial in all areas of equal opportunities politics. Attention is also paid to directions for the renewal of the concept of equal opportunities from ethic of care perspectives.
The final paper in this book is also about equal opportunities and is written by Živa Humer. The paper “Tracing the Act on Equal Opportunities for Women and Men—the case of Slovenia” is a normative analysis of the Slovenian Act on Equal Opportunities for Women and Men using the ethic of care as a theoretical framework and *Trace* as a tool. The aim is twofold: to see if care is conceptualized in the Act and to test whether care can be a useful concept in the context of equal opportunities policy. As the analysis has shown, the Slovenian equal opportunities policy aims to resolve the unequal positions of women and men by integrating women into the public sphere (in the labor market and through political participation). The privileging of equality for women and men in the public sphere and the total absence of care in the Act illuminate the idea of liberal social citizenship. The text looks at equal opportunities through the lens of care and questions what differences it would make if care were discussed in the Act.

Throughout the process of preparing the analyses the authors of the book enjoyed fruitful conversation via e-mail. We also met once in Ljubljana for a two-day workshop to discuss the analyses, problems, and common issues and to exchange our ideas. This provided us with a special opportunity to discuss the papers and to try to answer the questions and resolve the difficulties that occurred with applying *Trace* to a particular document. The meeting was extremely fruitful not only because we received commentary on and ideas for our own papers but also because we became aware of the situations in each country. During two days of hard work on each paper, we found that, although we come from countries with different cultural and political backgrounds—each going through the process of societal and political transitions and EU accession processes in different ways—there are a lot of common characteristics. As a result, we concluded that it would be useful to sum up those findings that are consistent for all the analyses. Here we present some of the common findings we share. We hope that this assists the reader in getting a better picture of the situation in these new EU member states.

The documents that we analysed are usually based on a norm (and a presumption of the actual existence) of an *independent individual* with his/her own job, able to take care of her/himself. The ethic of care, on the other hand, is based on a “relational ontology” (Seven-
huijsen 1998) that stresses interdependence as a characteristic of modern society and daily life.

The documents often at a **declarative level** promote modern and democratic ideas, while on the level of concretisation—accomplishing concrete objectives and measures—they frequently work in opposite ways. However, we concluded that a too critical position towards these ambitious value statements is not always appropriate and productive. Good ideas on the declarative level may also function as a sound starting point for encouraging policy makers to implement what they are actually promoting, and thus for improving policy practice and implementing change in social practices.

Often the documents promote ideas that follow foreign examples, for example “best practices” in developed Western European countries. These include, for example, ideas and concepts arising from international obligations in the EU accession process or in other international treaties, not bearing in mind how this will actually function in practice, and without taking the particularities of their own country into account. An example here would be the concept of equal opportunities: we found that proposals for equal opportunities are often not sufficiently integrated with other policies.

The documents investigated operate with various exclusive dualisms: work (activity and social participation) vs. unemployment (inactivity—as negatively connected to deviant behaviour); independent persons (those with a job who do not need any care) vs. dependent persons (those without a job or who are for various reasons not able to take care of themselves); and work (public) vs. family (private) (the latter often associated with unpaid work, care). Together these dualisms have the effect that care figures only in a minimal way, and that its contribution to the wellbeing of individuals and to society as a whole is only marginally acknowledged.

The **conceptualisation of care** in the documents deviates from the core idea of the ethic of care, that care is a daily practice that takes place at different locations in society, and is crucial for enabling people to live a good life. Care is usually reduced to care for so-called “weak groups” and seen, for example, as: a token of good will from the state, by which it becomes associated with charity; only pertaining to care for dependent social groups or individuals; gendered work, a situation that on the declarative level is seen as undesirable;
care for others—many other aspects are missing, like care for the self, mutual care, care for the environment, care for the world (the latter including political participation, respect for nature, volunteer work, spirituality and self-reflection).

The role of the state is defined in rather contradictory ways. On the one hand, most of the countries under study promote—as part of their rapprochement with the EU—neo-liberal market oriented social relations and policies. On the other hand, they still frequently see the state as the “cockpit of society” that has the ability to guide major social change and adaptation in the fields of, for example, welfare and equal opportunities. The proposed policies often still breathe an atmosphere of paternalism, inherited from the socialist period of strong states. This poses a dilemma whether the state is needed as a sort of “care-giver.” Arguing from the ethic of care, it can be concluded that states should be attentive to the (specific) needs and capabilities of its citizens, and that they should divide responsibilities among different social actors. The state should not be the only “care-giver” but instead coordinate responsibilities and undertake these itself when needed. This implies that there should be much more attention paid to the contribution of NGOs to policymaking, something that is currently lacking. The ethic of care accords with a model of dialogic and interactive democracy, in which different actors communicate about the goals, values and responsibilities of their—interlocking—practices. This would be an example of what Margaret Walker has called an “expressive collaborative” model of morality, as opposed to the current “technico-juridical” model, which attributes responsibilities in a top-down manner by deriving them from legal obligations (Walker 1998).

References


**TRACE: A METHOD FOR NORMATIVE POLICY ANALYSIS FROM THE ETHIC OF CARE**

**Selma Sevenhuijsen**

**Introduction**

In the last few years care has figured prominently on the policy agendas of many countries, ranging from discussions on the reform of health care to positioning care in education, developing policies on work-life balance and family politics, or the promotion of communities and companies that care. Yet, looking from the perspective of the ethic of care there is still much to be gained in reaching more solid shared understandings of what appropriate care is all about. It is by no means self-evident which goals and values should be adopted as guidelines in the different policy fields, which areas of social knowledge should best inform these policies, as well as which groups should be included in the framing of these policies and in their implementation.

In order to bring clarity to this complex field, I have developed in my academic work a method for policy analysis called *Trace* that takes the feminist ethic of care as its main point of reference. The aim of this method is to evaluate the normative frameworks of policy documents that deal in one way or another with care.¹ I first worked with this method while making an analysis of the framework of the Dutch policy report on »Choices in Health Care« (Sevenhuijsen 1998). After the publication of this article, I further developed *Trace*, in order to make it applicable to other topics as well, and also with the goal of teaching it to other people: researchers, PhD students, people working in NGOs and—eventually—policy makers in the fields concerned. In the Slovenian context this has resulted in a

¹ It would certainly be possible to apply *Trace* to other topics outside those that are acknowledged as having to do with care. The most urgent ones at this moment in history seem to me those that deal with globalisation, transnationalism, migration, development policies, poverty and issues of war and peace. But also environmental policies or issues around food safety or the treatment of animals would be suitable candidates.
book that analyses several topics in Slovenian social policy (Sevenhuijsen and Švab 2003). Trace has also formed the basis for the present book, which aims to extend the discussion about the political relevance of the ethic of care to other middle and east European countries. In what follows I first present the main concepts of Trace in order to then elaborate the various steps involved in implementing it. I conclude with some evaluatory remarks about the process of working with Trace.

**Trace: its leading ideas**

The main goal of Trace is literally to trace the normative framework(s) in policy reports, in order to evaluate and renew these from the perspective of the ethic of care. The background motivation for this approach is the wish to further develop care into a political concept and to position care as a social and moral practice in notions of citizenship. Trace is informed by the work of feminist scholars who have argued that care at this specific moment in history can and should be »de-privatized« and »de-gendered,« in order to transform the moral boundaries that have historically »contained« care by feminizing and privatizing it (to use a phrase of Joan Tronto). This obviously raises the complex question of whether and how the moral framework of the ethic of care can be developed into a political vocabulary and of whether and how it can inform and transform current policy frameworks. We enter the field of the analysis of public value systems here, a field that is occupied by a range of professions and their knowledge systems and normative suppositions, with policy analysts, political theorists, sociologists and lawyers being the most prominent.

In my article on health care politics from which Trace originated, I stated that policy documents can be analysed as vehicles of norma-

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2 I mean citizenship in a wide sense here. In contemporary policy debates citizenship tends to get conceptualized in terms of rights and obligations. In my view the ethic of care implies a much broader understanding of citizenship, one that for example also includes topics like political subjectivity, political agency and political judgment (see Sevenhuijsen 1998).

3 I situate my work and the development of Trace in what has been qualified as a critical-political approach to the ethic of care. This approach has been developed and/or inspired by amongst others Tronto (1993), Sevenhuijsen (1998), Kittay (1999) and Robinson (1999), but also by numerous articles on this topic.
tive paradigms. I defined a normative paradigm as “a configuration of knowledge which orders the description of social problems, in order to pave the way for regulation.” I proposed to see policy paradigms as “modes of governance,” ways of forging relationships between political authorities and their subjects, and as ways also in which citizens can perceive themselves as part of a political community. I took Iris Young’s definition of a paradigm as a starting point. She has defined a paradigm as a “configuration of elements and practices, which define an inquiry: metaphysical suppositions, unquestioned terminology, characteristic questions, lines of reasoning, specific theories and their typical scope and mode of application” (Young 1990, 16). From this perspective normative paradigms are broader than value statements: they also contain modes of defining problems and recurrent ways of speaking and judging. By preferring certain narrative conventions and modes of communication, policy documents encapsulate power. They confer power upon certain speaking positions and vocabularies, and are thereby instrumental in producing hegemonic discourses, in including and excluding certain modes of speaking. It is precisely the aim of _Trace_ to enhance insights into how this happens. By tracing “discursive spaces” to further introduce the ethic of care in public debate, it is hoped that its ideas can be shifted from the margins to the centre of political discourse.

One of the leading ideas behind _Trace_ is that we are currently witnessing a paradigm shift. Traditional normative frameworks on care are, for several reasons, no longer sufficient, but at the same time there are no well-developed alternatives available. The ethic of care has the potential to fill some of this space. It can both add to and transform current policy frameworks. But in order to fulfil this promise, its main ideas need to be elaborated, both in philosophical and in practical respects, while a considerable effort must also go into dissemination. When studying public policy through the lens of care, it is striking that care is both present and absent at this moment of time. It is present because care is implied in a broad range of issues, also since the relevance of day-to-day care is receiving growing recognition. Care for children and elder care are, for example, important political issues right now, the latter since it is clear that Western states face the phenomenon of an “ageing soci-
ety,” and in many countries, especially in Africa and Asia, the present pandemic of HIV/AIDS presents urgent concerns in relation to care. But it is also absent, since policy makers frequently use insufficient definitions and contradictory suppositions and values, and since dominant policy paradigms have little space for an ethic of care. Usually they do not acknowledge the ethic of care as a moral vocabulary in its own right. One of the barriers for further proliferating the ethic of care is what feminist scholars have called its “genderload”: too often still it is taken as “natural” or self-evident that women are the main care providers in society, so that no policy response or political regulation is needed here.

As stated above, working with Trace is informed by the growing literature on the ethic of care, which serves as its background system of knowledge and its primary toolkit. In fact, the ethic of care is used in a double sense. It is firstly used as a lens, as a set of spectacles through which the normative frameworks in policy documents can be traced. It provides the policy analyst with a set of sensitizing questions and concepts that should assist in digging out the relevant elements in policy documents. Secondly, it also serves as a standard or a yardstick. After all, care ethicists have developed a series of values and normative statements about the meaning and value of care in modern societies, that serve as an important motivation to engage in political discussion.

It is exactly this double use that may pose problems when working with Trace. A first problem resides in the normativity of objectivity and distance encapsulated in modern scientific epistemologies. I cannot elaborate here on this issue, but want to limit myself to indicating my position as a care ethicist on this point. In my view knowledge production is never value free: we are always implied in discourses, where knowledge, power and value systems interact in complex ways. What we can strive after, though, is reflection and ac-

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4 My first source of inspiration has always resided in the literature on feminist ethics that has flourished enormously in the last two decades. But the ethic of care has in the meantime found much broader recognition, both among philosophers and in applied ethics, as in health care and education. For me it has also proved fruitful to elaborate the core notions of the care ethic with insights from political theorists and philosophers outside its direct domain, as well as with insights that come from empirical results. This underscores that the ethic of care is an approach-in-the-making, while Trace is helpful in doing this in a situated way.
countability on where we stand and where we want to go. Academic scholarship should be conscious and open to its own positionality and situatedness, and also be open to different perspectives on what counts as relevant knowledge and values with regard to specific issues. This accords, in fact, with some of the core values of the care ethic itself: attentiveness and responsibility, as well as the imperative to consider issues from different perspectives.

A second problem of this double use is more serious: it confronts the policy analyst with the risk of over-interpretation, of seeing what one wants to see, or of constructing straw puppets in order to be able to make one’s own point. But also it must be said that it would contradict the above mentioned central values of care to promote its proposals to new “regimes of truth.” But there may also be a strategic consideration here. When falling in this trap, one may overlook where discursive space is actually available, or where possible discursive alliances can be made. In order to avoid these risks and to reach an open, balanced and fair judgment of policy texts, Trace works with different steps, which are aimed at separating the more analytical and evaluative or judgemental dimensions of this form of policy analysis. For this reason also, it is fruitful to read the document several times and/or to work with a group of persons who can all bring their fresh perspectives and relevant expertise in the analysing process.

**How to work with Trace: text selection**

Trace is suitable as an instrument for various sorts of texts. I will now give some examples and illustrate where possible with references to completed projects and publications.

*Single policy documents that play a role in policy preparation and agenda-setting.* To give some examples of my own work: after my publication on the Dutch document on “Choices in Health Care” I have continued with Trace in analysing several Dutch reports on equal-opportunity policies and work-life balance (Sevenhuijsen 2002a, 2002b), as well as the report on the ageing society of the Dutch Scientific Council (Sevenhuijsen 2003) and the Dutch core government paper on family politics (Hoek and Sevenhuijsen 2000). I have also used Trace in international collaborative projects. I used it
with colleagues in South Africa in order to analyse and comment on the White Paper on Social Welfare that was adopted by the South African government in order to lay a foundation for future social policies after the abolition of apartheid. And recently I have taught Trace to a group of scholars who are connected to the Peace Institute in Ljubljana (Slovenia) and who are participating in a project funded by the Open Society Institute. In this context Slovenian scholars have produced articles about documents on social policy, family politics, housing policy and poverty and social exclusion (Sevenhuijsen and Švab 2003). Recently I have used Trace in an analysis of two political documents in the UK about parenting policies. The aim here was to compare their normative frameworks with the moral discourses that arise from civil society organisations and those that are used by parents themselves, as investigated by the group Care, Values and the Future of Welfare (CAVA) at the University of Leeds (Sevenhuijisen and Williams 2003; Williams 2004).

Law proposals, parliamentary minutes, law books and case law. These documents bring us closer to the actual political decision-making process, and also to the implementation side of the policy cycle. These texts often contain insightful statements on prominent principles and values around care. Often also, they are more concise when it comes to spelling out social knowledge and normative suppositions compared to documents in the former category. Although I hadn’t yet developed Trace at that time, its notions underlie the chapter on family law and child custody in my book Citizenship and the Ethics of Care (Sevenhuijisen 1998).

Public debates about issues that deal with care. The use of Trace can also be extended beyond the boundaries of one document. The method can then serve as a tool for documenting trends and shifts in a complete policy field. I have used it in this sense with Dutch colleagues in order to analyse the themes and shifts in discussions on care and autonomy in the Netherlands, where for several years now discussions have been held on the use of advance orders by patients with so-called manic depression disorders. In this project Trace enabled us to compare the normative framework in the policy debate with the moral considerations of the people involved (patients, doctors, family members, lawyers), as they emerged from extensive qualitative interviewing (Gremmen et al. 2002). Another example is a...
project of one of my graduate students, Margreth Hoek, who has developed an elaborated form of Trace to analyse the Dutch policy discussion on family politics, in particular in its aspects concerning “support for parents.”

**Reflective background material that feeds into policy frameworks.** I have used Trace in order to comment on the book, *The Third Way: The Renewal of Social Democracy*, by the British sociologist, Anthony Giddens (Giddens 1998; Sevenhuijsen 2002c). I was interested in this book, not merely because it was influential in underpinning New Labour’s policy programme in social and family politics, but also because it provides a good example of how a prominent social scientist works on the edges between science and politics and transfers certain ideas from one domain to the other. Many other similar publications would be suitable for analysis with Trace: in fact this option often presents itself when working with policy documents, since these frequently contain references to the work of social scientists who have provided the basic ideas for the policy document in question. Obviously programmes of political parties also fall into this category. But even scientific publications lend themselves to this approach. I have used Trace, for example, to analyse the authoritative literature about trust that underpins contemporary political discourse on this topic (Sevenhuijsen 1999).

**Mission statements.** Often organisations like government departments, private charities, hospitals and business firms have “mission statements” in which they present the goals and leading values of their work. Especially where they operate in what is sometimes called the “care-sector,” these documents often contain statements about how these organisations want to promote the quality of care or how they deal with ethical issues in their work. But care also may come in where these documents contain statements about social responsibility or about trust in working relations or trust between organisations and their clients. Cynics will comment that these statements often are no more than paper. On the other hand, mission statements gain in relevance by the considerable shifts in public-private responsibilities that we are currently witnessing under the influence of neo-liberalism. And it is also the case that Trace can be used in projects in order to give more substance, or implementation power to these statements and to better ground them in the
actual day to day work of organisations. I have applied the method myself in this direction in a project with Parentline Plus, a telephone service in the UK that supports parents in educational and relational problems with their children. I have also used it to assess the mission statements of some Dutch conglomerates in health care.

**Educational material.** When engaging in the proliferation of a new set of ideas on ethics, it is obviously relevant to analyse the educational material used by organisations to inform their participants and users in clarifying their values and normative frameworks. *Trace* can be helpful in analysing a range of texts in this respect, from professional codes to teaching university handbooks and course readers. I have myself worked along these lines in assisting with course development at the University of Community and Health Sciences at the University of the Western Cape (South Africa), in the context of a foundation course for first year students on “Introduction to the Philosophy of Care.”

Is it possible, then, to formulate criteria for text selection, that enable the analyst to choose from the multitude of possible texts to work with? Over the course of time, I have developed some criteria in this respect, that especially apply to researchers.\(^5\)

First, it is fruitful to focus on key texts, exemplary texts and authoritative texts. In order to spot these, one must have some insight into the series of texts that make up a political debate or that feed into policy making. But once this insight is there, it is not so difficult to decide on the status of the text. Key texts are texts that have been crucial in setting or influencing a discourse or in forging decisive discursive shifts. Exemplary texts are texts that represent a mode of speaking that can be perceived in several other documents, but that contain, nevertheless, the most elaborated or clear version of the policy discourse. Authoritative texts are texts that are (or have been able) to impose a dominant definition or mode of speaking on a field. Often these will be legal texts that have the power of the law behind them. By selecting texts that fall into one or more of these categories, the analyst will be equipped to make an in-depth analysis of political discourse that would probably be lost when trying to do justice to a whole range of documents.

\(^5\) In applied or commissioned work with organisations, the choice is probably more self-evident.
Secondly I usually try to decide by a quick scan if the text in question provides enough discursive space for an analysis according to the ethic of care. This means that there must be at least some awareness of the importance of care (although it will not always be in these formulations) and of the values that are and should be at play in the field concerned. If this is not the case, it would certainly still be possible to do a Trace analysis on the document in question (sometimes it is also worthwhile to document the absence of care in policy discourse), but it may also be a waste of time and effort to engage in it.

**Being aware of the particularities of policy texts**

Before starting to work with Trace, it is important to be aware of some of the characteristics of policy texts. I will provide a short summary of these, as far as they are relevant for working with the method.

*Denial of normativity.* Analysis with Trace firstly has to face the fact that policy makers frequently want to uphold the notion of a “value neutral state” and of the supposed objectivity of their own work. Only facts should count, not values! This notion is engrained in liberal democratic constituencies, who want to work from the supposition that ethics is a “private affair” and that policy-making should refrain from voicing preferences about lifestyles, preferences and moral convictions. We are in fact faced with one of the entrenched “moral boundaries” here, which is addressed by care ethicists as a boundary that contains the ethic of care: the public-private divide (Tronto 1993). Recently this state of affairs is changing. Over the last decade many governments have been shifting their discourse, and are focussing more on issues of “norms and values.” This has not always brought more solid shared understandings about public values though, since the proposed values are still often supposed more to educate citizens rather than to inform the policymaking process itself in a more reflected manner. This shift has nevertheless certainly brought more openness to tracing values in government documents and to addressing policymakers in their responsibility for dealing with values in a reflective and adequate manner.

*Concealment.* The denial of normativity does not imply that moral concepts and moral arguments are absent in policy documents. It is more the case that they are scattered throughout the document, hid-
den between the lines, or wrapped in empirical statements. To pro-
vide an example of the latter: Dutch documents on work-life bal-
ances recently justified the need for new policies by referring to a
“wish of the majority of the Dutch population to combine labour and
care in more balanced ways” (Sevenhuijsen 2002b). The drafters of
these documents obviously want to remain aloof from more sub-
stantial statements about the importance and value of care, which
is—by the way—quite contradictory to the length at which they pro-
vide normative arguments for labour-market participation. But it
should also be remarked that taking “wishes” as a starting point,
compared to, for example, needs or rights, implies a normative pos-
tioning in itself. After all, it has in the recent past been by no means
clear if governments should have an obligation to fulfil the wishes of
their citizens. Usually both wishes and needs are the subject of polit-
cal interpretation and contestation, as are questions about who
should be responsible in providing for them.

Self evidence. The other side of the coin of denial of normativity is
that values and moral arguments are often taken as self-evident, as
givens that do not need argumentation or justification. To return to
the example of the Dutch documents on labour and care: they usu-
ally copy the mission statement of Dutch equal opportunities pol-
itics, as accepted at the beginning of the nineteen eighties, in which
the attainment of freedom, liberty and equality between men and
women is centre stage. In accordance with these goals, the ability to
“take care of oneself” is presented as the central goal of the pro-
posed policies. Care ethicists have critiqued these value statements,
with the argument that they draw too heavily on the normativity of
autonomy as independence and self-sufficiency and thus have diffi-
culties in dealing with (inter)dependency in caring relationships and
caring arrangements. The drafters of these documents have tended
to ignore these critiques with the argument that value-statements do
not matter so much, and that it is more important to focus on the
actual policies as proposed in the documents. Hereby a situation is
prolonged in which values are seen as self-evident, instead of
acknowledging the responsibility of policy makers to reflect critical-
ly on the values that they promote.

Compromises. It is important to realize that policy documents are
usually the result of complex political compromises. This is certainly
the case in the situation of coalition-governments, as in the Nether-lands, where different political parties have to be “satisfied” in their wish to see their election programmes acknowledged. This can also be the case, however, where documents have been the target of extensive lobbying processes that have gained a foothold among policy makers. But it may also occur that documents are a compromise among various government departments who all have their characteristic frameworks or hobbyhorses. This, for example, is the case in the Dutch document on family policy that contains bits and pieces about equal opportunities, social security and labour law, education and criminal justice. Moreover, documents may contain compromises within one department, as they usually have to go through complex layers of discussion and approval within these organisations. Public servants usually have to comply with the viewpoints of the politicians in charge, or they can try to use the small spaces for manoeuvring that are sometimes left to them.

Contradictions and inconsistencies. All these factors result in the frequent occurrence of inconsistencies and contradictions in the normative frameworks of policy documents. When using *Trace*, it is important not to look for consistency where it is obviously absent. On the contrary, *Trace* can be instrumental in literally “tracing” these inconsistencies and in clarifying their background. They can also be useful as steppingstones (“discursive space”) to formulate the potential contribution of the ethic of care in solving some of them.

The four steps of Trace

Working with *Trace* is divided into four steps, each of which comes down to asking a series of questions of the text at hand. Each step results in the drafting of a working document that contains the main findings of this stage in the analysis. I will now briefly present each of these steps and combine this with examples that may clarify why and how to work with them. It is important to note beforehand that it is not always possible to answer all these questions and also not to address them in the presented order. Also it may occur that when studying the text, other relevant questions and concepts may present themselves, that are not mentioned here. I usually adapt my questions to the topics and documents concerned and also invite those
with whom I work with Trace to be creative and imaginative in this respect. In this sense Trace is a method that is under continuous construction!

**Step One: Tracing**

The goal of this first step is to establish which normative frameworks are actually at work in the text. It consists of the following topics and questions:

- **Text production.** The aim here is to establish under which rules of text production the text is conceived. Who is speaking to whom here, with what authority and with which power relations? This can be traced by asking the following questions: Who are the authors of the text, and under whose responsibility is it produced? Which moment does it occupy in the policy process? How has the writing process evolved? What has been the (potential for) influence by, for example, political parties, advisory bodies, pressure groups and NGOs? Who is actually addressed in the text, and who has to be convinced of what?

- **What’s the problem?** Policy texts usually contain statements about the problem that has to be addressed by policy making. By carefully tracing these statements, it becomes possible to establish that political problem definitions are usually by no means “neutral,” but that they already contain a bias in perceiving the problem in a certain manner. We should, in other words, approach these texts rather as constructors than as describers of social problems (Bacchi 1999). To give some examples: the Dutch text on “Choices in Health Care” took as its starting point that there is a growing scarcity of (medical) care these days, and that the proliferation of modern medical technologies creates an “upward spiral of expectations.” As a consequence the report frames the problem predominantly in terms of distributive justice, while conceptualizing care as a commodity: how can fair systems be developed for distributing scarce resources, and how can the demand for medical services be curtailed? To give another example: it matters a great deal if family politics is approached from the perspective of the division of labour and care between men and women, and their problems in balancing different responsibilities, or from a criminal justice perspective, that constructs the main problem in terms of the safety of citizens, and thus of a need for moral education and moral supervision of children, as is the case in recent
British policy documents and also more and more in their Dutch counterparts. By looking through this lens, several dimensions of policy may become visible:

Firstly: the groups that have influenced the definition of the problem in the report. Not only pressure groups are relevant here, but also professionals with their scientific frameworks and “interpretative repertoires.” Sociologists usually have different approaches to youth crime than behavioural psychologists, and it also makes a considerable difference if they show interest in the results of qualitative research that engages with daily caring practices and the moralities embedded in these, or confine themselves to large scale statistical data. Lawyers have different frames of interpretation of work-life balance issues than economists or ethicists.

Secondly, the relation between the definition of the problem and the proposed solution. There are often considerable discrepancies here. But it is also frequently the case that the statement of the problem is seriously influenced by the available solutions. In the domain of family politics, for example, educationalists and psychologists have a stake in promoting their professional practices and will have easy recourse to a problem definition that supports the very solutions that they can provide. In the Dutch report on Choices in Health Care, the solution was already implied in the way the problem was framed, so that consideration of alternative solutions was blocked from the start.

Leading values. This is obviously an important dimension of Trace. I usually work with a sensitizing schedule of, on the one hand, more (socio)liberal values, and, on the other hand, the more community inspired ones, though there are, of course, many forms of overlap between them. The first group contains values like autonomy, independence, choice, freedom, rights and duties, (self-)interest, equality, responsibility, justice, privacy protection and public-private divisions. The second group contains values like solidarity, community, loyalty and commitment, trust, reciprocity, altruism, friendship and love. The goal is not only to make an inventory of the values that are mentioned in (or are conspicuously absent from!) the text, but also to ask more detailed questions about their role in the overall message of the text. After all, it is by no means self evident how values like equality, justice or responsibility are employed and what they are
supposed to produce. To give an example: it matters how the notion of “responsibility” is substantiated in policy texts. It is often inserted into frameworks of “rights and duties” that argue that citizens should not only claim rights, but take on responsibilities or act responsibly as well (Sevenhuijsen 2000). The underlying notion here is that, once individuals have (freedom) rights, they can be held responsible for their behaviour, since they could always act otherwise. This approach usually offers little space for reflection about how people actually experience or “do” responsibilities, or for the moral considerations they employ in this respect. The discourse on responsibility in fact becomes a strategy of “responsibilization” then, in which “responsibility” is in fact equated with “obligation” (Rose 1999). Another example: it is always important to trace to whom (social) justice is supposed to apply. In the Dutch report on the ageing society, it was, for example, only considered as a value in intergenerational relations, and not in gender relations in labour and care. In order to trace discursive patterns like this, it helps to ask questions like the following: How are these values (such as responsibility or justice) interpreted in the text? In which context do they figure? To which subject positions are they linked? Are they elaborated in a practical sense, and if so, how? (How) are they inter-related? What role are they meant to perform?

Human nature. Political documents usually contain a range of suppositions about human nature, not all of which sit easily with the ethic of care. While these notions are usually not reflected upon, it is important to trace them carefully through the lines of the text. Two examples can illustrate what is at stake here. Firstly, one of the most influential notions in late modernity is that of the self-interested, calculating individual. Here we can see the influence of modern neo-liberal economic frameworks that are underpinned by an image of “rational economic man” (Folbre 1994; Staveren 1999). The notion here is that citizens are primarily calculating beings who make life choices by calculating the economic gains and losses of different life options, and who will logically choose the option that will most bene-

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6 A good example in this respect is the South African White Paper on Social Welfare. It contains a plethora of laudable values that are supposed to serve as a guideline for policy making, but that are, on closer inspection, barely substantiated.

7 There is obviously a powerful discursive alliance between neo-liberal economics and liberal political theory in this respect.
fit them. As a corollary, behaviour that deviates from this image is easily qualified as “irrational.” Values, moral attitudes or virtues like altruism, compassion or unconditional love are easily (dis)qualified as “traditional” or as only pertaining to private life. This produces not only a limited view of ethics, it also prevents a deeper understanding of the moral motivations that people employ in their actual daily life practices (Barlow and Duncan 1999). And secondly, a related notion is that of abstract individuals: persons are frequently constructed as individuals who are expected (or even supposed) to be led by self-interested motives. As a consequence, dependency appears as something that has to be overcome (citizens have to be made independent), instead of as something that has to be dealt with on a daily basis.

Care. An even more obvious object of tracing is, of course, care. Is care mentioned at all, and how is it defined and elaborated? Does the text distinguish between different locations of care, or does it confine it to the private sphere = families = women? What are the open and silent suppositions in this respect? Is care acknowledged as an activity in its own right, or are its characteristics and its goals derived from or made subsidiary to other domains and demands of social life, like for example a work ethic, or a normative framework of integration and participation via paid work and community life, or a discourse on social cohesion? It also may be useful to search for connections between care and human nature here (as in, how far are the notions of human nature able to accommodate care as a human practice?), and also for connections between the notions of care and the leading values of the report (are the leading values linked to its notions of care, and if so, how?; and are these values able to accommodate the values that inhere in caring practices?).

Again, it is by no means obvious how care is positioned in the value system of policy reports. In the Dutch policy discussion on psychiatry,

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8 At this point in my argument it may be clear that working with Trace supposes a basic amount of background knowledge of the ethic of care. Even if the first step of Trace demands that the policy analyst use a distanced and analytical gaze, it would not be possible to answer these questions if one had not reflected on their relevance or mastered the art of reading between the lines and tracing the suppositions of policy documents. This is exactly what I mean by the notion of using the ethic of care as a lens for discourse analysis: one needs sensitising concepts and frameworks to trace the regularities in texts as well as their inclusionary and exclusionary effects.
care was overridingy equated with benevolence (one of the principles in medical ethics) and as such constructed as opposed to autonomy. This is in line with the fact that care is in modern ethical discussions frequently linked to paternalism and thus with control, a configuration in which autonomy as freedom of choice is presented as the solution. Opposite arguments can also be found, however. A recent English document on “parenting contracts” constructs an opposition between care and control. Care figures here as a mixture of support, human rights and leniency, while control refers to the need to regulate parenthood in the name of moral education and social cohesion (Sevenhuijsen and Williams 2003).

**Gender.** The goal here is to establish the degree to which policy documents acknowledge that gender is implied in caring arrangements and the value systems that go with it. It is insightful to work with a multilayered concept of gender here. Tackling the first layer of gender implies asking the question of how the report in question deals with social differences between men and women in the providing and receiving of care. The Dutch report on the ageing society acknowledges, for example, that the bulk of the caring work for the elderly is performed by women, and also provides extensive statistical evidence for this. In its normative framework however, it supposes the existence of an “age old” and universal “chain of love and solidarity between the generations.” By using this metaphor, the possibility to perceive divisions of care and responsibility as matters of social justice between men and women is closed off. A similar discursive pattern is at work in the South African White Paper on Social Welfare. It is acknowledged here that women provide a pivotal role in communities in keeping caring arrangements going. This empirical statement slowly slips into an argument about desirability, when communities are designated as the preferred locations for the provision of care, as opposed to care providing by the state. In this way the report remains, in spite of its references to the recent constitutional clauses on gender equality, caught in a traditional familialist paradigm that sees the family and the community as preferred locations of care.

The Dutch report on Choices in Health Care addresses women as “gatekeepers” in the health care system by stating that they can perform a key role in regulating the “care consumption” of their relatives, without however being sensitive to women’s own needs for care,
or for gender differences in health or access to the health care system. By looking at the way women’s roles are described and how women are addressed, it becomes possible to trace a second layer of gender in policy texts. Here the question to be answered is to which degree gender figures at a symbolic level, and if and how it gives meaning to seemingly gender neutral concepts. The most recurrent example here is the normativity of independence that pervades modern policy texts, ranging from texts about health care to texts about equal opportunities and work-life balance. This is usually linked with an opposition between independence and dependence. The “normal” citizen is supposed to be independent and to take care of his own needs: only “really dependent people,” like children, the sick and the elderly have a legitimate claim to care by others. At this point it can be seen that a normative masculinity indeed informs many policy discourses: it is the masculine self, assumed to be independent and self-sufficient, that is set as an example for “normal” human subjectivity. This may lead to the observation that masculine gender operates usually in terms of gender-neutrality or silence. This is corroborated by the fact that social problems connected to violence frequently lack gender-specificity: it is easier to talk about “domestic violence,” than about violence of men against women. The South African White paper addresses the HIV/AIDS crisis, without reflecting on male sexual behaviour, which is an important cause for the spread of HIV/AIDS. Many examples of the absence of men as a relevant category in social policy could be added. The effect of this silence is that frequently women are selectively held responsible for and targeted to solve social problems that are beyond their power to change.

The role of the state. Policy documents obviously contain notions about the role of the state and the division of responsibilities between

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9 This not only denies the needs for care of so-called “independent people”; it also stereotypes these very “groups” who are constructed as dependent, since it sees them as “dependent care-receivers” and thus deprives them of “normal” forms of human agency and moral capabilities. There is a huge amount of literature that underlines this from the perspective of children and disabled and elderly people and that elaborates on the agency and the moral considerations of these “groups” (see e.g. Wendell 1996; Smart, Neale, and Wade 2001).

10 Joan Tronto’s notion of privileged irresponsibility can serve as an eye-opener here (Tronto 1993). This notion seeks to capture the ease with which persons in positions of power can sustain the illusion of independence by ignoring the diverse forms of care that are invested by others to keep their lives going.
state agencies, private institutions and individual citizens. These notions are important “vessels” for statements on values, and are thus a crucial dimension of normative frameworks. With respect to care, the state may claim for itself the following roles:

- direct care provision, for example, by hospitals, child care facilities and housing facilities for the aged;
- defining responsibilities of different agents in the field, as is the case with legislation on child protection, or, recently in England, by the introduction of so-called “parenting orders” that aim to re-educate parents of children who stay away from school or engage in behaviour that is labelled as criminal. Also, rules and regulations about maintenance fall into this category, or rules in family law that contain rules about care and access after divorce;
- financing caring facilities by private agencies, as is the case in social work, health care and education;
- organizing care facilities, for example by coordinating the activities of private institutions;
- controlling private facilities, like, for example, regulating prices of and access to education, housing and health care facilities;
- the securing of social rights, like the rights for “time to care” (length of the working day, parental leave, leave for care) and for social provisions and social security that acknowledge caring responsibilities (ranging from maternity care to home help care for the elderly);
- notions of appropriate care can also be linked to the state’s role in securing the safety of its citizens, as when moral education is seen as a primary task of parents, a part of their supposed task in producing future citizens.

Rhetoric. The above points of analysis can be supported by looking at rhetorical characteristics of the text. Apart from the first question about text production, this implies that the policy analyst traces the following elements:

Does the text contain “typical sayings,” or “tropes” and, if so, what role do these perform? To give an example: the Dutch documents on combining labour and care consistently state that “in Dutch culture self-care is preferred.” This statement is, however, hardly explained or substantiated. And what is more serious, it is used as an argument to deflect more state-responsibility for caring provisions. Other
examples are stereotypical sayings, such as “Asian families are large enough to look after themselves,” or “it is cultural practice amongst African Caribbeans to smack their children.” These statements not only confirm racist stereotypes, they also are signs of inappropriate cultural respect which ignores the powerlessness and the needs of children. Slovenian and Slovak policy papers have in recent years contained similar stereotypes about the Roma.

Does the text contain conspicuous dichotomies, and, again, what do they have to perform? The most recurrent dichotomies are those between independence and dependence, between care and control, and between rationality and irrationality, or rationality and emotions. Dichotomies usually have an explicit or implicit genderload, as is the case with the underlying masculine normativity of independence and self-reliance. This may have multiple discursive effects, like for example the denial and backgrounding of existing (inter)dependencies, or the inability to talk in terms of relationships or in-between spaces, and gradations of dependence. The opposition between care and control eclipses an understanding that care always implies some degree of “influencing” others, and is thus a barrier towards asking ethical questions about how to deal with this, and where to trace boundaries, for example by respecting privacy rights.

Does the text use conspicuous metaphors and, if so, what do these have to perform? An example here is the notion of an “upward spiral of expectations” in the Dutch report on Choices in Health Care. This is in fact quite a powerful metaphor, since it blocks a more elaborate understanding of how people deal with technological innovations in the medical field, and of how technology actually changes and signifies caring practices.

Usually policy texts also display taboos. A frequent example here, especially following the current trend towards privatization in the social sector, is that arguments that point towards collective responsibilities or spending more money on care are often disqualified or not even considered. Another taboo that I frequently meet is trying to influence or direct men in the way they handle caring responsibilities. It is striking that governments are often more willing to “support” fathers after divorce in having access to children, than to support them in engaging in daily care when relationships are (still) intact. The same goes for the reluctance in South African policy
making to address men about the forms of sexual behaviour that play a role in spreading HIV/AIDS.

Policy contexts often contain open or hidden dilemmas about the question of what is the best course of action. It is important to trace these, and to ask the question of how, precisely, these dilemmas are framed, in order to be in a position later to ask if this has been done in an adequate manner. The same goes for inconsistencies and contradictions in problem definition, values and courses of action.

**STEP TWO: EVALUATING**

When going through the questions of the first step, usually thoughts of a more evaluative nature present themselves automatically. It is however advisable to hold these back as much as possible, in order to reach a fair judgment on the text. It is nevertheless helpful to note them and write them down. On the one hand, one may become aware of one’s own biases in this way. But they may also be helpful reminders (or hypotheses) when reaching the second step, that of evaluation. Usually I divide this step into three clusters of questions:

Firstly, it is important to determine which *political philosophy* underpins the text in question. This is helpful, since this not only may assist in spotting the normative framework, but may also be a signpost toward secondary literature that reflects in more depth on the pros and cons of these approaches, and how they deal with care (and gender!). Again I use a list of approaches that can sensitize the policy analyst in recognising “political philosophies”: liberalism, social-liberalism, socialism, communitarianism, conservatism, religious ethics, virtue ethics. Usually these approaches are not present in a fully-fledged manner: policy makers are often not keen to reflect on these, but just use “thinking as usual.” But this is not always the case: some documents start by reflecting on adequate normative frameworks. The Dutch reports on Choices in Health Care and on the ageing society both contain reasonably elaborated chapters on suitable normative frameworks, and thus lend themselves rather well to answering this question. In most cases, however, policy texts contain fragments of different approaches, which do not always sit easily together: Social-liberal notions of justice and equality may, for example, be combined with more communitarian discourses on social cohesion and public safety; without reflecting
on inherent inconsistencies at this point, that would point to the need for well considered choices about what values should come first. In all cases it is important to try to evaluate which approaches are dominant, and which ones play more subsidiary or marginal roles.

This leads then to the second question in this step, that reflects on the adequacy of the text. With the above answers in mind, we can handle questions like the following: Is the definition of the problem adequate in order to deal with the particularities of caring practices and with the moral demands that these present for those who are engaged in them, both as givers and as receivers of care?

This implies an evaluation of the social knowledge that informs the report: which sources are used for its core statements, where do they come from, and are there alternative knowledges that are obviously ignored? One of the English reports on parenting is a striking example here: it pretends to focus on children, but it is exclusively framed in terms of “child outcomes” (for example in truancy rates), without referring to research that focuses on bringing the voices of children forward. But many more examples could be added. Often, policy documents work with ideology-laden statements about “the” family, without showing any detailed knowledge about how people actually “do” family and kinship, or in which networks of care and responsibility they are engaged, and also without being open about differences among ethnic or religious groups in this respect. Frequently policy texts exemplify the power of professional knowledge systems that narrow the issue at hand in order for it to fit into its vocabulary.

Does the report show any sensitivity to the power relations that are at work in caring practices and the way these are represented in politics? Here power may be analysed in different ways, for example, the effects of dependency, the availability of rights and resources in caring provisions, the possibility of access and exit, and the dynamics of voice and listening. Also—and related to these issues—one should look at textual representations here: to what extent does the report engage in stereotypical and disqualifying remarks?

This leads, obviously, to an evaluation in terms of structural axes of power and inequality: those of social class, gender, and ethnicity, and the ways in which these intersect. There is a growing body of feminist literature on the “caring economy” that shows in detail how western welfare regimes are linked to “global care chains” (Williams
Female migrant workers increasingly move from poorer to richer countries to provide domestic services for white dual career families and to fill the gaps in the provision of health care and teaching. This (re)produces large geopolitical inequalities in care giving and care receiving and seriously affects individuals in gendered, racialised and classed ways. These processes often go unnoticed in western policy texts that, for example, simply assume that it is a logical or good option that employed women outsource the caring needs of their dependents. Also policy texts still frequently assume that “everybody” has similar needs for care in the course of the life cycle, without engaging in research on cultural and ethnic differences in caring needs and the provision of care.

The goal of the third and last question of this step is to reach an overall judgment of the text, and to place this where possible in notions of citizenship. By making a list of the strengths and weaknesses of the report, the question can be answered if the normative framework is adequate in addressing care as a social and moral practice. Also the question of what are the implications of the normative framework for the actual social policies should be addressed here: What are the inclusionary and exclusionary effects in this respect? What forms of intervention are seen as justified and acceptable and which ones are rejected or even unthinkable in the framework(s) adopted? And what effects can be expected from this on caring practices and relationships?

**STEP THREE: RENEWAL WITH THE ETHIC OF CARE**

If all works well, one has, in working along the lines of the first two steps, developed an insight in the elements of the normative framework that are in need of revision and renewal. This enables one to perform the third, more positive, constructive and imaginative step, that of renewal along the lines of the ethic of care. I will now sketch some of the elements of this phase, and—again—give some examples of how to work with it and what it may produce.

Firstly, it is time now to introduce an alternative definition of care. For me it has proved useful to take the overall definition of Tronto and Fisher as a starting point. They define care as “a species activity that includes everything that we do to maintain, continue and
repair our ‘world’ so that we can live in it as well as possible. That world includes our bodies, our selves and our environment, all of which we seek to interweave in a complex, life-sustaining web” (Tronto 1993, 103). They have also proposed to see care as a continuous process that consists of four phases or dimensions. Caring about requires the recognition that care is necessary, that there is a need that should be met. Caring for: once a need is recognized, the problem of who and how to meet that need arises. Taking care of or care giving is the actual practice and work of caring. The fourth phase is care receiving: it requires that care receivers respond to the care received. Although this definition is quite broad it has the advantage of focusing the discussion on the fact that many social practices have or should have caring dimensions: care is not confined to an activity that we do for children, sick and elderly persons in the private sphere but is in fact extended towards many social locations, ranging from education, work places, health care institutions and scientific research to the halls of policy-making itself. The definition also opens the way to a more detailed discussion of specific caring practices, and could lead, for example, to the following questions: What do we have to do in this specific practice to maintain, continue and repair our “world?” What counts as relevant “world” here? And how can we promote this phenomenon of “living as well as possible?”11 What should reasonably be seen as the overall goals of this specific caring practice, and who should be implied in discussing and deciding on this? Would the resulting definition of care lead to a different definition of the policy problem from that proposed in

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11 This is especially urgent to counter parochial notions of care that have grown in influence in the last few years (especially since 9-11-2002) and that conceptualise care in terms of protection of what is considered as “one’s own.” This not only feeds serious forms of ethnocentrism related to questions of who deserve “our” care, it also ignores what should be a central question for an ethic of care: how to step outside the boundaries of one’s “self” and to be attentive to the needs of others. As Joan Tronto has argued on many occasions, the issue of how to deal with otherness and with self-other configurations should be at the heart of the ethic of care.

12 It is fruitful to further develop this approach with the notion of “human flourishing” as developed by the American philosopher Martha Nussbaum (Nussbaum 2000). In fact it is reasonable to state that human flourishing is or should be the overall goal of care as a human practice. It is also possible to substantiate this goal in more practical and applied terms for specific caring practices.
the investigated document, and if so, how? How are care for the self, care for others and care for the world interwoven in this specific practice, and what are the implications for the division of caring responsibilities?

This proposal to see care as a practice can be linked to related forms of scholarship that promote an approach in terms of practices. It is, for example, fruitful and often innovative to look at family life in terms of family practices, and to see how people “do” family: how they arrange domestic work, emotional work, economic responsibilities, leisure and family rituals and which “moral rationalities” are at play here. Policy making can in this respect draw on a growing body of literature that has investigated family practices through these lenses (Morgan 1996; Silva and Smart 1999; Smart, Neale, and Wade 2001).

Secondly, the opportunity is there to draw on the image of human nature that informs the ethic of care and to reflect on the difference it would make if these would be acknowledged in the policy domain at stake. In my view the ethic of care is, in contradiction to, say, liberal notions, based on what could be called a “weak ontology,” a recognition of some elements of the human condition that recur in human life and are also basic to how caring arrangements are shaped. It contains the following elements:

- interdependence and interconnection as basic features of human life;
- vulnerability and fragility as characteristics of everyday life: these are not just phenomena that can be projected on to so-called “dependent groups” or organized away behind screens of self-sufficiency and protection;
- embodiment: we live our lives in concrete situated bodies, and it matters how norms about “normal embodiment” are constructed and how people deal with this in their everyday social practices;
- body, mind and soul: in contra-distinction to the oppositions between mind and body and between rationality and emotions that still inform much policy discourse, we should acknowledge that body, mind, emotions and soul are interrelated in complex ways and that this configuration needs maintenance and care on a daily basis;
- ambiguity, the notion that human experiences do not have a fixed meaning, and thus also cannot be inserted into settled or homoge-
neous frames of interpretation. Instead it should be acknowledged that life situations are always open to a range of interpretations, and that these also shift over a lifetime, and also that there are elements of human life that are beyond interpretation;\textsuperscript{13}

- natality and finiteness: human lives have a beginning and an end, and it matters how birth and death are arranged, and how cultures of care deal with these issues, the space they provide for coming to terms with them, and for experiencing them in a humane way;
- plurality: a recognition of the fact that there is no such thing as “man,” but that humans live different, situated lives, in which they cannot be reduced to group identities, in spite of the importance of group identities in shaping feelings of belonging;
- power: a recognition of the fact that we are all implied in power-configurations, and that it cannot and should not be the goal of ethics to “free” the individual from power by granting him/her individual autonomy, but rather that we should aim for humane, creative and accountable forms of exercising power, that contribute to “living in this world as well as possible,” and to accounting for the consequences of global interconnectedness.

The ethic of care implies a specific set of values that are derived from its overall goal of promoting “a world in which we can live as well as possible.” In her work Joan Tronto has laid the groundwork for a more elaborate discussion of this complex issue. She has proposed that each phase of care is intrinsically linked to a specific value or virtue/quality: attentiveness, responsibility, competence and responsiveness, and that these four values together are the core of an ethic of care. I usually add trust as a fifth item to these core values (Sevenhuijsen 1999). Since interdependence is characteristic of many life situations, this implies that we are dependent on the actions of others in order to be able to live a good life. Trust should in this perspective be conceptualized as (the possibility) of entrusting ourselves to the care of others. It implies that caretakers take goodwill, reliability, transparency and accountability as leading values of their caring practices. By implication, it becomes an import-

\footnote{\textsuperscript{13}It may be clear by now that this notion presents a range of ethical issues for researchers. It may underline the need to rethink settled practices of research ethics from the perspective of the ethic of care.}
ant issue for organisations and policy makers in the field of care how they can promote “climates of trust.” Trust is what I usually call “the oil in the wheel of care”: without trust the continuity in the four phases is hampered, and care becomes fragmented and diminishes in quality. When engaging in discussions about “renewal,” it should be considered what difference it would make if each of these five values were acknowledged as relevant to the topic under discussion. This can lead, for example, to the question of how policymakers can be attentive to the needs of the users of public services, and how they can raise their awareness about what is actually going on in caring practices. Or it can lead to shifts in notions of responsibility and in decision-making about who is responsible for what in caring practices.

But the ethic of care supposes in fact that more alternative values should be considered when reflecting on how care can optimally proceed. Some of the values that seem relevant to me here come from the domain of virtue ethics, like compassion, generosity, and forgiveness. Others are reformulations of more familiar values from the perspective of care. Feminist authors have, for example, developed the concept of relational autonomy, the idea that autonomy in the sense of being able to direct one’s own life can only flourish under conditions of recognition and supportive care. But additional values like respect, human dignity and integrity should obviously be a part of this list.

This idea of reformulating existing values can be applied to other accepted values as well. Feminist moral philosophers have put a great deal of effort into developing new notions of justice that have the ability to incorporate the values of care. The same goes for notions of solidarity, or for notions of privacy, freedom and rights. They have also presented proposals that elaborate what this would mean for practical applications, as in issues of health care policies, abortion and reproductive technologies, or in labour law and social security or in issues of global justice. This has not always been done

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14 Of course, a lot more could be said about each of these values, and each of them deserves further elaboration and substantiation in the context of the care ethic. There is, indeed, an extensive literature on each of them. It is however not the goal of this paper to go into depth in this respect, but rather to introduce the core concepts of the ethic of care in so far as they are relevant for working with Trace.
from an explicit notion of care. However there are many related perspectives that can serve as sources of inspiration. And there is also some common ground in feminist ethics that enables this, such as the recognition that relationality is a basic feature of human life, and that we thus should further develop moral vocabularies that can accommodate this.

What can the ethic of care perspective contribute toward reformulating or solving dilemmas and inconsistencies in the framework of the report? It has, after all, been an important impetus for the development of the ethic of care, that, by looking from different, concrete perspectives and by taking responsibility and context into account, some dilemmas might become less problematic than when adopting a rights and principles perspective, and that by taking a care perspective it might be possible to reconcile different interests (Gilligan 1980).

It is also important to draw where possible on the insights of alternative social knowledge, or to generate these where they are absent. The above mentioned project on care and autonomy in psychiatry produced fresh and constructive insights in this respect. Another example is the renewal of discourses on social work or on family politics with insights from qualitative research about family practices (Bozalek 1999), or from interviewing children about how they deal with the divorce of their parents (Smart and Neale 1999; Williams, Popay, and Oakley 1999). There is much more knowledge available now about how social service users evaluate the caring provisions in which they partake. It is in fact an element inherent in seeing care as a practice that the perspectives of care receivers should be fully implied in the evaluation of the quality and effectiveness of these services.15

What are the implications of the ethic of care for integrating a wider range of participants into the policy process, and how could this be put into practice? Which groups and organisations should be included and which relevant voices do they represent?

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15Policy makers do not always have to be referred to research in this respect. Democratic policy making implies that the voice of those concerned in a specific topic should be heard, a notion that is recognised in proposals for “inclusive democracy,” “interactive policy making” and “public dialogues” (see Young 2000).
STEP 4: CONCRETIZING

The aim of this step is to move the analysis back from the more philosophical to the concrete level, and also to compare the insights of step 3 with those of the first step. It thus becomes possible to more concretely formulate which alternative perspectives the ethic of care can bring to the policy debate in question. This step starts from a reflection about responsibility and proceeds than to measures to be taken. It implies asking the following questions: Which division of responsibilities and which role of the state would be suggested by an approach from care? The more concrete questions of policy measures can be summarized in four questions: What can stay in? What should be removed? What should be modified? What should be added?

The final question is of a more evaluative nature. Does the ethic of care indeed provide a suitable policy alternative, both at the level of the normative framework and of the concrete policy measures? And what are the implications for related policy fields if its propositions were to be accepted?16

TRACE: ITS AFTERMATH

After having completed these different steps, one is in the possession of a series of working documents which contain the results of each step. A rather crucial question arises at this point, that of presentation of the results to the “outside world.” The question of how this should be done depends on the position one has or wants to take vis-à-vis the policy field under analysis. It obviously also has to do with considerations of strategy and of suitable avenues of dissemination. It is possible to write in as detached a mode as possible and to use Trace as an instrument for scientific publication. It is also possible to position oneself as a part of the policy discussion and to address policy makers in a more direct manner. In both cases it is, of course, by

16 An example here is the interrelation between labour market policy and health care policy: if a more even division of labour and care between men and women is the goal of labour market policy, this has serious consequences for the way in which health care policy organises care for the elderly, and the relation between public and familial care in this respect. And since global care chains are becoming increasingly important, these fields are also linked to migration policies. As a consequence, the normative frameworks in these various policy domains should all be revisited.
no means necessary to present the entire range of results of the analysis, or to follow the steps exactly when writing about them. Creativity is required in this respect. This can be enhanced by answering the following questions: Which audience do I want to address? Where are possible alliances in the field with whom it is fruitful to cooperate? What message do I want to get across? What rhetoric is useful and effective in doing so?

But there are also other avenues for working with Trace. As stated above, it is possible to work with some of its ideas in direct cooperation with organisations who want to reflect on the values in their work: I actually do this myself in my consultancy work. Here it is even more necessary to work in a selective and creative manner with the several steps of Trace and its leading concepts and notions, while it is also possible to work in more interactive ways in reaching to the final results.

Some evaluatory remarks

I want to conclude this paper with some reflections about what it is like to work with Trace and how the technique could be further developed. First of all, it must be said that the academic colleagues and students with whom I have worked along these lines have all been enthusiastic about its potential. Working with Trace usually gives people tools to really work with the ethic of care, and it also provides new insights and fresh perspectives. It not only contributes towards (discussions about) the policy field in question, but also towards further elaborating, revising, grounding and justifying the ethic of care. It is also the case, however, that implementing the different steps is not always easy. It requires not only time and patience, but also background knowledge from different angles: the basic literature on the ethic of care, the more elaborated literature about the relevant moral concepts and also sufficient knowledge of the policy field and the social domain in question. In this respect it helps to work with Trace in a group. This method not only assists in reaching a balanced judgment on a policy text, but is also supportive in providing background knowledge about the issues and discussions at hand.

A different story should, however, be told about policy makers. They do not always see the need to reflect on values, or revise their
normative frameworks. And even if they do see the relevance of the ethic of care for their field, they are often bound by political configurations in continuing to “think as usual.” It is not an easy thing to change and/or unsettle settled political discourse, since there are power, interests and positions at stake. This means that dissemination of insights has to proceed “with care.” But it should also be noted that trying to influence political discourses on care is not without risks. After all, care is by no means absent in political debate at the moment, and the risk for cooptation of the ethic of care is by no means illusionary, since political discussants are often prone to integrate some of its message into their frameworks and to leave others out. Trying to change the terms of political discourse supposes a minimal amount of presence: of persons and organisations who are open to new ways of thinking and who are in a position to really make a difference. This underlines, again, the need for building sustainable alliances within the domains in question.

This brings me to a more fundamental thought about the current status of the ethic of care. Since the care ethic is a newcomer in the policy field, its proponents are still “outsiders” to a considerable degree. And it is usually a long road before one reaches the inside! These dynamics between inside and outside are, on the other hand, also one of the strong features of the ethic of care and of working with Trace.17 Trace is, in fact, a double edged method. It is critical through and through, since it refuses to accept established modes of thinking and aims at establishing what is beyond and underneath policy texts. But it is also creative and utopian, since its aim is to show that we can also think and act differently. This is especially relevant for policy making, which too often bases itself on outmoded ways of thinking that have in social reality been surpassed by innovative practices and fresh scientific insights. I see it as a creative practice for social scientists to render the new visible and to help to articulate it. This supposes the willingness and the ability to continuously move from the outside to the inside and vice versa, and underlines that it is fruitful to employ both observer and participant pos-

17 This way of employing the dynamics of the insider-outsider position is, in fact, an important part of feminist epistemology and is especially developed by black feminists (see Collins 1991).
itions when doing work in political theory, to frame it in Hannah Arendt’s terms.

This may also be helpful in dealing with another risk of working with *Trace*, that of turning the ethic of care into a “method,” as if it would be its sole aim simply to gain acceptability for new ideas and concepts, and merely to replace leading policy values by those of the ethic of care. The core idea of the ethic of care in my view is that care is a *practice*, and that it is crucial to developing a moral attitude—and thus also a moral vocabulary—of care by engaging in the practice of care. In so doing, care can grow into a disposition, a part of our everyday thinking and acting, in a way that also extends towards the political. The problem with a considerable number of policy makers is—of course—that they are far removed from the world of daily care, and often do not have a clue about what (good) care is all about, and what is implied in really taking it seriously.\(^{18}\) It is—of course—no coincidence that it has overridingly been women who have put great amounts of effort into bringing care into the political arena, since they are the ones who have the widest array of experiences and viewpoints in this respect. These thoughts underline, however, the need to be persistent in bringing care into the political arena. After all, the possibilities of engaging in caring practices are all considerably moulded by political arrangements that set the rules and principles about how these should proceed, and (should) provide a considerable part of the resources for care to proceed “optimally.” It may be exactly this dynamic of inside and outside, and of participating and observing that can be helpful in developing this persistent attitude, and to further develop areas of “situated knowledge” that position themselves as part of different citizenship practices. It is my hope that *Trace* may provide a modest contribution in this direction.

\(^{18}\)Taking care seriously would also unsettle established frames of policy and politics that equate policy making with control and regulation, or with the top-down securing of morality and moral behaviour. The ethic of care, after all, is critical of an approach that equates care with control, since its point of departure resides more in moral attitudes like attention and recognition. It is supportive of a “bottom-up” perspective as a guideline for both political activity and for moral epistemology, and is thus allied to a participatory model of politics and citizenship. For me an important source of inspiration in this respect has been Kathleen Jones’ work on compassionate authority (Jones 1993).
References


Williams, F. 2003. Trends in women’s employment, domestic service and female migration: Changing and competing patterns of soli-


In the mid seventies of the past century in Western countries, the increase in the proportion of women in the labour force market became evident (Hantrais and Letablier 1996). In this period the concepts and measures of family policies began to connect employment and family. There were various initiatives for the state regulation and a reconciliation of work and family life. At the start of the 21st century, mass employment of women is no longer a new phenomenon, and in Slovenia it certainly has a long tradition. The relation between work and family is, however, still problematic, or at least uneasy. This is especially clear when one considers the actual (in-)effectiveness of various policies that aim to promote a reconciliation of work and family life.

Taking the ethic of care perspective, this paper deals with the way in which Slovenian family policy conceptualises the relationship between family and work responsibilities. The ethic of care perspective enables a shift away from the dominant political model of thought that locates care in the private sphere, defining it as unpaid, socially insignificant and largely female work. It allows us to contest such traditional, reductionist understandings of care in today’s policies. It aims at relocating care to the public sphere where it has not existed and turning it into a politically relevant theme, especially by relating it to the concept of active citizenship. In today’s family and social policies, actual attributes of care are often shrouded in ideological assumptions about family, gendered division of labour, mothering and childcare.

This paper aims to contribute to a new approach to care in family policy by looking at one of its core concepts—the concept of recon-
ciliation of family and work. While family policy in Slovenia seems to be very modern as far as recognition of the heterogeneity of family life and promotion of equal opportunities are concerned, analysing this policy from the ethic of care perspective reveals several problems, such as the emphasis on the model of the economically independent individual; particularity and segmentation of measures, for example parental leave and equal opportunities policy, and absence of care for the elderly in family policy.

**Tracing the leading values—the normative framework of family policy in Slovenia**

Family policy in Slovenia is primarily defined by the Resolution on the Principles of the Formation of Family Policy in Slovenia.\(^1\) The fact that it has been 10 years since the adoption of the Resolution reflects the need for a reformulation of the orientation of family policy, a fact which has been pointed out by various studies (Rener et al. 1998; Švab 2003).

In several places the Resolution speaks about social policy rather than family policy thus creating a certain amount of conceptual confusion, since the Document is explicitly designed for family policy, which gives the impression that in Slovenia, family policy is separated from social policy. The discussion on the relationship between social and family policy certainly deserves separate consideration. However, the constellation of the relationship between social and family policy in the Resolution makes it clear that family policy is a sort of “sub-policy” subject to social policy, at least in some segments.

The Resolution defines a family as a living community of parents and children. The family is seen as the primary social space that gives optimal possibilities for the emotional and social development of children and that thus bears the responsibility for their well-being. It is said that the family has an important role in the maintenance of social cohesion, while it is also seen as an important production and consumer unit that influences the economic development of society. Moreover, according to the Resolution, a family is a life-long community of children and adults who permanently take care of these children: grandparents and grandchildren, foster parents and fos-

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\(^1\) *Official Gazette RS*, No. 40, 17. VII. 1993.
ter children, carers and children in care. The subjects of family policy are also couples or women expecting children.

*Protection, freedom, solidarity, wellbeing and equality* are generalized basic values which define social policy including family policy. *Protection* is prioritized as the basic stabilisator of the social position of citizenship, balanced with *freedom* (or with endeavours to establish such balance) as the second basic value orientation. The Resolution claims to support such programmes and measures which would increase the *freedom of the individual*, without prejudice to his or her protection. It also expresses its awareness that protection cannot be guaranteed unless society provides a certain level of *solidarity* and that care for the quality of life or wellbeing of all people should present at least a long term goal of every developmentally oriented society. This ensures not only that there are services available to people, but also that welfare services work as an “insurance for possible future needs” (Szebehely 2003, 1).

It is interesting that the Resolution stresses the basic change in the value orientation of social policy—the transformation from an egalitarian value orientation to the values of protection and freedom—as a positive one. This formulation is probably a result of linking equality with socialism (and collectivisation), and therefore ascribing it a negative connotation, while (social) protection and freedom are seen as “positive” (social-liberal) values that ought to be promoted and achieved through the processes of post-socialist transition. Although it is clear that equality is not excluded, this formulation could be seen as an attempt to untie the concept of equality from its “socialist” connotations. However, we must not overlook that this also means a shift to more liberal values that are based on employment status, consequently leading to the creation of social inequalities.

However, there is a positive side to the value orientation of family policy, namely that care (at least for children) is recognised as a collective (social and state) responsibility. As a matter of fact, all the stated values are also values that the ethic of care perspective promotes. This is especially important because family policy could also have followed another route by promoting more responsibility for the family and parents.

In its normative framework family policy in relation to *work and family* primarily provides the following statements/starting points
and concepts: 1. The family is seen as the primary social space, which provides optimum possibilities for the emotional and social development of children, and is at the same time responsible for their wellbeing. Therefore, childcare is seen as the primary function of the family. Children are considered a constituent element of the family or as a precondition for its existence. Even more significantly, there is an implicit connotation that childcare is the only politically recognised type of care within the family (the definition of the family). 2. Equal opportunities for both sexes (the 5th principle of family policy) are (declaratively) promoted and are to be implemented through different measures especially in relation to the reconciliation of work and family. 3. Conditions for the reconciliation of family and professional obligations of parents (mother and father) should be created, and equal responsibilities of both parents should be encouraged (the 8th goal of family policy).

In a separate paragraph, “Work, employment, employment policy,” the Resolution further elaborates the intention of the state regarding the reconciliation of work and family. According to the Resolution, family policy and employment policy intersect at the point at which the individual distributes and reconciles his/her time between family responsibilities and professional activities. As stated in the Resolution, this presents the problem of spending and distributing time, of the assertion of equal opportunities for both sexes, of the consideration of family needs in the professional sphere, and of the reconciliation of the needs of family life and parental responsibilities with professional activities.

In the Resolution, the state binds itself to support the following activities promoting the reconciliation of work and family: a more adequate moral and material social valuation of work with children and a more equal distribution of responsibility for them between the mother and the father, between parents, companies (employers) and society; for reorganisation of working hours; for legal adaptations in the field of the forms of employment; a more favourable arrangement of parental leave; the guarantee of equal employment on return to work; full social insurance in case of part-time employment or temporary interruption of employment, for nursing of and care for a small child, and nursing and care for children with impairments in physical and mental development; and for the provision to all parents
who wish so of places for their children in daycare institutions or other forms of childcare. The Resolution states the awareness that “these confluence points demand a certain amount of social intervention,” and it therefore sets out detailed measures in this direction, among them maternity leave and parental leave and compensation for income lost during the time of the leave, and the right to different working hours for parents with children under the age of three.

Obviously Slovenian family policy also promotes the ideas found in the the ethic of care perspective, especially as far as value orientation is concerned. However, as will be shown later in the analysis, these ideas are promoted only on the declarative level, while further in the Resolution they are placed in the context of the promotion of employment status in family policy. Often the ideas stated on the declarative level are not implemented through concrete measures.

Tracing care in the relationship between work and family

Apparently, the major problem of the concept of reconciliation of work and family is that it is led by a special constellation of premises which prioritise certain aspects of the relationship between work and family, among others the child and his/her needs or wellbeing. Concretely, in Slovenian family policy this means that care within the family is reduced to childcare, which is also recognised as the most important “family function.” No attention is paid to the fact that one of the main problems that family policy in Slovenia will have to face sooner or later is care for old people, who are becoming an important segment of the population in ageing Western societies and in Slovenia as well. While it is clear that a great deal of care for the elderly is provided by family members and relatives, and therefore that it should be conceptualised within family policy as well, elder care in Slovenia is the domain of social policy. Also, Slovenian family policy does not take into account the need for mutual care between (healthy) adults, nor does it acknowledge the need for care for the self.

The result of the reduction of care in the family to childcare also means that in the framework of the reconciliation of work and family, measures are focused on caring for children (daycare, maternity leave) and not primarily on the promotion of equal opportunities for both sexes (which is also the aim of family policy and is a practice in
some Western countries, for example Scandinavian countries). Therefore, equal opportunities for both sexes are considered only with regard to childcare and are mainly related to it, while all other segments of care and gendered division of labour in the family are omitted.

Special priority in the work-family relationship goes to \textit{work} or employment, under the assumption that all adults are actively present in the labour force market and are capable of taking care of themselves (and of their families). Family policy is still based on a traditional understanding of the monolithic nuclear family as the socially desired model in which care is considered gender specific work.

\textbf{The model of the economically independent individual in family policy}

While in its introduction the Resolution states its intention of reaching beyond the industrial model of social policy in which social protection is provided primarily for the active part of the population (the employed), it also states that soon social policy will no longer be able to be based on full-time employment or the status of regular employment. But in this very introduction, there is “a safety valve” added, namely that social protection of people will have to be based on the \textit{status of citizenship} and only additionally on \textit{employment status}. Nevertheless, it seems that the Resolution clearly favours the model of the independent employed individual when it comes to objectives and measures.

One of the most obvious concrete examples of the privileging of employment status and the subjection of care in Slovenian family policy is \textit{maternal or paternal leave}. The right to compensation for the period of maternity leave is constructed as a right in employment law. Only women who have started their employment before the beginning of their maternity leave are entitled to it, while unemployed mothers and student-mothers receive only minimal compensation or parental allowance. Unfortunately, the parental allowance is not high enough to guarantee even basic survival. Relating care to employment status, therefore, leads to selectivity which deprives the most vulnerable social groups (the unemployed, students). This is in a way hypocritical, because if we relate maternity, paternal and parental leaves with employment, we actually endanger the very children of the unemployed (and the not employed) parents, which is
in opposition to the Resolution’s own initial political intention, namely care for children.

One of the main manifestations of increasing individualisation is the norm of economic independence, which in Western countries, and in Slovenia, is clearly expressed by the premise of the “model of the adult worker” (Lewis 2002) able to take care of him/herself. This model is based on the idea that all adults are potential members of the labour force. Lewis notices (for England) that policy makers have substantiated this idea in the change from the family model with a male breadwinner to a family model in which both partners are present in the labour force market (model of the adult breadwinner). This change enabled the formation of new premises in policies in which the employment of women is often equated to the employment of men, without any consideration of differences between men and women (such as shorter working hours for women, frequent interruptions of work due to children’s illness, lower wages of women and so forth). Lewis states that in regards to changes in social reality, policy makers are often ahead of their time (Lewis 2002) when they speak about the presence of women in the labour market. The dangers of the assumption that all adults participate equally in the labour market are revealed by the fact of an unequal division of unpaid labour. The actual differences have shown that it is not possible to speak about a turn to a two-career model (in which women can develop their professional career, which would presuppose an equal division of labour in the family), but rather the turn to a model of two adult breadwinners (in which both partners earn an income, and family work is predominantly done by women). In Slovenia, the situation is similar; only this “turn” began to develop as early as the post-Second World War period, when the participation of women in the labour force market was proportionally much higher than in Western countries. Mass entrance of women into the labour market has not created two-career model. On the contrary, it brought about the model of two adult breadwinners with the emphasis laid by family and social policy makers on employment, which is supposed to guarantee independence and self-sustainability.

The relationship between work and family is characterised by contradictions in the valuation of work and family spheres. Indeed, the relationship between work and family in the concept of the reconcili-
ation of work and family is not an egalitarian one. It is understood in a binary way—as a dualism in which the (values of the) two elements are in opposition, one element being subjected to the other: in the relation between work and family, the sphere of work occupies the dominant place and dictates the role of the family in this relationship. For example, the Resolution states that “the individual distributes and reconciles his/her time between family obligations and professional activities”—work is positively determined as an activity (it implies career building), while family is constructed as a burden (obligations), which implies that family obligations present an obstacle to career development, while conversely, it is not acknowledged that from the perspective of family life, working conditions impede the carrying out of family obligations or demand their constant adjustment to conditions in the sphere of paid work. While, in contrast, good practice in the policy of reconciliation of work and family in Scandinavian countries shows that the result of family friendly policy measures is the creation of an environment in which work and family life are not understood as conflictual, but rather complementary spheres (Hantrais and Letablier 1996, 127).

Seen from the ethic of care perspective, the privileging of employment status and the ensuing premises on the independent individual who is supposedly able to (take) care of him/herself on the basis of his/her income, has a series of other deficiencies, such as the problem of individualisation discourse present in some social and family policies in the West. One of the dangers of the discourse of individualisation is that it only recognises care in relation to “genuinely dependent people,” while all others supposedly do not need care (Sevenhuijsen and Hoek 2000, 5)—or are able to (take) care of themselves. The ethic of care perspective refuses such polarization of dependence and independence, and, instead adopts a relational perspective which originates from the idea that care constructs relations/relationships between individuals. The opposition between the individual and society should thus be replaced by the concept of interpersonal dependency. We also need “to avoid equating independence with self-sufficiency, since care and responsibility then remain invisible. Even ‘self-sufficient individuals’ have to take account of their responsibilities for others and the care this entails on a daily basis in many situations of their lives” (Sevenhuijsen 2002b, 30).
Particularity and segmentation of measures

Another problem of Slovenian family policy regarding the relationship between work and family is the segmentation of measures: that is, individual measures are not integrated into a systematic policy which would include the state, individuals/citizens and employers. Apparently, only those aspects of care are exposed which can easily be translated into concrete measures, such as maternity leave and public childcare. There are no concrete measures nor any systematic policy designed for issues related to privacy or everyday family life, and especially to care and the gendered labour division within the family. This lack of systemic policy is also reflected in the fact that by far the bulk of actual measures relate to several kinds of parental leaves, which are, however, mainly concentrated in the period of the first year of the child’s life. Parental leaves are an instrument for financial compensation for the period of maternal and parental leave, and for job retention after the return to work. Considering the fact that the actual reconciliation of work and family continues in the post-return period, there is, indeed a lack of measures (with the exception of institutionalised childcare services). Besides the absence of systematic policy, or rather because of its absence, the final realisation of concrete measures turns out to be problematic as well. The following examples will tell us why.

Parental leave

The first example of measures coming from the policy mechanism of the reconciliation of work and family relates to parental leave. In Slovenia, there are four kinds of parental leave: maternity leave, paternity leave, child care leave and adoption leave,2 while the countries of the European Union know three different types of “parental” leave: maternity leave, which is an intransferable right of the mother at childbirth, paternity leave and parental leave. The Netherlands also acknowledges adoption leave. The latter is equivalent to child care leave in Slovenia, which is interchangeable and can be used either by the mother or by the father,3 and the former (90

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3 Child care leave in Slovenia comprises 260 days immediately following maternity leave (105 days).
days in Slovenia) aims to encourage care for the newborn baby by both parents.\footnote{The father should use paternity leave during the mother’s maternity leave in the form of 15 days of full-time absence from work, and the remaining 75 days in the form of full absence from work before the child’s 8th year. For the 15 days, the right to paternity compensation is applied up to 100% of basic salary, while for the remaining 75 days of paternity leave the payment of social security contributions from the minimum salary is provided by the state.}

In Slovenia, paternity leave has only recently been introduced, in January 2003, so it is not possible to foretell how frequently it will actually be used. The fact that only one percent of fathers makes use of child care leave reflects the ineffectiveness of a measure which is not integrated into a policy system that aims at a reconciliation of work and family for both women and men. Therefore, the arrangement of paternity leave has had a poor chance from its inception. The time span available for fathers to use at the birth of their children (or during the mother’s maternity leave) is too short to actually contribute to a more constant, proportionate, balanced division of care between the parents; moreover, the remaining part of paternity leave is negatively motivating, with the state offering only the payment of a social security contribution and only from the minimum wage. The final success of paternity leave—the actual increased participation of fathers in childcare—cannot depend only on its legal arrangement; rather, it should be accompanied by other mechanisms, such as the creation of family-friendly jobs, the enhancement of the motivation of fathers to choose paternity leave, changes in images of masculinity etc.

We can observe a similar situation as that recorded in Sweden, where “the options were set for a choice to be negotiated between the parents themselves. This left considerable room for manoeuvre in negotiations on the basis of highly gendered conditions, with the result that caring usually remained the mother’s prime responsibility, even if fathers usually assisted to a greater or lesser extent” (Björnberg 2002, 95). Taking parental and/or paternal leave by men is only an option (therefore a free choice). In such a conceptualisation, men are seen as “potential carers” (it is their will to take the leave or not), while women are seen as “primary carers.” This creates the situation in which paternal and parental leaves have few chances of being implemented. Without any sophisticated mecha-
nism that would promote paternal and parental leave while also forming an integral part of a more systematic policy on care, the parental and paternal leave as measures of equal opportunity policy have little chance of achieving their primary goal.

Another problem that results from the fact that the reconciliation of work and family is situated within family policy is that there are many different measures that regulate the relationship between work and family. Various forms of leave in the field of parental care are primarily designed for caregiving by the parent. These refer to her/his temporary exit from the sphere of paid work, but they are not sufficiently integrated into equal opportunities policies. I see them as only one dimension of equal opportunities policies. An additional problem is that the latter are not designed in Slovenia as a systematic policy that would include the different aspects (and consequently aims and measures) of achieving equal opportunities for women and men. Although paternal and parental leaves should be an integral part of equal opportunities policy and the policy of reconciliation of family and work, they should not be treated as the only one. After all, the period of early care for children (the 1st year) is a relatively short period of time in the life course of an individual or his/her family. The gendered division of labour within the family goes far beyond it.

**Childcare**

Besides several forms of parental leave, there are also several services providing day care when parents are at work. Job security when returning to work after parental leave is certainly an important measure in the policy of reconciliation of family and work; however it is not sufficient without a good system of day care. Slovenia has a well developed and well organised system of public daycare with its “public kindergartens.” There are also some private kindergartens, but their number is small (14 in the school year 2000/2001 [Ministry of Education, Science and Sport]). Public kindergartens have a long tradition in Slovenia and were one positive legacy of the socialist era. They include child care as well as an education component defined by the state within the curriculum.

However, there are also problems regarding daycare services for children. There is a big problem of uncontrolled private daycare
services—private nannies who in their services avoid state control and the standards set for public and private daycare centres. This is not only a problem of the grey economy, but also of the quality of such care, which comprises a substantial number of preschool children. According to official statistics there were 63,328 children enrolled in kindergartens in the school year 2000/2001 or 61.6% of all children. The rest attend various forms of informal daycare. Here we should also take into account that the majority of women return to work after a one-year parental leave: 80.2% of mothers work the same number of hours or even more than before they have a child; 5.9% work less than before the maternity leave (part-time work); 6.6% of mothers do not return to work right after the one-year parental leave but go back to work later; and 7.4% of mothers do not return to work at all (Stropnik 2000). Children are most often put into informal daycare with private nannies or grandparents. It seems that this trend will not develop in a positive direction because the costs of public daycare are increasing, although the costs for public kindergartens are paid according to parental income.

Equally significant is the fact that a large proportion of the informal daycare for children is provided by informal networks of relatives, most often grandparents. This form of childcare has several advantages over institutional daycare: it is cheaper, it is more trusted by the parents, and time-wise, it is much more flexible. It seems that although the system of public day care for children is well-organised in Slovenia and represents an important element of the policy of reconciling family and work, it is still the case that parents have to adjust their schedules to the kindergartens’ working time instead of the opposite. The problem of public childcare centres is the rigidity of their eight-hour morning-to-afternoon working hours, which are only slowly adapting to the variety of working hours of parents, and with Saturday or late afternoon care only rarely offered. There is, thus, another problem with regard to the gendered division of care and child care in particular, namely that the process of redistribution of family work is not going on in the direction from women to men but from women to other women (grandmothers, neighbours, friends etc.) (Rerrich 1996, 29; Rener 1996, 143).

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6 The majority of daycare centres close at half past four or at five in the afternoon.
EMPLOYERS AND THE WORKING ENVIRONMENT

In several European countries the increase in the employment of both partners first led to measures towards the reconciliation of work and family and later to the establishment of family friendly policies in working environments. Family friendly working arrangements are an example of good practice in the reconciliation of work and family life. In Slovenia, the process of opening towards family friendly working arrangements and policies has not yet begun, and in many respects still seems to be quite far away. There are frequent cases of serious violations of the rights of female workers by, for example, the signing of blank contracts. The Resolution is rather parsimonious in its definition of the role of employers in the policy of reconciliation of work and family, and leaves this shift to their private initiative. Indeed, employers do not function as active partners in the division of responsibilities for the reconciliation of work and family—this is largely seen as a matter between the state and the family. While the state promises to support, for example, “a reorganisation of working hours” and “legal adjustment of forms of employment,” responsibility is left with the employer (without state interference): “while the companies will also have to do their part, namely with the organisation of work which will provide flexible jobs and flexible working hours (adapted to family).” The experiences of states where work and family are systematically reconciled clearly show that employers do not contribute to the creation of family friendly working environments without direct stimulation from the state. Existing family policy measures do not suffice for the working culture to change (employers have to be stimulated to see the advantages of family friendly working policy measures, for example in a higher quality of work).

7 Various forms introduced in some Western countries are: term-time working (gives permanent employees the opportunity to use unpaid leave of absence in time of school holidays); job share (working arrangement between two permanent employees to share the working responsibilities, pay, holidays and benefits of a job according to the number of hours worked); part-time working, working from home, special leave for the purpose of health appointments, hospital visits or special school events <http://www.ibh.org.uk/balance/flexwork.html>.

8 There were many cases reported of employers demanding that women sign a blank contract. In the case of pregnancy, the employer would not be obliged (having such a contract signed by the woman) to take the woman back in the job after her maternity leave.
CARE FOR THE ELDERLY

With its increasing share of elderly people and over 14% of its people aged over 65 years, Slovenia belongs to the group of ageing societies. This phenomenon opens up a series of important questions concerning elder care, questions that address family and social policies. Primarily, two questions seem important. Firstly, the question of the dividing line between public and private responsibilities in care for the elderly. Secondly and related to this, the question of the effectiveness of the system of public care for the elderly (institutionalised care, support networks for families etc.) and the associated question of the availability of public resources. In this context, we can expect that the role of families in the provision of elder care will be put on the agenda again and that the state will once again try to transmit responsibilities to the family (Švab 2003).9

Regarding care for older generations in Slovenia, two situations are symptomatic of its family policy. First, inter-generational relations that include the older generation are completely absent in the formulation of family policy. Family policy is exclusively oriented to two-generational family relations between parents and their (dependent) children. This is clearly evident from the very definition of the family. Grandparents are only acknowledged here when they—in the absence of parents—take over the role of the parent and take care of their grandchild/grandchildren. In this situation, the community of (grand)children and grandparents who take care of them acts as a two-generational nuclear family, and thus corresponds to the definition of “family” in the Resolution. The definition of the family does not presume or foresee three-generational relationships as the subject of family policy, not even in cases of extended families which consist of three (or even four) generations, which are not so uncommon in Slovenia. In social policy in a broader sense, inter-generational relationships only become the subject of consideration in a minor way when it concerns the division of responsibilities for elder care between the family and the state. Here again, old people are

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9 According to Morgan (1996, 96), Western countries are already facing this problem with the “widening awareness of the defects of institutional care, and an increasing desire on the part of successive governments to reduce levels of taxation and public expenditures. In the case of Britain and North America, at least these combined with a reassertion of the centrality of family life within the nation as a whole.”
placed in the role of persons who passively receive care when they are dependent on it. Thus, care for the elderly is removed from everyday inter-generational family practices and relationships.

Another important aspect of such an “elder (care) policy” is the silent assumption that it is primarily the responsibility of the family (that is, women) to take care of the elderly: care for the elderly is assumed to be unpaid, informal work supported by the state only to a limited extent. This problem is especially urgent if it is placed in the context of balancing domestic life and employment. Existing European studies show that people who try to balance caregiving responsibilities, domestic life and paid employment often suffer from psychological, social, interpersonal, practical and health-related stress, which is especially intensified when they combine paid work with care for elderly relatives (Phillips 1998, 70).

The second symptomatic situation is that inter-generational relationships are excluded from consideration in the framework of the Resolution. The older generation has proved to be an important source of support for families with children. In Slovenia, grandparents are an expanded source of help in terms of day-care for their grandchildren. For this reason, a large share of children is not enrolled in public day-care centres in spite of the high quality of these centres. In many cases, grandparents also offer other forms of material and non-material help to families, especially when they are in distress. Worthwhile mentioning is their help with the housing problem (apartments are too expensive in Slovenia, and for many people they represent inaccessible goods), and help in the form of other goods (clothes, home-grown food and the like). It is thus relatively one-sided to depict the elderly only as passive receivers of care who cannot live independently or take care of themselves. Caring relations between the generations are much richer and imbued with reciprocity. Public policy-making would have to take into account the broader, fluid and ever changing nature of intergenerational relationships.

**Policy of Equal Opportunities**

The isolation of the reconciliation of work and family policy measures is also visible in the attitude towards equal opportunities policy. In Scandinavian countries, the politics of equal opportunities is the
The guideline and the basis for measures towards the reconciliation of work and family (Hantrais and Letablier 1996, 126)—the reconciliation of work and family is a topic within the politics of equal opportunities, while in Slovenian family policy the case is just the opposite.

Considering the relationship between work and family, we cannot avoid the sociologically relevant question of different gender roles in the processes and practices of care under the changing conditions of late modernity. There has been an ongoing debate about changing gender roles and especially the roles of women entering the labour market and the public sphere in a broader sense, and about the consequences of the double burden for women as a result of conflicts and different intensities of change in the sphere of work (mass employment of women) and the sphere of family (a persistent, asymmetrically-gendered division of work and especially of care). In this debate Italian sociologists (Bimbi, Balbo, Saraceno) have advanced a provocative thesis about *double presence*. The thesis exposes the positive aspects of the position of women in late modernity through their double presence in both private and public spheres. “Women are everyday migrants between times, places and habituses, exchanging real and symbolic registers several times a day, and becoming much greater masters of organisation, coordination and adaptation than their male colleagues, companions, friends and partners. Beside this undoubtedly being a burden for women, it is also an experience of living in two worlds, it is a double presence” (Rener 2000, 290).

In her critique of Giddens’s idea that “more and more people are looking for ‘opportunities for commitment outside of work’,” Selma Sevenhuijsen calls attention to other aspects of various gender positions regarding the division of work and care. In her view, this statement by Giddens represents a male position, while for women, the situation is completely opposite—women try to spread their commitment from the private to the public sphere (in the labour market, in politics etc.), that is the sphere which, historically, was closed to them. Men, on the other hand, through caring, have to change their commitment to and identity in a sphere where they already live: the intimate life sphere (Sevenhuijsen 2002a, 138). We can agree that at the level of politics the problem lies in that these complex relationships between the sexes regarding work and care belong to the nor-
mative assumptions of modern states and the creation of the term “of the modern individual” (Sevenhuijsen 2002a, 139).

The thesis of the double burden of women highlights primarily the negative aspects of the transitions of late modernity, while the thesis of their double presence highlights primarily the positive aspects of women’s presence in several spheres of life. They thus seem to be part of the same story and are indeed complementary—the double presence of women in the world of late modernity being to their advantage, and the double burden being an impediment and a result of the asymmetrical gender division of labour, of the low valuation of care and of other problematic aspects of the reconciliation of work and family to which this article attempts to call attention.

Care is not only about the particular work done, but also about (gender) identity. “To be expected to undertake to do certain kinds of activities is to develop a particular gendered identity. To develop a particular gendered identity is to expect to undertake certain kinds of tasks and to undertake these willingly and as a matter of course. Caring tasks and emotional labour are not just any set of tasks, they constitute a central set of tasks in constructing gender identity and sexual difference” (Morgan 1996, 101). However this does not imply that caring activities are (thought to be) done only by women. “It is that the meaning attached to the involvement of men in these tasks and the kinds and amount of support that they receive from others in order to fulfil these obligations are shaped by considerations of gender” (Morgan 1996, 102). In addition, not all women do the caring work and not all do it to the same extent. There are other social dimensions that crosscut the gendered character of care, like class and ethnicity (Morgan 1996, 102).

Conclusion—possible renewal through the ethic of care

It is clear that family policy in Slovenia is promoting some of the primary values of an ethic of care such as equality, protection, solidarity and wellbeing. In this respect the situation seems better than in many other European countries. The concept of reconciliation of family and work is itself an admission by the state that care is important and it shows that the state views itself as an important actor in care provision. In fact the reconciliation of family and work is one of
the most important policy fields through which the principles of the ethic of care can be advanced. In Slovenian family policy there is at least a partial recognition that care is a collective responsibility. But since the very understanding of care is insufficient and limited (to child care), we are far from “a new politics of care . . . [which] is a collective responsibility, the basic principle being the social importance of care” (Sevenhuijsen 2002b, 33). From the way the state formulates care when speaking about the relationship between family and work (and also the state itself), it is clear that it locates care in the family, and reduces it to child care (assuming that this is the only care carried out by family members). And although it recognises care as an important element of everyday life and sustainment, it gives priority to the model of the independent, self-sufficient working individual.

From the perspective of the ethic of care, several proposals for improving the conceptualisation of care and of reconciliation of family and work can be made. First of all, as already stated at the beginning of this paper, the Resolution as the main family policy document needs to be revised in its basic conceptual premises. What is needed is a rethinking of the core concepts that define the family policy framework. Firstly, the resolution would need a new definition of the family that would actually take into account all possible family arrangements. While the intention of family policy makers is to recognize the changeability of family life, and their ambition is that family policy comprises all families (“the inclusion of the entire population or the orientation towards all families” reads the first principle of family policy), the concrete conceptualisation of the family and the ensuing measures are exclusive, to such an extent that we can speak about the position introducing a kind of “exclusive pluralism” (Švab 2003), with at the same time, the notion of the traditional, heterosexual family still latently present.

Here, the burning issue is the exclusion of an important family form—single parent families—which should be given special protection on the part of the state, especially regarding parental care and the reconciliation of work and family, and not only as far as the danger of poverty is concerned. While family policy argues for a shared responsibility between parents, this often remains unrealised in single parent families, which is the result of general, socially accepted ideas about the gendered division of care, and not the result of the
phenomenon of single parent families as such. The lack of specific measures for the protection of single parent families (especially in relation to care) springs from the fact that family policy makers understand the problem of single motherhood exclusively as a problem of the absence of economic protection (the prevention of social exclusion or rather its material aspect—poverty), which in Slovenia is the domain of social policy. This leaves an open space for moral concern about the phenomenon of single parent families. Selma Sevenhuijsen implicitly calls attention to one of the dangerous elements of such moral concerns. Thus children of divorced parents can be seen as not only economically deprived, but also—by so-called “father absence”—as suffering from “insufficient parenting” and “lack of social ties.” This state of affairs is the result of the assumption that care is “by nature” a gender divided activity, while it would be better to employ a normative notion of gender equality instead, including, among others, the idea that care is not gender specific work (Sevenhuijsen 2003, 137).

As far as the definition of the family is concerned, it should also overcome the view by which the family is seen as a neo-nuclear unit without any outside kinship and other relations. When considered from an ethic of care perspective, it becomes clear that caring family relations go much beyond the nuclear family.

Another conceptual rethinking would include an explicit acknowledgement of the role of care in everyday life—not only within the family but also in other spheres of life. Care in family policy should be defined according to the principles of the ethic of care, therefore acknowledging not only care for children but also care for other dependent and seemingly independent family members. Care for the self is also something that the current vocabulary of family policy does not include although it is very clear that overburdening—especially of women—is a common problem in their endeavours to reconcile family and work.

When we accept the idea that care is not reduced to the family sphere, this implies an acknowledgment of the connections between family policy and other policies, especially the policy of equal opportunities. Bearing this in mind, one would expect that equal opportunities would be the basis on which family policy is built. As is apparent in this analysis, equal opportunities are only one part of family policy, mostly related to the reconciliation of family and work only.
From the ethic of care perspective the policy of the reconciliation of work and family cannot support only the model of the independent employed individual, nor can it privilege work or “access to paid work as the primary dimension of social inclusion” (Sevenhuijsen 2002a, 136). It should rather connect itself with the policy of equal opportunities and with a broadened understanding of care. Only by successfully integrating different policy fields does it become possible to promote changes in the reality of everyday life and in the social meanings of care and to relocate care at different social levels, especially in the spheres of work and family. This does not mean that we should neglect the importance of economic independence. An ethic of care would rather propose that we “rethink autonomy in a manner that retains the value of economic independence, while simultaneously embedding it in a relational account of human nature that deals with actual practices of care and responsibility” (Sevenhuijsen 2002b, 29).

Probably the most important first step to be made in Slovenia in order to promote the ethic of care (not only in family policy) is to make care into a politically relevant issue. The provision of daily care has not yet entered public debates as a politically relevant theme, for example through debates on the politics of equal opportunities, or on the ageing of the population. On the other hand, the relocation of the meanings and valuation of care goes on with different intensities at different social levels—for example while family policy attempts to change the meanings of care and to relocate its practices, at the level of everyday life these shifts are not yet being practiced to any considerable extent.

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Introduction

The material I chose for examination with Trace is in the front ranks of present concerns in social policy in Hungary. The countries joining the European Union in May 2004 had to draft a National Development Plan (NDP) to be able to make use of the Union’s financial resources. These plans set down the aims and priorities of development policies whose realization in the 2002–2006 period will be supported by the financial sources of the Structural Funds. The implementation of these strategies will be through operational programmes. Hungary has constructed five such programmes in the NDP. The Human Resources Development Operational Programme (HRDOP) was elaborated under the direction of the Ministry of Employment and Labour (2003), in close cooperation with the Ministry of Education and the Ministry of Health, Social and Family Affairs. This Programme supports development in the fields of employment, education and training, social services, and the health care system. The strategy of the Programme is guided by five priorities: promotion of active labour market policies, fight against social exclusion, improving education and training, improving adaptability and entrepreneurial skills, and improving the infrastructure of education, social services and the health care system.

Owing to limitations of space, this article will discuss only two of the above priorities: I will speak about the actions pertaining to the fight against poverty and social exclusion, and I will also give a report on the current state of affairs in the field; I will also include in the discussion questions about equal opportunities for men and women (within the priority of active labour market policies).

In the present paper, by following the steps of Trace, I will attempt to answer the question of whether it is possible to draw on the care perspective to renew the vision and values embedded in the report.
To determine the normative framework of a policy document, we first have to see (as the first stage of inquiries in Trace) how the problems waiting to be solved are defined. In most cases these definitions do not approach social problems from a value-free point of view, but already incorporate a number of normative presuppositions. Since the fundamental documents outlining the policies of the European Union all treat the fight against poverty and social exclusion as a community task, it is not surprising that these questions receive attention in the Operational Programme for the Development of Human Resources. However, the main objective of the HRDOP is to increase the rate of employment and improve the competitiveness of the workforce by providing qualifications in line with the demands of the labour market. Consequently, the problems of poverty and social exclusion play a subordinate role in this document.

The Programme does not really operationalize the concept of poverty: it appears only in the term “the growing inequalities in income.” This euphemistic term is an ideal way of sidestepping the problem, or indeed the facing of it. Thus a difference in income which is “7.5 or 8 times as much as the community average” is not conceived as a social problem but rather as a sort of inevitable fact. The concept of social exclusion, another considerable social problem, is also poorly defined. The following connotations can be detected in the document to describe it: the insecurity of the ability to earn a living, lack of financial security, limited opportunities for social interaction and participation, and the insufficiency of support systems.

Poverty and social exclusion appear in the Programme as mutually exchangeable concepts. The poverty and social exclusion of social groups which are styled “disadvantaged” or “especially endangered” (ethnic minorities like the Roma, people with disabilities, persons who have an inferior health status, the homeless, broken families, etc.) are traced back to their marginal position on the labour market. At the same time, the special needs resulting from differences between the groups and the variety of their individual situations are not taken into account. We may conclude that the solution to all problems is supposedly to help these people to greater opportunities in education and employment.
It can be a good starting point for getting acquainted with the normative paradigms which determine various policy papers if we examine and uncover the value-based argumentation in the document’s text: its leading values, their interconnection and their assigned role in the whole system of the document. In the HRDOP the leading values are grouped around two main organizing principles. In the first group, the values of social democracy can be found: social cohesion, social inclusion, equality of opportunities and solidarity. The other group contains the values of market-oriented liberalism (neo-liberalism): the priority of market mechanisms and economic growth over the other sub-systems of society, the norm of the ability of income production (on both the individual and the social level), autonomy, and faith in social and economic progress.

By mapping out these values, we can also learn what presuppositions appear in political documents concerning human nature. In the text of the documents I studied, the norm appears to be a “one-dimensional man”: a being whose most important qualities all pertain to his/her position on the labour market. These features are professional and geographical mobility, autonomy, a reasonable income and knowledge, or enterprising skills. In this connection, the marginal market position of the Roma becomes a form of deviant behavior threatening the norms of the majority of society. “Because unemployment becomes permanent, a condition prevailing for more than one decade, the risk that inactivity becomes standard practice is increasingly threatening” (Ministry of Employment and Labour 2003, 33).

The plans for state contribution to care tasks also play an important role in the normative frameworks of policy documents. State tasks connected to the social support system within the Programme for the Development of Human Resources only appear as related to the improvement of employment opportunities and the realization of the policies of the EU. Civil organizations working in the fields of employment, education and social services are conceived of primarily as a means to improve the employment opportunities of people with disabilities and those who are discriminated against (such as the Roma). In this conception, state contribution (and responsibility) are defined as professional and methodological support offered to such civil organizations.
Even though the compilers of the Programme conclude that the discriminatory practices of employers make the integration of the Roma into the labour market difficult, responsibility taken by the state in connection with the passing of anti-discrimination legislation does not appear in the text. State responsibility concerning the segregation of women on the labour market is disclaimed with reference to the present laws and the European Union, the Labour Code and other regulations. “The Constitution specify the prohibition of different forms of discrimination, including the prohibition of discrimination on the basis of gender. However, in the field of law enforcement similar practical problems are experienced to those of the member states of the community (complaint mechanisms, sanctions, indirect discrimination)” (Ministry of Employment and Labour 2003, 36).

Care and gender

The HRDOP does not see care as a separate activity in its own right; social services are mentioned primarily in connection with the situation of groups that are most in danger of social exclusion. The notion of care (social services in general) is subordinated to the prevention of social exclusion; and since in the text social exclusion is equated with economic inactivity, care and all activities connected to it are taken to serve the acquisition or regaining of the ability to work. Consequently the needs of “dependent” groups who are not able to work (children, the elderly) are merely touched upon in the document. Services that help families can only be claimed by (socially or otherwise) disadvantaged single parents, and—again—only in order to increase their opportunities on the labour market. The compilers of the document classify the following groups as the clients of social care services: people living in underdeveloped regions (mostly Roma), people with disabilities, those suffering from addictions, those suffering from psychiatric diseases, the homeless and those living in bad housing conditions, endangered children, children with disabilities, and those living with special needs, and single parent families.

Care tasks appear in the text as tasks not exclusively in the private sphere; however, these tasks in themselves will not, of course, provide a full reintegration into society. “To ensure that women with
small children or caring for relatives at home can participate in training programmes, take a job or pursue entrepreneurial activities, care services are needed” (Ministry of Employment and Labour 2003, 58). The Programme does not define these missing services exactly but makes it clear that solving care problems is still considered overriding a female task; males do not come under the requirement of coordinating family life and employment. Even though the document mentions that “some degree of hidden discrimination” is detectable in women’s weaker position on the labour market, it does not offer any remedy (apart from the development of business skills) to the horizontal and vertical segregation of the labour market. Thus, the drafters of the Programme seem to imply that the problem of discrimination against women can be solved by self-employment.

At the same time, the emphasis on business and entrepreneurial skills shows that, in spite of arguments for gender equality, the ideal figure of the independent, self-supporting male citizen still symbolically informs the normative framework of HRDOP.

Evaluating the normative framework

In this second part of the analysis I use the ethic of care more explicitly to offer some evaluative remarks about the normative dimensions of the Operational Programme. An important aspect of this evaluation is, according to Trace, the description of the rhetorical elements of the text (typical sayings, dichotomies, inconsistencies, metaphors and taboos). The phrase which recurs most frequently in the Programme is “social and labor market inclusion.” By the coupled use of these concepts, the text successfully avoids the discussion of other aspects of social inclusion, like civil, cultural and interpersonal integration into society, as well as political participation and voice. Moreover, by turning labour market participation into a norm, it can achieve the social stigmatization of “inactivity,” treating it as a form of deviant behavior.

The report, supported by statistical data, recurrently makes comparisons with “community or Union averages.” The drafters presumably wished to lend an air of objectivity and unprejudiced presentation to their report by using European countries as a legitimiz-
ing base. Two further hidden functions can also be detected in this constant reference to the European Union. First, this is a good way of denying state responsibility (and consequently, state action) in fields where the Hungarian data is roughly the same as “the Union average”; and second, this can also be used to prove that Hungary is economically and socially prepared for integration with the EU.

Dichotomies play an especially important role among rhetorical elements, since these are often the manifestation of hierarchical thinking, privileging one side of the opposition above the undesirable, undervalued other side (Sevenhuijsen 1999). The following terms are contrasted with each other in the HRDOP: social integration/social disintegration, public social services/home care, social inclusion/exclusion, financial security/poverty, labour market income/social transfers, activity/inactivity, equal treatment/discrimination, salaried job/home work, male work/female work. These dichotomies also have the hidden meaning that care tasks are subordinated to other income-producing activities and fields, not only in the private sphere, but also in the economic sphere of social services.

The possible role of men in social care tasks is practically a taboo in the HRDOP. Likewise, nothing is said of the care needs of the so-called “non-disadvantaged groups” and the diversity of life situations. There is no indication of discrimination on the labour market on the basis of age and sexual preference. And apart from children in disadvantaged or single parent families, or with “behavior or socialization” problems, the Programme does not speak at all about questions of the citizenship rights of children.

Since policy documents often deny their normativity, they also frequently contain inconsistent assertions. In this document, equality of opportunities for men and women is defined as one of the most important legal principles, while at the same time the home care of infants and other relatives is unquestionably taken to be a female task. This formalistic conception does not take into account those aspects of equal opportunities, which fall outside the legal framework, like organizational cultures, mentality, etc. Another interesting paradox is the apparent desire to create new employment opportunities for women by the development of services (child care, care of the elderly) aimed at increasing women’s proportion of the labour market, while elsewhere the text maintains that: “The employment of
Hungarian woman is characterized by both horizontal and vertical segregation. The former is indicated by the concentration and over-representation of female labour in services and in certain low prestige, low paid, conventionally female jobs” (Ministry of Employment and Labour 2003, 36–37). It thus becomes apparent that the concept of male/female equality is unclear and inconsistent, in fact no more than a declaration to fulfill Union requirements.

Frequent reference is made to the necessity of a complex approach to problems rooted in disabilities, but only a severely limited interpretation of disabilities and social exclusion is articulated in the text.

To extend our findings concerning the normative framework of the Programme, it is important to determine what political philosophy is used to legitimize the document’s assertions. As in the majority of policy documents, in the HRDOP the argumentative strategies of different political discourses are mixed. The dominant approach in this case is market-oriented neo-liberalism, which is in accordance with one of the aims of the National Development Plan: the improvement of the Hungarian economy in the face of European competition. The prevailing role of this approach is shown by the competition and efficiency-based views of human nature which appear in the text. It is also indicative of the presence of the traditional social democratic and sociological discourses that the compilers of the Programme treat financial and social inequalities not only as natural side effects of a market economy, but also as phenomena endangering social cohesion. “Hungary’s catching up with the EU can only be successful if all of its citizens are able to take advantage of this process. Therefore, another purpose of the interventions under this Operational Programme is to reduce the inequalities of opportunities and to assist people in overcoming their disadvantages” (Ministry of Employment and Labour 2003, 5).

This knowledge of the relevant elements of the normative framework can help us to answer the question concerning the adequacy of the document’s treatment of questions related to care. Because of the intention of fulfilling EU requirements, the concept of social exclusion inserted into the socio-political discourses about poverty in the HRDOP is not adequately defined. Consequently, there is no empirical data resulting from actual research behind the assertions of the document.
The notion of poverty occupies a marginal position in the document, while there is a rich store of available research results and data that was disregarded by the compilers (Ferge 2001; INFO-Társadalomtudomány 2001; Spéder 2002). The concept of “relative poverty” (defined by financial/income inequalities) is compatible with Union standards, but does not take into account the problem of “absolute poverty.” According to the most recent research done by the UN and the World Economy Research Institute of the Hungarian Academy of Sciences, 12–13% of the population lives in cumulative poverty.

The following dimensions of power relationships are mentioned in the Operational Programme: insufficiency of available social support and assisting services, unequal access to information and to information technology tools, emphasis on the importance of cooperation between state and civil organizations, and the appearance of social and financial inequalities as the consequences of discrimination and the transformation of economic structure.

The situation of the Roma is discussed in most detail from among the groups specially vulnerable to social exclusion. The usual stereotypes do not appear in the Programme, but demographical prognostications as to the rise in their population serve, if only implicitly, to depict the increase in their proportion as part of the overall population as a problem. The problems of people with disabilities and those suffering from addictions only enter the discussion in connection with the creation of equality of opportunities on the labour market.

In the normative framework of the Programme, care appears firstly as a support system for paid work, and secondly as an economic necessity in the case of persons and groups connected to poverty and social exclusion. The social role of activities of care is thus subordinated to the norm of economic independence and efforts towards self-reliance. The paper of the Hungarian government does not assume that care belongs exclusively to the private sphere; on the contrary, in the operation of the social support system it assigns a more significant role to state (and self-governmental) units and civil organizations than to the family. Care tasks performed at home are unambiguously defined as female jobs, and even the expansion of public social services is made to serve the desired increase in women’s level of employment. In summary, it cannot be...
said that the concept of care plays a significant role in the document’s normative framework. Needing care is interpreted as a sign of weakness and vulnerability, and thus (paradoxically) care is needed only incidentally, so that citizens should not need care in the long run.

**Renewal and concretizing with the ethic of care**

The picture that the ethic of care provides about human nature (Sevenhuijsen 2003) is fundamentally different from the one-sided picture of individualism. Its most important principle is the notion of interdependency: human beings need each other throughout their lives, and they can only experience their individuality through their relationships with others. The renewal of the normative framework of the policies for the development of human resources, based on the basic values and principles of the ethic of care, should thus start with a rethinking of the concepts of dependence and vulnerability. These concepts should not only be applied to “especially vulnerable” social groups; mutual dependence and vulnerability should rather be accepted as inherent dimensions of human life. Stigmatization of those needing help and the hostility towards those living on social transfers and those earning their money can be thus avoided. This is emphatically true in the case of the Roma, because in Hungary it is widely accepted that most of the Roma people are unworthy of help. This prejudice is manifested in a battle for social assistance between Gypsy and non-Gypsy poor.

From the perspective of the ethic of care, the problems of poverty, social exclusion and equal opportunities for men and woman would be articulated differently. The full social participation of groups especially affected by poverty and social exclusion should not be made dependent on their employment in salaried jobs. Consequently, social inclusion policies should consider other factors in addition to policies of employment and social services, such as political citizenship, housing, information and communication, security (not necessarily merely financial), interpersonal relationships, leisure and culture. Likewise, it is not enough to tie male/female equality of opportunities only to the improvement of women’s position on the labour market; the conception of a distribution of tasks independent
of gender has to appear in legislation as well as in socio-political discourse. To accord any meaningful role to the ethic of care in the normative framework of the Programme for the Development of Human Resources, the view that tasks of care are obviously women’s responsibility needs to be replaced by a concept of responsibility for both women and men. Furthermore, the notion of care as a democratic practice would have to be introduced. “In this respect, a caring citizenship includes the right to have time to care, to make, on a daily basis, a place for care” (Sevenhuijsen 2003, 37). If this concept were introduced to HRDOP, it would equalise caring work with paid employment.

In the normative framework of the document, care is simply the sum total of the subsidies and services offered to those most in need. According to the approach of the ethic of care, social care should be recognized as a social activity in its own right, not only as a tool for labour market (re)integration. This expanded interpretation makes it evident that policies of human resource development should also deal with the rights and care needs of employees (not only the unemployed): with questions like the protection of interests, health and safety at work and with health care.

Tronto and Fischer divide the process of care into four analytically distinguished but closely related stages, assigning a basic value to each of these stages (Tronto 1993). The need for care is recognized in the stage of caring about; thus, in this stage the value of attentiveness comes to the fore. The need to support disadvantaged groups is found in the Operational Programme, and the document also shows a particular sensitivity towards problems concerning the construction and availability of social services. But from the point of view of the ethic of care, more attention should be focused on the personal needs and requirements of the clients of social services. To represent the interest of those involved, it would also be useful (as the document itself mentions more than once) to make a complex examination of phenomena included in the concept of social exclusion. The Programme does touch upon the Roma, people with disabilities, and those suffering from addictions as instances of social groups especially threatened by social exclusion, but the special needs deriving from the specific situations of those belonging to these groups are not discussed.
The second dimension presupposes the implementation of tasks required by established needs for care and the responsibility taken to satisfy those recognized needs. It is not clear in the Programme for the Development of Human Resources who is responsible, and to what degree for dealing with the problems outlined in the report. The division of tasks between the state and civil organizations is somewhat imbalanced: only the tasks assigned to civil organizations (“providing personalized services” for the members of disadvantaged groups) are explicitly articulated, while state responsibility remains invisible throughout. Every person of working age is responsible for satisfying their own care needs, although in this context the concept of “responsibility” used in the document should perhaps be more adequately seen as “duty.” The confusion of “duty” and “responsibility” should be avoided because the emphasis on obligation does not fit into the ethic of care approach.

The third stage is the actual performance of care. This presupposes that the person performing caring activities avails him/herself of the competences and resources needed in the given situation. The Operational Programme generally undervalues the care-providing competence of unskilled volunteers (relatives, people from outside the social services profession) and assigns roles to them only “in the strengthening of social cohesion, the integration of disadvantaged groups”; but what this means in practice the document never says. But the Programme does voice a number of concerns about the sources and competences of the social support services: the insufficiency of the institutional capacities of social support and assisting services, geographical and structural inequalities in availability, lack of experts (especially in basic and day care), feeble efforts at cooperation across the fields, and insufficiencies in the “culture of care.” Concerning the competence of social experts, the need for constant education of professionals and an increase in the appeal of this field (to decrease fluctuation) are stressed.

The last stage, care-receiving, is based on the interaction between the provider of care and its receiver. The Programme does not exhibit any particular responsiveness towards the opinions and needs of the users of public services. On several occasion the document mentions the importance of “personalized services,” but this is in fact unthinkable without the involvement and questioning of the
users of these services. The question of trust is closely related to the receiving of care, since the success of the process is to a great extent dependent on how far receivers can entrust their well-being to the competence and good intentions of the performers of care (Sevenhuijsen 2004). But even trust is only mentioned in connection with participation in the labour market in the chapter dealing with the prevention and overcoming of social exclusion: “Being part of the world of work does not only provide income but also ensures the establishment and safeguarding of social relations” (Ministry of Employment and Labour 2003, 51).

It is evident that the values articulated in the normative framework would need revision and redefinition from the perspective of the ethic of care. The limited concept of social integration is not really a value but a compulsion of adaptation without an alternative. This macro-sociological approach takes participation in salaried work as the sole criterion for social integration. Opportunities for participation in social, cultural and political practice should be provided to the “excluded,” not a prescription of behavior norms required for integration. According to the ethic of care, full participation in society should be part of the basic rights of each citizen, allowing for a plurality of individual life situations. This also implies that activities of care should be recognized as a possible form of social participation. Similarly, the furthering of social inclusion cannot be limited to the creation of equality of opportunities on the labour market. It is just as important to emphasize the values of solidarity and mutual dependence, and to abolish the opposition between “vulnerable” and “non-vulnerable” groups. Respect for the dignity of those dependent on care is essential for the more humane and efficient functioning of the social care system. A suggestion from one of the most well-known Hungarian sociologists and social politicians could be followed here, according to which the Hungarian translation of the term “inclusion” should be changed. The break with paternalism should be signaled by talking not about an “incorporating” but an “interdependent” society (Ferge 2002).

These suggestions for modification in the normative framework of the Programme for the Development of Human Resources also involve actual political action. The exclusive responsibility of women to coordinate family life and employment should be replaced with
responsibility on the part of both women and men. It is not with the goal of providing women with opportunities for participation in the labour market that services responsible for infant care or the care of other family members in need of it should be developed; all the more so since unpaid care is no less important as a social practice than salaried employment. It is also obvious that the performance of care tasks does not necessarily have any relationship with the sex of their performer. Connected to this, improvement in the employment potential of the social sector should not be treated as employment opportunities provided for women only. Repeating the democratic principle of the equality of opportunities and fair treatment is, of course, not enough: in addition to the legal regulations, an effective technique for state control over practice needs to be worked out, since the vulnerability or weakness of rights is itself a possible source of discrimination.

Conclusion

Despite my critical remarks, I would like to stress the importance of issues of employment and employability. We must take into consideration that the Hungarian level of economic activity and employment is one of the lowest in Europe. In my opinion the ethic of care perspective would suitably complement human resources policy and provide a richer viewpoint on it.

The priorities and provisions of the Operational Programme for the Development of Human Resources were composed by the compilers to conform primarily to the fields of activity in the European Social Fund (the application of active labour market policies, the guarantee of equal opportunities for every employee, the support of women’s participation in the labour market). In a somewhat eclectic fashion, the document’s normative framework mixes principles from the European Employment Strategy with requirements from community documents on social policy against poverty and social exclusion. The difficult situation of the policy makers can be demonstrated by the fact that the term “exclusion” can be translated into Hungarian by any of three different words, each of which implies a different picture of society and different intentions for socio-political action. But in the translation of the term “social inclusion,” problems
are even graver, since this concept does not have an authentic Hungarian correspondent. According to Júlia Szalai, this lack of appropriate terminology is a clear indicator of the absence of a definitive political discourse and the democratic socio-political tradition of integration (Szalai 2002).

One of the most important results of the analysis is that the adoption of the ethic of care approach did enable us to identify the relevant elements of the Programme. But it is also my hope that it has provided guidelines for rethinking of political paradigms dealing with the widening of social participation.

References

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Introduction

The objective of the present article is to apply the policy analysis tool Trace to a selected document, namely the Strategic Action Plan of the Ministry of Social Affairs, 2000–2010 of the Republic of Estonia. Trace is essentially built on an ethic of care approach that focuses on the role and impact of the processes of caring and the importance of care in all aspects of our lives. It identifies care as a necessary condition for human flourishing and includes both care-giving and care-receiving in its approach. There seems initially nothing revolutionary about this method, but on a closer look the transformative potential of the ethic of care becomes visible as it intends to move the notion of care outside the traditional sphere of privacy and home, to de-genderize it, to include men as care-givers and to apply its ideas and values straightforwardly in the political and public spheres.

The importance of caring practices in the public sphere should be acknowledged, since they work towards assuring that people’s needs are met, that their concerns are accounted for, and also that they can exercise their ability and need to care for others. Trace works by locating the explicit as well as implicit value statements in policy papers, analyzing their coherence and scrutinizing their normativity, all from the perspective of the ethic of care.

The issues and the solutions

An appropriate document to be analysed from the ethic of care perspective in the case of Estonia is the Strategic Action Plan of the
Ministry of Social Affairs, 2000–2010.\textsuperscript{1} Admittedly, by analyzing a policy paper like the strategic action plan of a ministry, I have taken this document as characteristic of Estonian policy-making as such. I think the action plan is rather illustrative of general tendencies in Estonian social policies over the past decade and well indicates the values and ideals that have been prioritized by various (mostly neo-liberal) governments.

The document was approved by a decree of the Minister of Social Affairs on April 20, 2000. Its intended audience comprises mainly civil servants at the Ministry of Social Affairs, whose long- and short-term objectives the document describes and prescribes. The Action Plan is also construed as the main instrument in developing the Ministry by establishing clear definitions and directions for specific activities. Perhaps most importantly, the document is viewed as a basis for assessing the results of the work of the Ministry. It describes objectives and outlines detailed steps to be taken to achieve these. In taking these responsibilities, it is certainly progressive, since many policy papers are rather indefinite on specific actions.

At the same time a document with such a flashy name is certainly also geared towards a wider audience, as it introduces the goals of planned social development for the next 10 years. The formal introduction by the Minister also mentions documents like the European Social Charter, alongside several expressions affirming Estonia’s place in Europe with regard to shared social values.\textsuperscript{2} This is in line with observations from other Central and Eastern European countries where the adoption of new policy documents has been, if not the result of, then at least influenced by international lobbies. This pertains mostly to the European Union accession preparations, but recommendations of the Organization for Security and Co-operation in Europe (OSCE) and the Council of Europe have also had an unquestionable impact.

\textsuperscript{1} The strategic action plan is continuously updated in terms of specific actions to be undertaken in a year. The latest version that I have taken into account originates from summer 2003.

The strategic action plan focuses on three sectors—labour, health and social welfare—and states the objectives for 2010. The labour sector: as full employment of people as possible; fairly protected interests of both parties to the work process; a safe and employee-friendly working environment. The health sector: population measurably more knowledgeable on health behaviour at the level of individuals, communities and professionals; a restructured, cost-effective health network based on future needs analysis; a quality assured, well-informed, motivated and learning health network. The social welfare sector: a stable social insurance system that covers all the traditional social risks; a well-balanced system of social benefits that encourages working and promotes independent coping; a network of social services that is based on client needs, and that motivates and promotes independent coping.

These strategic objectives are then further dissected into smaller tasks. The document also describes the starting positions of all three sections and sets out tasks for ministerial departments. All the major objectives for 2010 are discussed in detail. The action plan also addresses cross cutting issues like equal opportunities for men and women, the ageing of the population, the integration of disabled people and others. Again, objectives for various dates are set and more detailed necessary actions described.

In what follows I have chosen to focus on the overall tone and normative assumptions of the text. From the three sectorial objectives of labour, health and social welfare, I have concentrated on the latter; but I have also included analysis of one of the so-called cross cutting issues, namely equal opportunities for men and women. This is mostly because the document is rather complex and long, specifying a multitude of goals and actions. From the ethic of care perspective, it will be more beneficial to query the ideological structure on which these many objectives are built.

One of the defined goals of the document is simply to provide clear and transparent directions to Estonian social policy for the years 2000–2010. The stated mission aims to provide equal opportunities for all in a human-centered society. The plan begins by identifying the starting position (in 2000) of the social sector. It should be noted however, that here only the issues relevant to the specified goals are described. This means that the document does not discuss social
issues that fall outside the following identified subject-matter: a stable social insurance system that covers all the traditional social risks, and a well-balanced system of social benefits that encourages working and promotes independent coping as well as a network of social services that is based on client needs and motivates and promotes independent coping. Objectives that fall outside this logic are not discussed. Logically, then, one would assume that these three areas are perceived as most problematic and in need of attention, or, alternatively, that they are identified as covering the entire social sector.

The section on the starting position of the social sector is mostly descriptive. It lists the legislation passed and the intended consequences and explains the current system of social benefits and services that are geared towards those who “need special care” (children, persons needing special care and rehabilitation services and refugees).

The “starting position” does not really discuss existing problems, but these can be established by focusing on the proposed solutions and by working backwards from those. The solutions state, for example, that steps towards tailoring the financing of benefits and providing of services to the “conditions and needs of a specific person” have been taken. This implies that the previous top-down system was probably deemed too uniform and therefore inefficient. Also, the rather frequent mention of the need to motivate and promote independent coping seems to suggest that the “needy” are currently seen as relying too much on state benefits.

The issue of equal opportunities for men and women is dissected rather more critically. The starting position describes the current situation as unsatisfactory, owing especially to legislative deficiencies: current provisions are deemed too general and lacking guarantees. It is stated that a more straightforward prohibition of gender-based discrimination is needed (implementation of Gender Equality Act) as well as additional promotion of gender equality. These requirements are causatively tied to the EU accession process and to other international documents. The bulk of the objectives focus on the need for promotion of and education for equal opportunities and for a broader sensitivity to gender-related issues.
One of the first impressions of the document concerns the fact that it is extremely restrictive in providing terms that describe larger societal values, preferences and goals. The document is rather a list of “things to do” without explanations of “why we should do them.” Perhaps this is due to the fact that the document is perceived as a specific action plan for organizational development. Nevertheless, the aims and activities of the Ministry have to be positioned in a larger context, since the specific objectives only acquire meaning and value when situated within the framework of social expectations. One outcome of such a presentation style is that direct value statements are less visible than is usually the case with policy documents. But despite the fact that values are not extensively manifested, these can be extracted from the stated objectives. Some of the values have already slipped through in the previous descriptive phase.

SELF-SUFFICIENCY

In the Minister’s introduction to the action plan, it is stated that “the measurement of a mature society is that it values every single person—it is important that everybody feels that the society needs him [sic].” Social well-being is defined as a good quality of life for everyone. In the strategic objectives for 2010, however, the good quality of life has been narrowed down to promoting independent coping. Here self-sufficiency is seen as the norm, and the objective of the social sector is to help people achieve it.

Providing people with a job as a means of granting them self-sufficiency is an almost universal approach in welfare policies. However, the connection between the two is not as logical as it might seem, since not just any job would provide self-sufficiency, because of other factors such as poor pay, not to mention the need for fulfilling work. The American philosopher Iris Marion Young has explicitly
questioned the supposition that the purpose of welfare is people’s self-sufficiency. Young criticizes the mystification of the notion of self-sufficiency and views it as an ideology (Young 2000, 42). She deconstructs the concept into autonomy and self-sufficiency and argues that the positive normative appeal of the latter is actually derived from its fusion with the former (autonomy as a right). Autonomy, both as a moral ideal and as a state of personal freedom and self-determination, is a qualification that each and every human being should be granted. What this essentially means is the ability to choose a personally satisfying plan for a good life.

Self-sufficiency, on the other hand, is almost utopian when taken literally. Webster gives us the following definition: self-sufficient—able to maintain oneself or itself without outside aid, capable of providing for one’s own needs. The fact that this might be achieved by some people during some time of their lives is rather the exception than the rule, since the very fact of living in a society enfolds us into a web of interdependence (Young 2000, 43). The ethic of care is a perspective that recognizes the importance of these dependencies (that are usually “not visible” from the liberal political point of view) and helps us to give them due place in policy making. The meltdown of autonomy into self-sufficiency results in welfare practices where those in need of care are required to fulfil certain qualifications in order to be respected and to be able to set their own objectives in life. Young concludes that the identification of autonomy with self-sufficiency results in the following reasoning: “Those who need help and support from others do not deserve equal respect, nor can they expect to be able to decide how they will conduct their lives. If you are dependent, then those on whom you depend have some say over the goals you set for yourself and how you will enact them. Since most people want to be autonomous and they fail to question this conceptual and practical tie between autonomy and self-sufficiency, they implicitly accept self-sufficiency as a condition of equal respect and autonomy” (Young 2000, 46).

WORK ETHIC

Young also contests the idea that social contribution (something that is expected from everyone) should necessarily take the form of having a job. Here the ethic of care recognizes the unpaid caring work
provided mostly by women as a social contribution. The Weberian work ethic, of course, leaves this out of social calculations, although very early feminists, while deconstructing the public/private divide, were already arguing that the existence of the first is very much dependent on (but unrecognised by) the unpaid labour within the latter.

Closely tied to the valuation of self-sufficiency as the ideal and the objective of citizenship and indeed personhood, is the understanding that work (in the form of having a job) forms the basis and centre of a good life (Tronto n.d., 4–5). The work ethic thus provides us with criteria for social justice redistribution through its moral and political ideals. Here the distributive principle of desert is viewed as the quality on which social respect and worthiness are based. A work ethic thus enforces the conviction that what you have is what you deserve and conversely, what you don’t have (in case you have needs), you therefore do not deserve to have. In Estonia we have an old saying, “Everyone is the maker of one’s fortune,” and this has been the prevalent view in political circles during the period of re-independence. The possibility that hard work might not be sufficient for success is simply ignored. An interesting tautology follows: “if what gets rewarded is working hard, then those who are deserving, for example, wealthy, must be the ones who work hard. Those who are poor must, of necessity, be those who have not worked hard” (Tronto n.d., 8).

It is quite logical then, that the work ethic clearly enforces specific moral principles (Tronto n.d., 19). If working/having a job is central in the life of a good person, and working is a moral activity, then conversely, the non-working (for example unpaid) is represented as immoral. If your status and standing in a society is really only dependent upon your own actions, then you must have chosen the way you live. The most appalling aspect of such logic becomes visible when we realize that most of the needy and poor in our society are children, the aged and disabled people, and also the (single) women who take care of them. The dominant moral discourse centred on the self-sufficient actor automatically problematizes the existence and experiences of those not fitting this abstract description (Walker 1998, 22).

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3 Not to mention the fact that unemployment rates are quite high.
This is not to insist that being able to take care of oneself is irrelevant; it is certainly important for the constitution and continuation of the self. The above analysis of the concept of self-sufficiency simply aims to argue that dependency is a normal and universal part of everyone’s life and that we should openly recognize this fact and consequently try to admit this notion into our thinking and our policies.

CONCEPT OF CHOICE

The fact that unpaid caring work is often left outside state policies also has to do with the liberal interpretation of the notion of choice. Choice is of paramount importance within liberal political thinking, which essentially constructs caring activities as voluntary acts by independent people (West 2002, 89). Many of the choices made by individuals belong to the so-called private sphere. Responsibilities of caring, especially of an unpaid kind, are mostly located in the “private sphere,” and the liberal state prides itself in “not interfering” in the personal choices of citizens.

The ethic of care, however, seriously challenges the view that unpaid caring can be classified as a private choice. Caring is deeply situated in the relationships that form the fabric of our lives. The needs to be cared for and the responsibilities to care are not based on calculated choices (Sevenhuijsen 2002, 31) but rather arise out of love, friendship, social habit and commitment; often it is the vulnerability of the dependents that creates responsibilities that cannot and should not be classified as “self-assumed obligations” (Walker 1998, 87). Caring work based on affection and moral obligation does not allow for the liberal “ending of the contract” (West 2002, 93). An ethical policy should adequately recognize these deep-seated elements of its citizens’ existence.

RIGHTS

The concept of a self-sufficient, autonomous and independent person is commonly situated within a framework of individual rights. “Rights talk” has received much criticism from feminist circles as well as from critical legal studies scholars, mostly because of its pretensions to political and gender neutrality and its capacity to create
and allow for unethical conclusions by removing the contextual aspects of a situation when applying abstract principles of rights (Simm 2002). From the perspective of the ethic of care, rights discourse is seen as having a negative impact on the quality of the relations between persons. If care is viewed as relational, operating “as a medium to shape relationships, connections, and commitment; to transfer culture; and to contribute on a daily basis to the meaning of human existence” (Sevenhuijsen 2002, 22), the emphasis on rights-based obligations, duties and requirements towards other people clearly changes the language as well as the basis of a relationship. Indeed, the ethics of care has a distinctly different understanding of moral actions and of human nature (Sevenhuijsen 1998).

The rights discourse thus constructs an independent personhood whose relations with others are based on mutual demands and responsibilities formulated through rights. Rights are the legal weaponry allowed by liberal politics to guard and guarantee the autonomy of the individual. Against this background, it is interesting to note that the concept of “rights” is rarely utilized in the Estonian document. This is especially striking in comparison, for example, with the rhetoric of the European Social Charter that overwhelmingly employs the language of rights. The Charter, for example, insists that “all workers and their dependents have the right to social security” (Part 1.12), “everyone has the right to benefit from social welfare services” (1.14), “disabled persons have the right to vocational training, rehabilitation and resettlement, whatever the origin and nature of their disability” (1.15) and so on.

Bearing in mind the rather neoliberal political climate of Estonia during the past 10 years, this fact of omission is significant. It is clear that simply the general discussion of social protection, minimal standards of social insurance, compensation and so on, is rhetorically, politically and legally much less powerful than playing the trump card of rights. Ronald Dworkin has famously analyzed rights as trumps, stressing their inviolable power to override various political and other decisions (Dworkin 1977). Therefore the definition of certain claims towards other individuals and towards the state in the language of rights does guarantee a stronger protection for these demands, at least theoretically. The logic of the document, then, is to avoid the introduction of such strong claims into the social sphere.
The current approach constructs the state as a kind distributor and the beneficiaries as simply receivers, dependent on the generosity of various institutions. The needy do benefit but not based on their right for care and help, but rather on the willingness of the state or local governments to define their needs and to act upon them.

**INDEPENDENCE**

Independence, closely connected to self-sufficiency, is another important value in the document. In the social sector the notion of the motivation and promotion of independent coping (in fact, it is a defined objective in two of the three strategic objectives for 2010) is continuously repeated. Independence can be achieved through employment, thus insisting that financial independence is a pre-requisite or indeed a basis for independent personhood. This last concept is furthermore closely linked to notions of citizenship—citizens should not be dependent in order to be autonomous. The prevalent focus on independence also narrows down the entire experience of human existence and flourishing. The ethic of care, on the other hand, views independence as a “complex task with which people are faced” and describes it as the “capacity to find a balance between care for the self, care for other, and care for the world” (Sevehuijsen 2002, 30).

The document also aims at reducing the number of beneficiaries and decreasing the share of expensive social services. Benefits are here seen as a charity to those in ultimate despair, while alternatively, through the ethic of care perspective, they could be interpreted as mechanisms that the society can use to encourage, support and direct the choices of its citizens, ways of how society can demonstrate its solidarity and care, its commitment to the equality and importance of all.

In the section on equal opportunities for men and women, clearly the equality of people (men and women) is an emphasised value. It is stressed that the state must provide ways for people to challenge the discrimination that they have encountered: “Those who have been discriminated against have to be able to bring a claim for unlawful discrimination and to receive compensation where it is demonstrated, charge the authorities to change the circumstances.” Here the state has to demonstrate both reactive and proactive qualities.
Tracing care

Tracing the elements of care in policy documents includes identifying the application of the concept of care through its definitions and locations. How is the role of the state in care provision envisioned and explained? Is care positioned against independent coping and “being care-free”? In short, where does the idea of care and caring stand in the document, and how is it characterized?

Role of the state

In the Strategic Action Plan the role of the state is, in fact, all embracing. The state defines the problems as well as provides the solutions mainly through legislative frameworks. The Plan does not attribute any role in the development and goal-setting of the social sector to bottom-up initiatives. Only in one instance it is mentioned that “consultations with social partners” were held. This approach stems directly from a perception of politics as the “cockpit of society” (Sevenhuijsen 2003, 14) that is still prevalent among Estonian politicians. Thus, from the idea of an elective democracy, the government and the state institutions should be able to grasp and possess a sort of essence of society’s objectives, preferences and directions. They would then have to act upon this knowledge and steer society almost single-handedly. The deficiencies of such an approach have been adequately discussed, since the existence and attainability of the “common good” and “the will of the people” in terms of their definition and substance is subverted (Schumpeter 1994). Indeed, in a democratic society the presence of multiple visions of the good and right is quite legitimate; thus the idea of one privileged version of a good life can be characterized as unethical.

The solutions for improving the inaccessible machine of bureaucracy and the impenetrable systems of politics are seen to lie in the development and establishment of a civil society that emphasises the role of the third sector as well as multi-directional communication between citizens and the government (Putnam 1994). Civil society is usually defined as involving third sector, non-profit and voluntary associations that are autonomous from the state (Young 2000, 14). Thus civil society can be seen as a way of improving existing political structures and functions by consolidating and supplement-
ing the input of a wide spectrum of social actors, interest groups, associational unions and others. Additionally, civil society can be considered as the proper mechanism for advancing and deepening the project of democracy (Young 2000), for example to overcome the difficult issue of alienation from politics in liberal societies, or to include the “lost voices” that have been invisible through the lenses of state policy because of present structural social and economic inequalities. In the strategic action plan, the critically important role of non-governmental organizations is rarely recognized; therefore the prescriptive role of the state in social policy is but a logical conclusion.

It is not acknowledged that there is an inherent discrepancy between the way the state has acquired all the power in setting the policy objectives as well as the preferred solutions, and the ideology that expects an independent, autonomous and non-needy citizen to exercise choice and influence the ways in which public policy functions. Currently the state is dictating its views and expecting the market or third sector to respond adequately (for example in aiming to diminish institutional care versus other alternatives and in privatising state welfare institutions to achieve better effectiveness). Perhaps this notion of a strong state is a remnant from the Soviet past, whereas the rhetoric of the independently coping individual is the hallmark of the newly introduced, free market ideology. Either way, it seems that the communicative aspect of civil society and democracy based on interaction and dialogue is missing.

**Motivation and Promotion of Independent Coping**

The Plan insists that benefits are needed for some, but ultimately the stance is that the independent actor would not need care, especially in his or her relations to the state, or overall in the public sphere. Care is here something that is only needed provisionally, until “independence” is again achieved: the principles for unemployment insurance stress “personal liability of workers in the field of social protection” and “use of incentives aimed at promoting active job search” among others. The improved system of benefits for independent coping stresses the commitment “to reducing the number of beneficiaries of passive benefits” and “to shortening the period of payment of subsistence benefits to families.”
The work ethic and the market policies that are geared towards ensuring employment regard financial motivations as most important in people’s choices (Sevenhuijsen 2002, 20). Clearly, financial motivation can be significant, also as means of achieving other objectives, but alternative sources of incentives should also be acknowledged.

Of course, this document defines needs in a specific, labour market related way, focusing on unemployment, sickness and disabilities, while the many other relevant areas for applications of care are not discussed. This is again explained by the still significantly strong public-private division of caring services in Estonian politics.

**LOCATION OF CARE**

Questions about the location of care are seen in the Action Plan as a choice between state institutions and some “alternative” (meaning private or third) sector. The possibility of or need for relocating care from the privacy of families into the political arena (so as to allow, for example, more equal opportunities for women) is not envisaged. Existing caring practices (both paid and unpaid) are internationally heavily gendered. In the current document, unpaid caring work is not mentioned, which indicates the willingness to accept and continue this practice. It is assumed that everyday caring practices are to be fulfilled by women (and perhaps some men) during their free time, and the state’s attention is focused only on those who may not have anyone to take care of them. At most, care is an unwelcome obligation and not an essential part of human existence, since a “decrease in the share of expensive social services” and an “increase in the services facilitating independent coping” are foreseen.

From a neoliberal political perspective, such negligence of care could be quite understandable if it weren’t such an outdated approach even for liberalism. The recognition of the importance and relevance of interpersonal relations in the functioning of society has been elaborated by various political thinkers and philosophers (Nussbaum 2000; Sandel 1998; Etzioni 1993). But the Hayekian perceptions of the functioning of people, the market and society are still proudly voiced by Estonian politicians. The former prime minister and leader of the liberal Reform Party, Siim Kallas, for example, claimed publicly that any desire towards equality is always unfair
and indeed, attempts to achieve equality are the very source of social tension.\textsuperscript{4} He proudly promenades his vision of Estonia as having staked its future on hard-working, ambitious, enterprising modern people, able to accelerate the development of the economic and other sectors. This is a concept of a country as a club-like company of selected efficient workers, leaving outside the vulnerable, the ill, the disabled and the simply humble, “unmodern” Estonians who happen to be born here. Perhaps the metaphor of the “mature society” from the Minister of Social Affairs, is an adequate illustration of that institutionalised form of wishful thinking that has been so influential in Estonian politics for the past decade.

Luckily, the situation is not hopeless, and there is increasing pressure from the NGO sector for a change in this attitude as well as a growing realization within public administration of the need to do so. For example, a public process for agreeing on certain social development priorities among the political parties, NGOs and other stakeholders, by signing the “Social Contract,” was the central issue in much of the social discussion in Estonia in 2003.

\textbf{ADEQUACY, OVERALL JUDGEMENT AND RENEWAL THROUGH CARE}

Admittedly, the \textit{Trace} method of analysing the presence of care and caring in policy documents is a critical approach. It is critical because it is in the forefront of new approaches to civil society and relocation of politics, and thus even more radical is its application to policy documents in the newly established democracies of Central and Eastern Europe. Some might think that a strong focus on care is a luxury in times when the basic structures and policy processes are still being negotiated and located. However, this would be a misunderstanding, since the primary argument of the ethic of care is precisely its contention that care belongs to and forms part of this very basic structure of society and of its constituent relations.

Care is a social practice (Sevenhuijsen 2002, 23) that we all need to survive, grow and accomplish self-fulfilment. Robin West gives a beautiful explanation: “For many of us, this care giving labour (and its fruits) is the central adventure of a lifetime; it is what gives life its

\textsuperscript{4} In the daily newspaper \textit{Postimees}, 12 November 2003.
point, provides it with meaning, and returns to those who give it some measure of security and emotional sustenance. . . . [C]are giving labour, for children and the aged, is the work we will do that creates the relationships, families, and communities within which our lives are made pleasurable and connected to something larger than ourselves. Thus, caring labour is not only essential to the survival and flourishing of the individual cared for and vital to the well being of the community. It is also a substantial part of adult identity” (West 2002, 89).

The ethic of care can also successfully draw out the inconsistencies and flaws of the work ethic and its moral underpinnings. Since waged labour is privileged in terms of establishing one’s worth and deservedness in society, all unpaid labour is automatically rendered invisible. The ethic of care approach is here able to point out the existence of much caring work that does not fit this framework but is nevertheless absolutely crucial for the functioning of people and of society. The ethic of care is also able to demonstrate that the success of many in terms of wage-based labour, is closely dependent on the contributions of those who are not getting paid for their work. The capacity to contest the idea of self-sufficient humans can then form the basis for accepted and justified redistributive activities, since the measurable success of paid labourers should be shared with those upon whose contributions this success was also dependent.

Dependence, in the sense of needing care, is a prerequisite for establishing independence and often of continuing independence. The ethic of care approach thus allows us to view dependence in a more positive way. It provides an opportunity to value those who are traditionally disvalued, to look for their social contribution perhaps through some other lens than that of the financial earner. This should most explicitly be the case for women who are doing unpaid caring work by raising their children and attending to the needs of the elderly. But it also allows the rehabilitation of the ill, the unemployed, the disabled and the elderly, and those who take care of them: family members, nurses, home helps, volunteers and social workers. Everyone is able to contribute socially, as long as there is room for their particular competencies to be noticed and allowed for (Young 2000, 54).
The recognition of the positive potential of civil society associations is needed here, in order to strengthen the positions of those whose voices are indiscernible within formal democratic political processes. Third sector organizations could be better equipped to identify the needs and interests of various individuals and groups in need and to communicate these to other relevant actors and state institutions. The state, on the other hand, should be open to these kinds of communications as a way of continuously legitimating its policies (Young 2000, 179) and of supporting the making and the development of its citizens.

Presently, the only instances where care figures in selected areas within the document is the mercy-like attitude of the state towards those deemed needy. From the perspective of the ethic of care, the document would benefit from a realization that care is an essential part and one of the objectives of a decent society. State policies in Estonia should also anticipate the various new challenges that are already present in the social welfare systems of Western European countries, in terms of shifting gender relations, demographic changes and emerging civil society associations (Williams 2001, 469). The fact that caring responsibilities disadvantage caregivers in participating equally in social activities should also be taken into account (West 2002, 89). In many ways it is the dependency of caregivers (on whom care receivers are dependent) themselves that is politically so problematic (Fineman 2002, 222). As emphasized above, needing care is a universal condition, but being dependent because of providing for this need through unpaid labour can and should be addressed through appropriate policies.5

Additionally, the ethic of care can be viewed as a normative moral approach: by calling us to act responsibly in our relationships with other people and being attentive to their needs and to respond with care (Sevenhuijsen 2002, 27). If we can remove the blame from the needy for their condition in welfare policies, and view them as

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5 In January 2004 a new law extending the wage of the working mother for one year during maternity leave was established. This is clearly a positive step towards recognizing and valuing the caring work of mothers (or fathers, for that matter). However, the measure again takes the principle of desert (as calculated through one’s wage) as the basis for redistribution, and in a current situation of very low child benefits, leaves students and non-working mothers (or those most in need) surviving on the minimum.
responsible, autonomous people with their diverse desires, ideas and visions for a good life, we can consequently be more willing to respect their choices and their needs as legitimate. The ethic of care offers an alternative moral and political lens for judging the activities and inactivities of the society, and challenges the authority of the dominant discourse of the work ethic. It helps us to ask: from what positions are welfare policies formulated, and whose interests do they represent? Are they really attentive to the needs of potential recipients, and how are the recipients defined and scrutinized? Is there willingness to acknowledge the importance of care and recognize as valuable the (unpaid) practices of care? Shouldn’t we rethink the concept of care and legitimate it as a precondition for activities in the public as well as value it as simply a human practice?

Currently there is not even a realization of the need to account for caring practices in the private sphere, much less to conceptualize these as part of public policy. The focus on market and state policies is explained by the continuing acceptance of the old liberal public/private divide, still standing tall, deaf and blind to arguments that point to the patterns of power linking the two. It is only necessary to realize that by not including the notion of unpaid care in its policy document, the state is actually continuing to construct the private in a specific way. Until unpaid care is recognized, the question of the unequal gender balance in private care does not even arise.

Overall, the strategic action plan is well composed and structured in the sense that it explicitly details the objectives and means to reach those objectives. This is a feature that is all too often missing from policy papers. On the other hand, the document suffers from too descriptive a focus and consequently lacks a larger vision, a certain situatedness in the current social conditions in Estonia. The role of the state is clearly scrutinized but in an overly archaic manner, meaning that the functions of the NGOs and the civil society are undervalued and thus not included. Of course one cannot expect the action plan of the ministry to prescribe the activities of the third sector, but at least openness to co-operation and inclusion could have been indicated. Here I am not even insisting on the psychological readiness of officials to be attentive to the needs of those who are cared for, but rather calling for a critical look at structural dispositions that might hinder this communication.
Overwhelmingly, the ways of achieving the stated objectives in the document are based on legislative activities (drafting and implementing legal acts). In some sense this is understandable, as re-independence has lasted only for 10 years, and the sheer volume of necessary legislation has been monumental. In addition, new international requirements are continuously being proposed. On the other hand, the tendency to view formal legal frameworks as the sufficient solution and answer to all problems is dangerous and simply not adequate. It is necessary to realize that laws, decrees and other legal documents form only one tool among many in shaping social reality.

From the perspective of the ethic of care, the conclusion is rather disheartening. Owing to the ways in which the role of the state is positioned, the relationality and mutual dependency of human beings and of the various structures of society are not considered. Little responsiveness is allowed or asked for. The relations of power that are inherently part of the practice of caring and being cared-for are “solved” through top-down regulations; as usual, only the role of the caregiver (the state) is made explicit (Sevenhuijsen 2002, 24–25). What is needed is a realization that independence is an illusion and that all parts of society are linked in many ways, all of them entitled to respect and acknowledgement. Care and caring have historically been excluded from the considerations of the state, and in a sense, the current document simply follows the “tradition.” But surely one can hope that an understanding that different perspectives (like the ethic of care) make room for different political questions and also different public policy solutions has begun to seep through, as the growing prominence of third sector organizations in Estonia testifies.

REFERENCES


THE CONCEPT OF EQUAL OPPORTUNITIES FOR WOMEN AND MEN, OR HOW TO CARE FOR EQUAL OPPORTUNITIES

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INTRODUCTION

Before 1989, during the socialist era, there was no relevant public discourse on women or gender issues in Slovakia—the so called “women question” was part of official state policy and part of communist ideology. This historical situation, of course, did not create a friendly climate for discussing gender issues. As was declared (but also believed by many women and men), women in our country were emancipated (we should add, that the emancipation was regarded as simply meaning to be employed, to be included in paid work)—in reality women have not attained real political/social influence or real political/social power. After the revolution, at the very beginning of the nineties, the problem of the situation of women in society and the question of their status started to be discussed; this process undoubtedly was influenced inter alia by Western feminist thinking. The rising social and cultural discourse on the problematic of gender relations and the wider public debate on women’s issues has increased in recent years and is closely connected not only to the democratisation of society, but also to the main political aim of the Slovak Republic—to become a member of the EU, to preparing the society for EU admission. The Slovak state has adopted several international documents, EU directives and recommendations aiming at achieving equality between women and men. It is in this international context that the need for adopting a national policy document on equal opportunities has arisen.

In what follows we give a normative analysis of the main policy document dealing with the issue of equal opportunities in the Slovak republic, The Concept of Equal Opportunities Between Women and Men (hereafter CEO) using Trace, a method for normative policy
analysis developed by Selma Sevenhuijsen (Sevenhuijsen 2004). This method is based on the perspective of the ethic of care, on its central ideas, according to which care should be understood as a moral, social and political practice and as a form of citizenship. This means that the concept of care should be incorporated into political conceptions. The main aim of our paper is to trace and evaluate the normative framework on which the CEO document is based, its leading values and presuppositions. To meet these aims, we ask questions such as the following: How can the Trace method be applied to documents such as the CEO (CEO does not focus primarily on care issues)? How does one apply an analysis from the perspective of the ethic of care, and how can this perspective be useful in issue of equal opportunities? How does one conceptualise equal opportunities or gender equality through the lens of care? We are aware that it is hardly possible to give fully comprehensive answers to these questions—in our text we draw some lines of considerations that can be useful for the rethinking and reconceptualisation of the very concept of equal opportunities.

In the first part of our paper, following the first step of Trace, we outline the context in which the document has been elaborated and adopted, including its authors and audience. In order to trace its normative framework, it is important to see how the problem is defined and which values underlie the definition of the problem. This is also important for analysing and evaluating the philosophical background of the document. In so doing we concentrate on the issue of the reconciliation of family care and paid work, which is, as we see it, crucial for the entire policy of equal opportunities. In the last part of our paper we will outline some directions for the renewal of the concept of equal opportunities.

**Tracing the concept: its general character, normative framework and leading values**

The document The Concept of Equal Opportunities Between Women and Men, published in March 2001, is the main policy paper devoted to the issue of equal opportunities for women and men in the Slovak Republic. This document was elaborated by the Department of Equal Opportunities for Women and Men, a body which was established in February 1999 as a part of the Ministry of Labour, Social
Affairs and Family of the Slovak Republic (hereafter MLSAF SR). This department was created to ensure a national institutional mechanism for equal opportunities policy. Its main purposes are to monitor the area of equal opportunities, to co-ordinate gender mainstreaming in practice and to initiate relevant legislative changes.

The CEO, which is operative for the period 2001–2005, presents both the political framework for and the main principles of the concept of equal opportunities, and proposes some more concrete political activities needed for its implementation. It was approved by the Slovak Government in March 2001. The document is related to previous documents and legislative changes that are aimed at strengthening the principle of equal treatment of women and men in Slovak society. The document mentions positive steps that have been taken to improve the position of women in Slovakia, “the establishing of a subsection of equal opportunities at the MLSAF SR, the setting up of the Coordinating Committee for Women’s Issues, and the Parliamentary Committee of Women with the National Council of the Slovak Republic. The Coordinating Committee for Women’s Issues outlined the National Action Plan for Women in the Slovak Republic” (CEO, 6). This last, in particular, the National Action Plan for Women (NAP), the program document, approved in 1998 by the Government of the SR for a period of 10 years, directly precedes the elaboration of the CEO. This document as a whole “builds on the experience from the NAP, which notes the incongruity between formally created prerequisites for the application of equality between women and men and the fact that in reality these conditions are not met and unequal position of women in Slovak society persists. The purpose of the concept is to outline the strategic steps for a complex solution, that is, covering both legislative and institutional provision for equality, particularly in three priority areas, where inequality between women and men is most conspicuous in Slovak Republic” (CEO, 6). These priority areas the document defines as follows: Labour market; Public and political life; Family—especially the reconciliation of family and working life.

The document was prepared on the basis of the MLSAF SR. Clearly the existence of international agreements and documents and the process of implementation of *acquis communautaire* were strong reasons for the creation of the CEO and related documents.
Although, according to the authors, “the concept relied on the results of sociological research and numerous discussions, conclusions and recommendations of conferences and seminars with international participation” (CEO, 17), the process of its preparation lacked a wider public discussion on the topic (also involving women’s NGOs), as some observers of the preparation of the document confirmed.

To whom is this document addressed? Is it addressed to the European Community and to the state and governmental institutions of the Slovak Republic. Or should the society as a whole be the audience? From the definition of the document, it may be more logical to look for the responsible actors. The authors maintain that, “since the subject of equal opportunities is multidisciplinary in nature and has not yet been comprehensively analysed, close co-operation will be necessary in its implementation of state bodies, social partners, local government, research institutions, non-governmental organisations and other subjects that will be flexibly and actively involved in the gradual elimination of discrimination, using also adequate system of monitoring and control” (CEO, 2). So it seems that the document envisages its audience as responsible subjects, who should be active in this field, and for whom the document defines their tasks as the “gradual elimination of discrimination.”

The starting point of the document is the thesis that “one of the essential attributes of a democratic state is building such legislative and institutional framework that would guarantee human dignity to its citizens and supervise that their fundamental rights are safeguarded” (CEO, 1). Into this precise context the authors also place the issues of equal opportunities for women and men. As concerns the definition of the problem, equal opportunities are here considered to mean that “human beings may freely develop their abilities and use opportunities without lasting barriers that would entail gender roles or any other barriers to participation in the economic, political and social life of the society based on gender” (CEO, 1).

The document also introduces into the discussion the term “gender mainstreaming.” This is characterised as a “new concept, which involves progressive systematic integration of needs and priorities of women and men in all policies and measures, aimed at enforcing equality of women and men, while taking account of their mutual dif-
ferences and interests” (CEO, 1). The document declares the need to apply this principle in decision-making processes.

The authors of the document repeatedly emphasise that there is still incongruity between formally defined conditions and reality, especially regarding the unequal position of women in society. The solution is seen in strengthening equal opportunities on a legislative level, for example by adopting an “equal opportunities act.” The need for an adequate institutional mechanism to guarantee “consistent observation of the principle in practice” (CEO, 3) is also mentioned several times. The authors call for appropriate control and institutional mechanisms at all levels. What is also needed is an “institutional provision and application of equal opportunities in the Slovak society” (CEO, 7) at all levels of state administration as well as at local or regional levels.

The document then considers specific solutions for three defined basic areas that need specific attention: the labour market, public and political life and family—reconciliation of the family and working life. In the document there is also a specific chapter where the main principles and objectives are defined. The main objective is defined as “the application of equal opportunities for women and men in all spheres of life of the Slovak society, as part of upholding fundamental human rights and freedom” (CEO, 18). This relatively general formulation is concretised through progressive objectives like legislative changes, identification of application procedures, definition of the main social areas or “measures and recommendations for the implementation of the principle of equal opportunities in social practice” (CEO, 19). These still very general objectives are further concretised through several more detailed tasks.

After defining the main principles and objectives, the document deals with measures and recommendations for the implementation of the CEO, which are structured through three main problematic areas (labour market, politics and family).

As far as justification of the policy of equal opportunities is concerned, it seems that economic and political arguments set the tone. Firstly, the document primarily justifies the policy of equal opportunities in economic terms. As we have mentioned above, the necessity of maximally using human resources and human capital in the process of economic transformation and restoration is emphasised.
The second argument used to justify implementing the concept of equal opportunities is the need to meet EU standards and criteria and to satisfy EU institutions in the process of accession to the EU. In this context the concept of equal opportunities is presented in a broader international context. Several documents of the European Commission, the Council of Europe and other institutions are mentioned, including the Treaty of Amsterdam, the Treaty of Rome, CEDAW and others. The document also presents many “good practices” from other European countries. As we see it, despite the declared aims of the document, its main intention is to satisfy EU institutions in the process of becoming a member of the EU. As for the empirical justification of the document, hard statistical and sociological data are cited to strengthen the arguments calling for the implementation of the principle of equal opportunities, but without deeper analysis.

One of the steps of Trace is to identify the normative framework and leading values underlying a policy paper and its problem definition, and also to recognise when these are hidden between the lines, figuring only as background knowledge or as tacit assumptions. In this document it is clear that principles of equal opportunity are considered to be part of universal human rights. The vocabulary of the authors is full of terms like: “human dignity,” “fundamental rights and freedoms,” “equal rights,” “democracy” and “justice,” but also “the high value women ascribe to work.” These liberal values are used to justify implementation of the policy of gender equality, but also as its proposed goals. They also figure as components of the normative justification of the document.

Community oriented values are not clearly and explicitly mentioned, but it is possible to identify their presence. For example, in the context of several relevant factors affecting the decisions of women about entering the labour market, a “work attitude in which work is regarded as a sphere of social contacts” (CEO, 8) is mentioned. Also, the “partnership approach” emphasised in connection with the problem of reconciling work and care can be seen as a form of reciprocity.

As a result, we have some mixed value-systems present in the document, with an apparent tension between neo-liberal and community oriented values. This makes it difficult to see and clarify some
aspects of the issue with which the document deals, for example, the role of the state on the one hand and the role of civil society, on the other.

**Tracing the problems and solutions**

The mixed character of these normative presuppositions also has consequences for problem definition. At first sight the definition of the problem is very general and broad, trying to include all aspects of life. When we take into account the context and the formulation cited in the previous part of this paper, the concept of equal opportunities is strongly defined through the concept of human freedom, through the possibility of using human abilities without barriers like gender roles. This definition is simplifying, in the sense that equal opportunities are viewed as the absence of barriers and the absence of discrimination.

Without further specification of the types of barriers, the forms of discrimination and without further elaboration of the ways in which these barriers should be eliminated, such a definition remains on a formal level. The demarcation of barriers may imply that the problem of inequality can be simply solved by adopting new norms or laws, which remove “barriers” or develop “human abilities and using opportunities.” The document shows no awareness that removing barriers does not automatically establish real equality in everyday practices—the difference and the connection between the concept of equal opportunities and gender equality are not articulated at all. In general, a legalistic approach is characteristic of the document as a whole. We should notice, then, that the very concept of equality is not sufficiently elaborated. The document does not differentiate appropriately between different meanings of equality (equality as sameness, equality in access and voice, equal opportunities, equal rights), and the very concept of equality is used in an undifferentiated way.

It is not surprising that such a discourse does not involve the notion of care as one of the basic concepts interconnected with the principle of gender equality. What also seems strange is the fact that the authors continually declare the multidisciplinary character of the problem and its presence in all aspects of social life, while, on the other hand, they repeatedly try to narrow the problem to three main
domains. According to the people who participated in the preparation of the document, the reason for this is quite simple: the document was prepared under the aegis of the Ministry of Labour, Social Affairs and Family. That is the main reason for only these three domains being more precisely analysed. In this context it should therefore be mentioned that such a document should be prepared at a higher level, preferably at the level of the government as a whole, because the competencies of each ministry are in this sense constraining. Another objection is that, despite quite precisely defined tasks and responsibilities, the financial aspects of the implementation of the defined tasks is ignored.

When we get beyond these general characteristics of the document, we can analyse in detail the content of the three defined domains of inequality and the proposed solutions of the issues. It is striking that in all these domains the economic aspects of equal opportunities are emphasised, in the sense that the need to optimally use human resources in the economic sphere is the focal point of the argument. For example, it is stated that it is very important “to use human potential to a maximum extent in rejuvenating the economy” (CEO, 2). This strong accent on economic aspects is also visible through the document in its persistent emphasis on the issue of employment.

The emphasis on the need for economic independence of women may be seen, of course, as a positive factor; on the other hand, it is based on a premise (and invokes a view) that the employment of women is the main “medicine” for all problems connected with the existing inequality between women and men in various fields of society. But it must also be noted that a vision in which women’s empowerment is seen almost exclusively through their presence on and participation in the labour market, and not in the sense of their real social status and political and economic power, is misleading. Participation of women in the labour market can be seen as a necessary condition of their empowerment, but it is not a sufficient condition—real equality on the labour market is impossible without the elimination of vertical and horizontal gender segregation and without the elimination of gender differentiation in average wages. Although some factors indicating the existing inequality of women in the sphere of paid labour are explicitly mentioned in the document,
little attention is paid to their analysis and to measures for their elimination. Moreover, it is not acknowledged that neither women’s employment, nor their desired equality in participation on the labour market would eliminate other forms of inequality present in the lives of women. For example, as a recent survey on violence against women in Slovakia shows, the imbalance of power within the family has not been overcome by economic participation of women (Bodnárová and Filadelfiová 2003, 78).

The other problem we see lies in the fact that emphasising the connection between equality and participation in the labour market invokes and strengthens the idea that paid work is the main means or the only form of social participation and of increasing social status. This perspective does not leave sufficient room for considering, for example, caring as an important form of social participation in its own right.

Equal opportunities and the concept of care

When we are trying to trace the concept of care and to evaluate how it is conceptualised and whether and how it is connected with the concept of equal opportunities, it should first of all be noticed that care only figures in three contexts: in the context of family life (as care for the family, care for the household and care for children), in the context of (a traditional understanding of) the role of women, and in the context of the need for a “participation of men in family responsibilities, particularly in child-care” (CEO, 15).

This means that the concept of care enters the document in terms of family roles and responsibilities, in connection with the status of women and men in the family and in the context of “unequal distribution in partner roles or low representation of the man in looking after the family and in rearing children” (CEO, 11). Although the document is critical of culturally entrenched stereotypes, according to which care for family and household is almost exclusively the task and responsibility of women, how it deals with care and how, or where it locates care, remain in accordance with this traditional view. It strengthens the traditional view of women as care-givers, without reflecting on the fact that they can (and should) also be seen
as care-receivers. In this context, it is significant that only pregnant
women are viewed as women in need of care. In this respect they are
considered to be a “category at risk,” who need special attention and
conditions, connected with the “unique biological role of women—the
mother” (CEO, 11).

The document states that, in the prevailing model of the family,
care work is implemented by women. Taking this perspective implies
that care is viewed as restricted to the sphere of the family, espe-
cially to child rearing. This also means that care is seen as primar-
ily a private responsibility. In this context it is important to realise
that under the socialist system in Slovakia there was a fairly de-
veloped system of public services for the family, children and the eld-
erly, so care was rather “deprivatized,” at least in some respects. A
serious problem of the previous system was, however, that the serv-
ices offered were often of poor quality. The current orientation in
Slovakia is more in favour of placing care in the private sphere, with
the argument that the system can be “humanised” in this way. How-
ever, this tendency towards privatisation seems once again to
strengthen the traditional role of women as wives and mothers. This
orientation is in contrast with current trends in some Western coun-
tries towards relocating care in the sense of making it more “degen-
dered” and “deprivatized” (Sevenhuijsen 2003).

There is, however, also a positive aspect in the emphasis on the
need to “restructure parenthood on the basis of partnership” (CEO,
15). This means that the need for equality in the sharing of care
between women and men is at least acknowledged. Recognition of
this need would imply a “relocation of care” from women to men
(Sevenhuijsen 2003, 15). But at this point, too, the document suffers
from inconsistencies. Women’s caring practices are primarily con-
ceived as an obstacle to women’s participation in the labour market,
and the proposed equality between women and men in caring prac-
tices is seen as a tool for promoting women’s paid labour and their
greater professional self-realisation. In this respect it is significant
that the document speaks about “reconciliation of the roles of work-
er and mother,” but not about the harmonisation of the roles of
worker and father. In our opinion, this shows that women are in fact
still considered as primary care-givers, despite the verbal declar-
atation of the need for men’s participation in caring practices.
The economic usefulness for society—again—strongly influences this argument. If we ask the question formulated by Selma Sevenhuijsen “is care acknowledged as an activity in its own right or are its characteristics and its goals derived from or made subsidiary to other domains and demands of social life?” (Sevenhuijsen 2004), we must answer that the later case is the true position.

In general, it may be said that the way the document deals with implementing equal opportunities in the family and with the reconciliation of family life and working life is not adequate to the importance of the problem of gender equality. The family is seen as the exclusive place for care, and care itself is seen as a one-sided activity, as an obligation of parents towards their children. Moreover, the document talks a great deal about the need for reconciliation of family and working life, but it does not suggest any real possibilities for enabling this, for example by system of (semi)public services. It only presents some legislative measures, like a labour code and flexible forms of employment. What is totally missing in the document is support for reform of the system of public care services needed for the reconciliation of family and working life.

The CEO thus does not create a space for an interpretation and understanding of care in a broader sense, and for seeing care as a social, political and moral practice. Because it sees care as a one-sided activity, as a relationship between an independent care-giver and a dependent care-receiver, it reproduces the dichotomy between autonomy and dependence. Care ethicists have argued that this dichotomy is an obstacle in understanding the relationality, interconnectedness and interdependence of human beings, and that such a view creates little space for “the weak ontology” of care (Sevenhuijsen 2004). In fact that means that the social character of human nature and human life are perceived in a very restricted manner. The concept of care in the document is, in fact, very traditional, based on an understanding of care as an activity located within the family, within the private sphere. This view of care cannot be easily reconciled with the perspective offered by the ethic of care, with the proposal to view care as a social, moral and political practice. Only care as a social practice is explicitly present in the text of the document. Care as a moral practice is, however, totally absent. As for the political dimension of care, it is present through the role
of the state, as we will consider in the remaining part of our analy-
sis.

The view of care prevailing in the document is closely related to its understanding of human life in general. As is the case in many policy documents, CEO also contains some, though not explicitly articulated, assumptions about human nature. It is not easy to trace precisely what premises about human beings the document has drawn from, but it seems that the notion of human nature underlying this document is the classical enlightenment notion of the abstract human being as an autonomous, rational and self-sufficient individual. Such an individualistic view is hardly compatible with the guiding principle of the ethic of care, which states that “people need each other in order to lead good lives and that they can only exist as individuals through and via caring relationship with others” (Sevenhuijessen 2003, 19).

When we take these ideas on human nature as a starting point of our considerations, we will see the need for a shift in our understanding of the very notion of human nature—a shift from the centrality of the idea of the autonomous individual to the idea of a human being as being in connection with others. As indicated above, this orientation is absent in the general philosophy of our document, and is not visible in the part of document containing measures and recommendations for the practical implementation of the concept of equal opportunities. The recommendations expand and improve social services in the field of child-care, elder care and care for disabled people, but they are first and foremost recommendations for the application of the principle of equal opportunities for individuals in the family, rather than being aimed at the well-being of people as beings defined through their relationality, interconnectedness and vulnerability. But the ethic of care perspective does not imply a devaluation of the notion of independence. In using this perspective as a lens for rethinking the concept of independence, we should not conceive it as an abstract norm, but “as the capacity to find a balance between care for the self, care for others and care for the world” (Sevenhuijisen 2002, 30).

The other aspect of the problematic of care which can be identified in the text is connected with the role of the state in its labour and family policies. The authors of the document define the position of
state bodies and the state administration in the elimination of discrimination and strengthening the principle of equal opportunities. According to the document “the principle of equal opportunities should be recognised as one of the priority tasks within building of the democratic state” (CEO, 2). That means that equal opportunities are seen as one of the means of creating a democratic state. On the other hand, the state is also seen as the main guarantor of equal opportunities. The role of the state is stressed in several contexts when “state bodies” (MLSAF SR, National Labour Inspectorate, National Labour Office) are defined as responsible institutions.

Although the document does not use the concept of care in this context, its vocabulary gives the impression that the state is viewed as an institution which should take care of women and men in all main aspects of their life. The part of the document containing measures and recommendations for the implementation of the concept of equal opportunities involves many tasks and responsibilities of the state, a fact which suggests that it is the state and its executive agencies that best know the needs of women for promoting their equality. In the context of this kind of thinking about the role of the state, the problem of paternalism arises. The risk of paternalism is connected with the low level of women’s representation in political life and in decision-making positions in Slovakia.

As far as the notion of gender is concerned, some degree of conceptual confusion characterises the rhetoric used in the document. It does not present a precise definition of gender, and the very terms sex and gender are used in a confusing way. Such an understanding of gender leads to a simplified view of discrimination. Discrimination is considered mainly in the field of paid labour. If we consider the three layers of gender as identified by the American philosopher Sandra Harding (gender-symbolism, gender as social and collective identity and gender as element of social structure) (Harding 1986, 18), we must say that such a more complex understanding of gender is missing in the document. Gender is rather reduced to an element of the social structure and gender roles, but without further analysis and clarification of what these roles are and how they function, and without considering how gender symbolism and gender stereotypes are connected to the prevailing model of gender roles.
Another aspect related to the insufficient understanding of gender is that the “genderedness” of care is not acknowledged: the historical character of the connection between gender and care is not accounted for. Moreover, gender is conceived as a homogenous category: differences of class, ethnicity or age between women, all of which impact on their needs, responsibilities, activities, life strategies etc., are not accounted for. For example, the specific needs of Roma women (because of their low level of education, poor living conditions, strong traditional family relations, etc.) are not discussed at all.

In general, the document lacks gender sensitive language and a gender sensitive approach, which means an approach based on an awareness of the historical, social and cultural construction of masculinity and femininity and the relationships between them. For example, although the document speaks about “entrenched prejudice about men being more fit to carry out certain works, or functions” (CEO, 11) it seems that it does not take seriously enough gender stereotypes as barriers to gender equality.

The use of this simplified meaning of gender can also be connected to the fact that the category of power is not articulated in the document. Inequalities are conceived in terms of the position of women and men in the labour market, in the sphere of political representation and in the family. When using the category of gender as a tool of analysis, we should orient our attention, as we suppose, not only to the problem of difference (for example towards a different position of women in the above mentioned spheres), but also towards the problem of inequality of power; to think through the lens of this category also means to address the different relationship women and men have towards power. The document does not articulate the problem of gender inequality in terms of an imbalance of power, which means that some important sources of inequality remain hidden. So, as we see, the forms of inequality stated in the document are some forms of manifestation of deeper inequality, for example the power inequality.

As we have mentioned above, the state is seen as a key agent in the process of implementation of equal opportunities policies, but the role of the state is simultaneously reduced to creating a legislative framework. Secondly, the accession process creates an important
context for the creation of the document; equal opportunities is considered to be a criterion for accession to the EU. These facts establish the risk of some formal understanding of the whole politics of equal opportunities.

**Political philosophy, language and discourse**

Since the key concepts (equality, gender, equal opportunities) are used in a rather unclear way, the rhetoric and the vocabulary used in the formulation and elaboration of the problems is often also rather contradictory. For example, on the one hand the non-discriminatory character of the current legislation is stressed, but later it is strongly stated that discrimination needs to be overcome mainly by legislative changes: other forms of discriminatory practices and their backgrounds are hardly addressed.

This conceptual confusion implies that the terminology in the document is often unclear. The language used in the document is overwhelmingly descriptive. One of the important characteristics of the text is the use of a dichotomous vocabulary—dichotomies like family versus work, equality versus discrimination are frequently used, which is also an example of the very traditional understanding of central concepts used in the document, along with those of equality, family, work etc. Moreover, one can find stylistic and rhetorical inaccuracies which stand in the way of understanding and interpreting the text. For example in the part about reconciliation and self-realisation in both employment and in the family, it is not clear whether self-realisation is understood as connected with employment or with family life.

The language of the CEO is apparently universalistic, and in this sense the document shows a low degree of gender sensitivity. This feature of the text is apparent in the part on measures and recommendations, for example when a mixed vocabulary is used to deal with violence against women—both the terms “domestic violence” and “violence against women” are used without clarification of their difference in meaning. It is probably this kind of conceptual and terminological confusion and inconsistency that led to the impression of the contradictory character of the document as a whole. As we have mentioned, the text also uses gender-coded dichotomies like
private/public, paid/unpaid work, by which it orients its perspective on equal opportunities towards traditional thinking in terms of binary opposites.

There is also a specific problem with the English translation of the document—for example in the Slovak version the terms “sex” and “gender” are used as equivalent. But the whole text is clearly not correctly translated. The first translation mistake was made before the original document was prepared. The authors probably worked with some materials in English and mechanically adopted some expressions. Several terms are not translated correctly and therefore are used in an inaccurate way. The second point was the translation of the Slovak text into English, during which many mistakes also slipped in. This is especially problematic when it is presented to the outside world, for readers (experts) who must work with material that is actually far removed from the reality of the official document in the Slovak language.

Reflecting on the discourse expressed in the document also helps us to identify a political philosophy underlying its arguments. In the light of the foregoing analysis, we conclude that the present philosophical framework has a neo-liberal character and is closely connected to an ideology of market-oriented thinking. Principles of individualism can also be traced, especially in the way the problem and solutions are presented.

In spite of our critical remarks, we think that the overall judgement should not be completely negative. The CEO shows at least an acknowledgement of the problem of equal opportunities for women and men in Slovak society, and it also presents some solutions. In our opinion, this analysis shows that the policy of equal opportunities, certainly the main political document dealing with it in Slovakia, needs conceptual reconsideration. As we see it, the ethic of care and its conceptual framework can be a useful analytical tool in this respect, especially when speaking about family and work and the reconciliation of family and working life.

**Instead of a conclusion: how can the ethic of care contribute to equal opportunities policy?**

One of the most important steps, perhaps the most difficult, in applying of the *Trace* method is a renewal of the policy paper in the
light of the main principles of the ethic of care. When we consider renewing the document, we should ask questions like: How would the ethic of care perspective change the core concepts of the document? How to incorporate the so called “weak ontology of care” into the philosophy of equal opportunities? In what follows, we cannot give a complete and comprehensive picture of new concepts for the CEO; we would just like to sketch some possible lines for “rethinking.”

Introduction of the principles of the ethic of care could change the perspective and could help to overcome the opposition between private and public care, and create a space for a “humanisation” of care in every sphere and in every respect. In the light of this theoretical framework, the “humanisation” or “dehumanisation” of care should not be related to its localisation, but rather to the values that guide its practices.

The opposition between care and paid work as laid down in the document and the need for reconciliation of the roles of worker and mother surely reflect the real situation of many, perhaps of the majority of women in Slovakia. As a recent sociological survey shows, women are still the “only” responsible persons for most of the work in the household. In 88% of families women do most of the cooking, in 81% women do the cleaning; in 68% of families women do the shopping. Also a comparison with earlier surveys (Bútorová et al. 1996) reveals that there are no significant shifts towards a more fair division of labour in the household sphere (Bútorová et al. 2002).

But if we assume not only that private care is an important form of social practice, but also that care is one dimension of a wide range of other social practices, and that it is in fact an essential feature or dimension of human activity in general, such an opposition or dichotomy crumbles. From the perspective of the ethic of care, we can ask new questions about the relationship between care and work, for example the following: How can the principles of care be implemented into the workplace and into the labour market? How can leading values and norms ruling working practices like competitiveness, autonomy and responsibility be combined with leading values as proposed by the ethic of care, like attentiveness, trust, solidarity, reciprocity and altruism? Or in other words: how can a space for care be created in the workplace? These questions orient our attention not only towards the organisation of work within work-
places (institutions, organisations, offices and firms and their personnel policy), but also towards a need for what Sevenhuijsen regards as the second line of relocation of care—a relocation of care from the inside to the outside, from the private sphere to the public sphere (Sevenhuijsen 2003, 15).

Reflecting on the role and responsibilities of the state in promoting gender equality through equal opportunities policy in terms of care, it is useful to distinguish the four different dimensions of care as a social process, as elaborated by Tronto and Sevenhuijsen (Tronto 1993; Sevenhuijsen 2003), each with corresponding moral values. According to this approach, care should be seen as a complex practice, involving both particular caring acts and a general habit of mind to care (Tronto 1993, 127). In this sense care consists of caring about, which means the recognition of the need for care and requires the value of attentiveness; taking care of means taking necessary steps towards a need to be met and requires responsibility; care-giving is an actual caring activity, which presupposes competence; care-receiving refers to the responsiveness of care-receivers. Distinguishing these different phases of care facilitates new lines of thinking about the role of the state and helps to conceptualise it in terms of care. For example, the institutions of the state should be attentive to the needs of different groups of citizens, or/and should create a room for various organisations (for example NGOs) to practice attentiveness towards the needs of people and to transfer their experiences with these into political discussions about how care is organised on a societal scale. In the light of such a more broadly understood concept of care, one can recognise that the state does not have to be a primary care-giver, as underlies the CEO—but that it should rather be responsible for creating a climate (mental, material and financial) that is supportive to both state and non-state care-givers—individuals or groups and various organisations, but also for example educational bodies. By a supportive mental climate, we mean a social and cultural public climate where care is valued and respected in its own right and not as an instrument towards other needs, like, for example, the needs of the market economy.
References


This text is a normative analysis of the Slovenian Act on Equal Opportunities for Women and Men that was adopted by the National Assembly of the republic of Slovenia on June 21, 2002. The Act on Equal Opportunities for Women and Men (hereafter the Act) will be analysed from the perspective of an ethic of care and based on implementing the Trace method. The theoretical and practical implications of an ethic of care can represent a bridge between theory and policy with the focus on care as a moral and political concept (Sevenhuijsen 1998, 2002, 2003, 2004; Tronto 1993). The latter is of particular interest from the equal opportunities policy aspect. Equal opportunities are, in the policy context, depicted as a matter of justice and thus related to the public sphere. Care is in the social liberal view linked to the private sphere and to the notions of vulnerability and dependence. Feminist thinkers, such as Sevenhuijsen (1998) and Voet (1998), point out that justice supposes equality, that is equality of rights and opportunities, while care is marginalized in the private domain and related to vulnerability and dependency. In this regard care and equality exclude each other, because equality represents everything that care is not. Equality is understood as autonomy, independence, and self-sufficiency, which represent just the opposite of care, which is associated with weakness, dependency and vulnerability. Therefore, the main focus is on the question of whether an ethic of care with its core concept of care can contribute to equal opportunities policy in Slovenia.

Policy documents, such as the Act on Equal Opportunities for Women and Men, “can be analyzed as vehicles of normative paradigms” (Sevenhuijsen 1998, 123). By the term normative, we can under-
stand the system of beliefs, values, norms and ideologies that underpins policy documents. In the context of analyzing the equal opportunities policy, Young’s definition (1990, 16) of the paradigm as “metaphysical presuppositions, unquestioned terminology, characteristic questions, lines of reasoning, specific theories and their typical scope and mode of application” might be very useful. Policy paradigm in this sense represents a “mode of reasoning,” a relation between the state, political authorities and citizens (Sevenhuijsen 1998, 123). Power relations, prevailing values and ideologies underlie the policy documents, which are thus neither value-neutral, nor gender neutral.

Tracing the Act on Equal Opportunities for Women and Men represents a challenging task because of the nature of that document, which at first glance appears to be value-neutral. As Sevenhuijsen points out (2004), policy makers strive to create value neutral policy texts, in order that “only facts should count, not values”; on the other hand, values, moral statements and arguments are often evident in policy texts. The equal opportunities policy which focuses on the integration of women in the public sphere, that is in paid labour and in politics, while at the same time overlooking the importance of the private sphere, family life and the role of men in it, is insufficient in determining its goal, that is equal opportunities for women and men. Moreover, what will such equality of participation bring in terms of actual equality and what will it bring to women?

The main aim here is to explore the normative framework of the Act. What are the goals of the Act and what are the underlying normative concepts? How is care conceptualized in the Act? The analysis will focus on the Act only, but information and knowledge that is available outside the written Act will also be used. The analysis will begin by situating the Act in the wider political and social context. Tracing the terminology of the Act and its definitions with a focus on terms, such as equality and gender will follow. Further, the leading values, which underline the Act, will be discussed in relation to the concept of citizenship and the ethic of care. The last part of this paper will explore the possible implications of the ethic of care for equal opportunities policy in Slovenia, focusing on the relation between equality, care and public–private distinction.
In order to contextualize the analysis, it is necessary to situate the Act in the social and political framework of Slovenia. I will sketch the position of women in relation to their rights, care and equality in Slovenia in the last twenty years. This recent past presents relevant political changes, including the change of the state and the political system from state socialism to democracy.

From 1945 till 1991 Slovenia was an integral part of the former Socialist Federative Republic of Yugoslavia. In the socialist system “the project of women’s emancipation” was embedded in the central idea of inequality based on the existence of class relations and private property (Jalušič 1999, 112). The entry of women into the labour sphere1 was a “duty to the state and to their families” and represented a socialist ideology of an active contribution of all citizens, women and men, to social, economic and national development (Molyneux 1982, 174). This is not to say that inequality between women and men did not exist in the socialist system, but to point out that socialism improved the status of women in the domain of paid labour and in the domain of rights. For the purpose of this paper, only women’s reproductive rights in the former Yugoslavia will be emphasized. As Jalušič (1999) emphasizes, reproductive rights, which included the right to abortion and the right to equal access to social services, were granted by the state. Social provisions, such as childcare and day care centers that were financially accessible to people, are examples reflecting the strong role of the state and care as a publicly recognized matter. Above all, the socialist system considered care as a public matter, which, as will be shown in the case of the Act, cannot be claimed for the transition period in Slovenia.

The breakdown of the former Yugoslavia in 1991 and the beginning of the new political system in Slovenia affected the position of women in the public as well as in the private sphere. According to Jalušič (1999, 123), “women lost many of the social benefits they had had in the last period of socialism,” but have nevertheless “success-

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1 Women were not only considered as mothers and housewives but also as workers. This is one of the differences between the socialist and capitalist states; the latter is based on the concepts of the “family wage”—one salary, earned by a man was enough to support the family—and the “full-time housewife” (Molyneux 1982, 174).
fully retained and built some ‘old rights’ (including abortion) into the new state.” The shift from socialism to democracy based on a liberal social concept of citizenship can also be observed in the relocation of care from the public to the private sphere. The political and social uncertainty of the 1990s in Slovenia, such as social insecurity and unemployment, seemed to affect women to a greater extent than men. In addition, the integration of Slovenia into international institutions, such as the European Union and NATO, is reflected in a reduction of the sources for social facilities. Jalušič (1999) notes that women were affected not only by these changes, but also by the conflicts and problems that these changes brought, particularly in the domain of family life (care as the private matter of citizens).

The issue of equality for women and men and the issue of women’s rights seem not to be priorities on the political agenda during the transition period in Slovenia. In Jalušič’s words (1999, 119), “the emancipation of women ceased to be [an] automatic part of the system’s legitimization” in the new democratic state. However, the principle of equality before the law is ensured in Slovenia by the constitution, a fact that does not necessarily guarantee equality for women and men in actual life. As studies reveal (Office for Equal Opportunities), women as homemakers and caregivers devote a disproportionate amount of time to family life and to household work compared to men. It can be said that the breadwinner/housewife model still prevails in Slovenia. The percentage of women in the public sphere is low, particularly in politics, especially at the governmental level. According to Jalušič (1999), participation of women in politics decreased during the transition period, especially in the first half of the 1990s, a trend which shows the negligence of the state over the issue of equality between women and men. The percentage of women MPs in the National Assembly of the Republic of Slovenia is 13.3%, while in the national parliaments of the EU member states the average percentage of women MPs is 24.8%. The percentage of

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4 The last governmental elections were held in 2000; the upcoming elections will be held in the fall of 2004.
women in the government and in the parliament in the member states varies from country to country: the highest percentage is in Sweden and Denmark (between 40% and 50%). This comparison does not presuppose the assumption that full equality between women and men has been achieved in Scandinavian countries, but only shows the present representation of women in politics.

Above all, general legal equality for men and women in the socialist period was granted by the state, including women’s reproductive and social rights. The position of women in the transition period seems to deteriorate, particularly with regard to the participation of women in politics. Thus the main problem, as stated by Jalušič (1999, 129), is that the shift from socialism to democracy in Slovenia did not encompass a change of “traditional relationships, family conditions, and daily life,” all of which form a barrier to women entering the politics and to men participating equally in the private sphere.

Contextualising the Act

As mentioned above, Slovenia as a country in transition and as a new member state of the European Union is facing inequality between women and men in the public and the private spheres. The under representation of women in politics, the wage gap, and the glass ceiling phenomenon are only a few indicators showing inequality in the public sphere, while inequality in the private sphere can be seen in the fact that women still do the majority of caring and household work. The Slovenian state has been engaged in dealing with the inequality between men and women on a legal basis by adopting several international and EU documents and declarations. In this section I will focus on the following questions: who is the author of the Act? who is addressed in this Act? and what is the wider legal context of the Act?

The National Assembly of the Republic of Slovenia adopted the Act on Equal Opportunities for Women and Men on June 21, 2002. The author of this Act was the Office for Equal Opportunities,5 which cooperated in the preparation process with governmental institu-

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5 The Office for Equal Opportunities, former Bureau for Women’s Politics is a governmental office established in 1992 (Government of the Republic of Slovenia, Office for Equal Opportunities, <http://www.uem-rs.si> [June 4, 2004]).
tions, non-governmental organizations, ministries, women members of the National Assembly, Association of Free Trade Unions of Slovenia and individual experts in the field. The Act is thus the product of various political actors (local and governmental) and various international declarations and regulations. International documents, which were ratified by the former state of the Socialist Federative Republic of Yugoslavia, became a part of the legislation of the Republic of Slovenia after 1991. In addition, among the EU and international documents that were relevant for the Act, the most important are: the Treaty of Amsterdam (1997), the Community Framework Strategy on Gender Equality (2001–2005), and the Beijing Declaration and Platform for Action (1995). These documents and declarations aim to struggle against inequality between women and men, particularly in the fields of equal payment, equal treatment and social security.

Above all, the Act is the product of various political actors and various international and EU declarations and documents. These documents and declarations encourage equality between women and men. The important documents that were ratified under the legislation of the former SFR Yugoslavia are the following: the Convention on the Elimination of All Forms of Discrimination against Women (Official Gazette SFRY-MP, No. 11-48/1981), which was ratified by SFR Yugoslavia in 1981 and became valid in Slovenia on September 17, 1992, on the foundation of the Act on the Notification of Succession; the International Covenant on Economic, Social and Cultural Rights (Official Gazette SFRY, No. 7/71); the International Covenant on Civil and Political Rights (Official Gazette SFRY, No. 7/71); the Convention on the Elimination of All forms of Discrimination against Women (1979) (Proposal of the law).


The term gender equality will be discussed only in the context of tracing the Act. It would nevertheless be interesting to analyze the language in the EU policy documents, but this goes beyond the scope of this paper.
men in both private and public spheres, but by privileging the improvement of the status of women in the public sphere. Equal representation of women and men in the public sphere, namely in politics, is seen as significantly important. Nevertheless, the question that arises at this point is how equality between women and men can be achieved if only one sphere, the public sphere, is regulated and controlled by legal regulations such as this Act, and the private sphere remains aside. In the case of Slovenia, the accession to the European Union played a considerable role in adoption of the Act. As observed by Jalušič and Antić (2001, 16), “the topic of the shaping of equal opportunities for women and men” in countries\textsuperscript{12} such as Slovenia, Slovakia, Poland, Hungary and the Czech Republic, “has been introduced on their agenda through the process of the accession to the European Union.”

\textbf{TERMINOLOGICAL FRAME OF THE ACT}

Situating the Act in the political and social context provides the ground for better understanding and analyzing the Act. In this section the content of the Act will be presented and major terms and their definitions as they appear in the Act, such as gender, gender (in)equality, equal treatment and equal opportunities will be discussed. In addition, gender and gender equality, as the main terms of the Act will be considered from a feminist perspective.

The Act contains 42 Articles, which are divided into 6 groups: 1. General Provisions (aim and content of the Act are defined); 2. Definition of terms (gender equality, equal treatment of women and men, general measures, and special measures); 3. Adoption of special measures (positive, encouraging, and programme measures); 4. Those responsible for tasks, their competencies and obligations (National Assembly, Government, ministries, role of the institution of education, the importance of a National programme for equal opportunities for women and men, Office for Equal Opportunities, the role of hearing cases, local communities, political parties, and human rights ombudsman); 5. Penalty provisions; 6. Transitional and final provisions.

\textsuperscript{12}The research project, conducted by the Peace Institute, Prospects for Gender Equality Politics in Central and Eastern Europe, in which the above mentioned countries were included.
From this structure it can be seen that, apart from the first and second group of Articles, where the problem and terminology are defined, the main part of the Act deals with various policy measures and determines the actors obliged to implement those measures. Thus the Act gives the impression that establishing “gender equality” is only a matter of rights and obligations, and therefore a matter of technical realization (political, namely state actors implementing necessary measures).

Gender, as a core term of the Act, appears in Article 1/2 where the aim of the Act is defined in terms of different roles:

> removal of unequal treatment of women and men as a form of discrimination in practice arising from traditionally and historically conditioned different roles within society, as well as the establishment of conditions for the introduction of equal representation of both genders in all fields of social life (Act, Article 1/2).

Gender is depicted as the social construction of being male or female, in different roles, expectations and behavior. The term gender is used by the Act in the plural form as a shorter version of women and men. The Act works with the term gender as a synonym for women and/or men. This can be traced in Article 12/1 where the role of education is emphasized: “preparation of both genders for active and equal participation in all fields of social life.” Besides the use of the plural form of the term gender, the term women also appears in the plural form and always together with the term men (also in the plural form) which again gives the impression that the authors of the Act simply used gender as a synonym for women and men. Only in two Articles in the Act does the term women appear alone. In Article 1/1 one of the goals of adopting the Act “is to define common grounds for the improvement of the status of women,” and Article 15/2, where the main content of the National Programme for Equal Opportunities for Women and Men is proposed as: “aims and measures for the achievement of goals in individual fields of social life, above all in the fields . . . violence against women. . . .” These two examples describe different positions of women in comparison to the status of men in the society. The former example recognizes women as a group that is in a less advantageous position than men. The latter example describes women as exposed to violence, which again places them in a subordinate position towards men and
makes them more vulnerable and powerless. In short, a plural form of the term “gender” is used in the Act to replace the terms “women” and “men.”

This use of terminology is problematic from a feminist perspective, because it acknowledges two categories, women and men, while differences or similarities within each of the categories are not considered. In the feminist debates over the sex/gender distinction from the 1960s onward, the issue of homogeneity and heterogeneity has been very much present. In the 80s and 90s many feminist authors, such as Riley ([1988] 1993), criticized the homogenous category “Woman,” declaring that gender is not the only category that reveals relations of oppression and subordination. As Nicholson (1998) and Squires (1999) point out, gender, as a social construction can be very essentialist. From the context of the Act, is can be speculated that the use of the term gender works in such a way as to conceal power relations between women and men and also among women and among men. It is clear that the Act simply depicts the category “women” and the category “men” as homogenous categories. The perception of the homogeneity involved in being male or female is problematic because it neglects issues such as class, socioeconomic status, education, health, religion, and personal life, all of which can be important in the context of the equal opportunities policy.

In the Act gender equality and equal treatment for women and men are explicitly defined. First, gender equality is described in the Act:

Gender equality means that women and men shall equally participate in all fields of life and that they shall have equal status, equal opportunities for the exercise of all rights and for the development of their personal potentials by which they contribute to social development, as well as equal benefit from the results arising from development (Act, Article 4).

As stated in the definition, “gender equality” reflects equality in participation, status, opportunities and benefits from social development. The Act expects that women and men should have equality of access in participating in and contributing to social development and have equality of benefits. “Gender equality” is thus understood in the Act in terms of equal distribution and equal participation, and directly linked to justice. Sevenhuijsen’s concepts (2002) of equality
of outcome and equality of starting position are present in the Act. Equality of outcome and equality of starting position are nevertheless concepts that are in the Act applied to the public sphere.

Second, Article 5/1 of the Act defines the meaning of equal treatment of women and men as “the absence of direct and indirect forms of gender based discrimination,” which is again related to the public sphere. Equal treatment is based on the law and on distributive justice, meaning that regardless of sex, people should be treated equally. Surprisingly, there is no explicit definition of equal opportunities for women and men. Closer reading of the Act shows that equal opportunities might be interpreted as the final goal of implementing the Act in different fields of life or a legal tool to fight against gender based discrimination, like unequal treatment:

\[T\]he aim of this Act is to . . . and the establishment of equal opportunities for women and men in political, economic, social, educational fields and other fields of social life (Act, Article 1/1).

\[T\]he establishment of equal opportunities . . . represents the elimination of obstacles to the introduction of gender equality, above all through the prevention and removal of unequal treatment of women and men as a form of discrimination in practice arising . . . the establishment of conditions for the introduction of equal representation of both genders in all fields of social life (Act, Article 1/2).

It is unclear here whether equal opportunities are the final goal or a tool which will contribute to the establishment of “gender equality.” In the first instance, the notion of equal opportunities in the Act includes both the private and public spheres of the person’s life. In the second instance, equal opportunities are related to the public sphere. The unequal status of women and men in society, according to the Act, exists in all fields of life. However, the legislatively proposed solution refers to the implementation of measures that mainly deal with the public sphere while the private sphere is left out. The inconsistency of the Act can be identified as the public-private dichotomy. The private sphere as defined in opposition to the public sphere can be observed in Article 4 and Article 15. In Article 4/1 the term gender equality is defined as equal participation of men and women “in all fields of public and private life,” and in Article 15/2 the fields of social life are listed which will be covered by the National Programme for Equal Opportunities for Women and Men. These
fields are, “employment, social security and health care, education, family relations, violence against women and representation of both genders in public life” (Act, Article 15/2). Fields of social life in this Article include both public and private spheres, the latter covered by two terms, “family relations” and “violence against women.” This definition creates confusion, since fields of social life can be recognized in other Articles, such as Article 1/1, 8/2, 19/3:

[T]he establishment of equal opportunities of women and men in political, economic, social, educational fields and other fields of social life (Act, Article 1/1).

Positive measures . . . in the fields of education, employment, professional life, public or political activity and elsewhere within the framework of the specific fields of social life (Act, Article 8/2).

[T]he introduction of positive measures in those fields of social life in which there is evident non-balanced representation of women and men (Act, Article 19/3).

From the above quoted Articles it is clear that social life covers mainly the public sphere. Additionally, the terminology, such as “non-balanced representation” and “positive measures,” reveals that fields of social life represent the public sphere. The so-called “other” fields of social life as mentioned in the Act remained unquestioned and undefined.

Tracing the major terms and their definitions reveals the inconsistency of the Act. The term equal opportunities is not defined. Moreover, the term gender is used in the Act as a synonym for women and men. “Gender equality” is depicted as equality for women and men in distribution and participation. As such, equality for women and men is a matter of justice and the public sphere. Besides, a discrepancy can be found within the Act referring to the relation between gender inequality and the private/public sphere. Terminology used in the Act, such as “equal status,” “equal opportunities,” and “equal treatment” is structural in the sense that is related to the public sphere. To summarize, the inconsistency of terms, such as “fields of social life,” “private” and “public sphere” reveals a paradox of the Act, namely how to assure equal opportunities in all fields of life (private and public) if the Act deals mainly with the equality between women and men in the public sphere.
As discussed in the previous chapter, the Act considers equality for men and women mainly in the public sphere. In addition, equality as stated in the Act is to be assured by the state, specifically by state institutions. The role of the state in terms of granting rights seems to be necessary for legal equality; nevertheless, the question that occurs at this point is what is the role of public authorities, NGOs, citizens, and media in “repairing the world” (Tronto 1993)? This section discusses the political actors and their roles in preparing the grounds for formal and legal equality as proposed in the Act.

In order to establish equal opportunities and equal treatment of women and men, the Act provides general and special measures. The general measures are related to the law that prohibits discrimination based on gender. They include the activities of the government and of the Office for Equal Opportunities to promote within their work equal opportunities and equal treatment of women and men. The special measures are concerned with promoting equality of women and men in the public sphere by implementing positive, encouraging and programme measures. The list of measures states the need to assure “gender equality” in those fields where under-representation of either women or men is observed (for example when the representation of either women or men is lower than 40%) (Act, Article 7/2).

If the problem is defined and the proposed measures for its solution are designed, then there is the question of “who will do the job?” As stated in Article 1/2 of the Act, “the establishment of equal opportunities is a duty of the entire society . . . .” The Act reduces “the entire society,” however, to state institutions, with an emphasis on the government and its ministries. In Article 11/1 it is stated that these equal opportunities are “above all a duty of the government and its ministries.” The actors who will implement the proposed measures within their work are policy-makers: the government, the National Assembly in cooperation with the Office for Equal Opportunities, local government institutions, political parties, and the human rights ombudsman. The responsibility of state institutions is embedded in their obligations and duties to establish equal opportunities.
First, the obligation of the National Assembly is to adopt the Resolution on the National Programme for Equal Opportunities for Women and Men. As is stated in the Act, the National Assembly shall, to the greatest extent possible, respect the principle of balanced representation of women and men for the establishment of working bodies and the composition established of working bodies and the composition in accordance with its Standing Orders (Act, Article 10/2).

The National Assembly is suggested as a role model for other institutions in terms of its responsibility for performing these tasks. The norm of equality is based on distributive justice, that is, on “the principle of balanced representation” of both, women and men in the public sphere (Act, Article 10/2). In addition, ministers have the task of appointing an official (as a coordinator for equal opportunities) within their ministry to put into practice the measures for equal opportunities. The legal obligation of the official is also to cooperate with the Office for Equal Opportunities.

Second, the coordinating role of the Office for Equal Opportunities (between the National Assembly, government, ministries, and non-governmental organizations) and the responsibility of the Office for Equal Opportunities are also presented in terms of obligations and duties that are performed mostly in the public sphere. The Office for Equal Opportunities should monitor the implementation of the provisions of this Act and regulations enacted on its basis, co-ordinating activities aimed at implementing gender mainstreaming, including providing professional assistance for the development of appropriate methods and techniques; co-operating with non-governmental organizations active in the field of equal opportunities and providing partial funding for their projects or activities (Act, Article 18/1).

In order to monitor the actual situation of establishing the basis for “gender equality,” the Office for Equal Opportunities appoints an Advocate for Equal Opportunities for Women and Men with the role of hearing cases of assumed unequal treatment of men and women. The aim of this activity, which is free of charge, is to investigate actual discrimination based on sex.

Third, local communities in the attainment of the Act, as stated in Article 30/1, “shall . . . promote and establish equal opportunities and
take into consideration the gender equality perspective.” They are expected to work in coordination with the Office for Equal Opportunities and the proposed co-ordinator for equal opportunities.

Fourth, the role of political parties is embedded in the concept of gender representation in state politics. Political parties, as stated in Article 31/1,

shall adopt the position on the issue of balanced representation of women and men and, accordance with this position determine methods and measures for the promotion every four years, a plan for achieving balanced presentation of women and men and measures for its promotion (Act, Article 31/1).

Coordination between political parties and the Office for Equal Opportunities is depicted in the Act in the plan that is to be submitted to the Office.

Fifth, the role of the human rights ombudsman is that he/she endeavors, within the framework of her/his work, to ensure “gender equality.”

Sixth, the role of the education system is recognized as an important element in the process of achieving “gender equality.” As stated in Article 12/1,

education matters of gender equality shall be an integral part of the system of education and vocational training which, among other things, shall include the preparation of both genders for active and equal participation in all fields of social life (Act, Article 12/1).

Apart from the importance of “gender sensitive” curricula, the Act does not acknowledge the role of teaching, the role of teachers or of educational material as important elements in the process of learning.

Equal opportunities are considered as a “duty of the entire society,” which is a very general statement and which is, later in the Act, specified in the obligations of state institutions (Act, Article 1/2). Even though “gender equality,” as stated in the Act, considers equal representation of women and men in the private and the public spheres, the Act deals only with the public sphere, which is reduced to state institutions and the educational system. It is striking that the
Act does not acknowledge the role of civil society by which citizens could engage in a variety of activities aimed at gender consciousness raising\textsuperscript{13} (for instance, workshops, art and theatre performances, etc.). As such, the Act promotes equal opportunities as a matter of state institutions, which works as a top-down strategy. According to Young (2000, 156), state institutions “have unique capacities for co-ordination, and administration on a large scale.” Nevertheless, civil society is a vital part of a public space where “different social sectors express their experience and formulate their opinions” (Young 2000, 155). In the context of the Act, this would mean the integration of citizens in the process of establishing equality for women and men.

\textbf{Underlying values}

The assumption behind the Act is that “gender inequality” would be eliminated or its extent would be minimized, if women participated equally in the public sphere. Equality of women and men is understood by the Act in terms of equal rights, responsibilities, status, opportunities and equal benefits. In the context of the Act, equality might be equated with justice in the sense that distribution and participation are means for achieving equality for women and men. We are thus faced with the typical social liberal understanding of an independent individual whose main status is recognized by her/his paid work (Lister 1997). The political philosophy that underpins the Act can be characterized as social liberalism, which has values such as equality, rights, equal treatment, active participation in the public sphere and prevention of discrimination based on gender. The idea of formal and legal equality in the context of social liberalism might be perceived in a similar light to the idea of equality in state socialism. The unequal position of women was recognized in socialism as a part of wider social inequality based on the existence of class relations and private property. Formal equality, the emphasis on the role of the family as an essential basis of society and glorifying the

\textsuperscript{13}To be precise, “awareness raising activities” (Act, Article 7/4) do form part of the programme measures, but it is not clear who the participants are, meaning MPs and other representatives of state institutions, or whether these activities should also include experts from the field, media makers, NGOs, and citizens, etc.
role of mothers and motherhood, education for all citizens, the entry of women into the sphere of paid labour and the encouragement of political participation of women, all brought positive changes. Socialism did not realize the emancipation of women, but it improved their position in society, according to Molyneux (1982) and Jalušič (1999), especially in paid labour.

Equality and the right to be protected from discrimination based on gender, duties and responsibilities are stressed and perceived in the Act as obligations of state institutions. Thus the political actors, the National Assembly, government, ministries, local government communities, political parties, the human rights ombudsman, and the Office for Equal Opportunities are obliged to develop the basis for equal opportunities for men and women. Legislative duties related to the listed institutions can be traced in the Act, from Article 10 to Article 41. As appears in Article 11/1,

> the promotion and establishment of equal opportunities in accordance with this law is above all a duty of the government and its ministries . . . shall achieve the aims of this Act by means of appropriate general and special measures (Act, Article 11/1).

Autonomy and freedom are not explicitly mentioned in the Act, but can be recognized as underlying the definition of “gender equality,” which also includes equal participation in both spheres, equal status of women and men and “equal opportunities for the exercise of all rights” (Act, Article 4). These values represent an integral part of the social liberal conception of citizenship, which is in the theory defined as rights distributed equally to all who are considered to be citizens (Lister 1997; Squires 1999; Voet 1998). As stated by Voet (1998), liberal social citizenship is based on equality and universality. Equality is depicted in terms of “equal civic, political and social rights in return for equal duties,” while universality is embedded in the notion “for all the same” (Voet 1998, 11). The notion is that everyone should be treated in an equal manner in the public sphere, which is understood as the domain of justice and fairness (Voet 1998; Sevenhuijsen 1998). In contrast, in a liberal social conception of citizenship, the private sphere is depicted as the place where “we may enact our personal idea of the good life or our strong ideas of morality” (Voet 1998, 11).
The rights-based concept of citizenship embedded in the norm of equality can be recognized in the Act, where equality for women and men represents “equal opportunities for exercise of all rights” (Act, Article 4). The role of the citizen is ignored in the Act. Minor exceptions can be found in the role of the Advocate for Equal Opportunities for Women and Men. Hearing cases enables everyone in society (from individuals to NGOs, trade unions, and civil society organizations) to become active in terms of caring about others, namely observing social practices and by reporting cases of gender discrimination to the Advocate and thus contributing to improvement in the unequal status of women and men in Slovenia.

By analyzing the Act, one can trace the presence of community values in disproportion to social liberal values. Solidarity, community, loyalty and commitment, trust, reciprocity, altruism, friendship and love are almost absent from the Act. Solidarity and justice are acknowledged through the need to prevent discrimination based on gender and through the expressed need to improve the position of women in society (Article 1, 5). Community can at best be recognized in the notion that establishing equal opportunities is a “duty of the entire society” (Act, Article 2/2). Nevertheless, the question is whether community values would shift the focus of the Act? If community values were included in the Act, equality would be understood differently, not only as rights and obligations. The individual would not be depicted as self-sufficient, autonomous and independent, but as a relational being who is both, dependent and independent. Values, such as community, solidarity and trust, would also bring the notion of care into a relation to equality.

To conclude, the above mentioned values of the liberal social conception of citizenship are integrated into the framework of duties and obligations of state institutions within their work to establish “gender equality.” Equality of women and men as stated by the Act is a matter of equal distribution and participation in the public sphere. Reading the Act gives the impression that equality does not concern citizens, media or NGOs, but is exclusively the responsibility of the state. Responsibility as recognized in the Act is just a synonym for obligation. From the perspective of the ethic of care, responsibility is a moral category, which goes beyond formal bonds. In the context of the Act, political actors—restricted to state institu-
tions—are held “responsible” within their work for implementing necessary measures in order to reach the aim—equal opportunities. Furthermore, equality in liberal social citizenship is based on a concept of the independent and autonomous individual, who does not care for and is not cared for, because he/she is presented as self-sufficient (Sevenhuijsen 1998). Acknowledging relationality (among people, among institutions, and between private and public spheres) and interdependency would enable shifting attitudes towards the proposition that “gender equality” depends on active participation of women and men in the private as well as in the public sphere. This is not to be understood as a proposition that equality for women and men would be achieved if duties and rights were equally distributed among men and women in the private and public spheres. Rather, it is an attempt to think about equality of women and men in terms of a different set of values, such as values from an ethic of care.

Tracing the normative framework of the Act shows that care is not acknowledged as an issue, nor is it mentioned in this document. The fact that care is absent from the Act might be an indicator reflecting the normative framework of the Act, especially the liberal social conception of equality, equal treatment, and equal opportunities intertwined with autonomy and independence. From the liberal social perspective, care and equality are seen as mutually exclusive concepts. The assumption that will be developed in this section is that an ethic of care might contribute to the idea of equal opportunities based on the notion of justice.

Taking into consideration Tronto’s (1993) and Sevenhuijsen’s (1998, 2002, 2004) understanding of an ethic of care not only as a moral, but also as a political concept enables us to think about ethics and politics as two spheres which are intertwined. In Tronto’s words (1993, 9) “care can serve as both a moral value and as a basis for the political achievement of a good society.” Tronto’s broad definition of care (1993), including practices that maintain, repair and renew ourselves, other people and our worlds, offers the potential to recognize care and equality as mutually inclusive concepts. Since “good soci-
ety” involves equality of women and men, by which not only legal and formal equality are meant, but actual equality, care might be conceivable as a contributor to the idea of equality.

Autonomy, as one of the values of a liberal social conception of citizenship, is more related to care and dependency on others than it seems at first glance. According to Sevenhuijsen (2002, 30), autonomy “is acquired in context where we are dependent on others, . . . can engage in communication in which our experiences and narratives about each other matter.” Autonomy is in this regard understood as “a debt to others” (Sevenhuijsen 2002, 30). Clement (1996, 115) also shares the idea that “a certain level of care, provided to each of us during at least certain periods of our lives, is essential to the continuance of society in general,” and “there would be no autonomous individuals without an ethic of care.” In this regard autonomy and care are conceivable as mutually inclusive concepts. Moreover, this way of thinking enables us to perceive people as interdependent and relational beings.

As discussed in the previous chapter, the Act does not acknowledge care. Nevertheless, it is worth considering whether it is possible to trace care in the broader context of the Act, such as in Article 1/2, “the establishment of equal opportunities is a duty of the entire society” and in the obligations of state institutions in order to establish equal opportunities for men and women. The Act considers the duties and obligations of state institutions in the context of equal opportunities for women and men in the public sphere. The responsibility is thus depicted as obligations and duties of the state institutions. As stated above, the liberal conception of citizenship that underpins this Act, values autonomy, independence, freedom and equality as prime qualities; in that case dependence and vulnerability are deemed as weakness. The ethic of care enables us to see that autonomy is possible only in relation to care, which also leads to the notion that people are better seen as interdependent. In our lives people take various positions, being dependent, vulnerable, independent, and autonomous. According to Tronto (1993, 162), “humans are best described as interdependent,” a position which goes hand in hand with autonomy. Tronto argues for recognizing care as a political concept:
Rather than assuming the fiction that all citizens are equal, a care perspective would have us recognize the achievement of equality as a political goal. . . . If we attempted to achieve some type of equality as a political goal, it would make facts about inequality more difficult to dismiss. Questions such as: at what point do inequalities of resources prevent citizens from equal power? would become important political questions (Tronto 1993, 164–165).

In this regard we can think of the four interrelated qualities of the ethic of care, such as attentiveness, responsibility, competence and responsiveness, as practical qualities that are not “restricted to the immediate objects of our care, but can inform our practices as citizens. They direct us to a politics, . . . and an honest appraisal of the intersection of needs and interests” (Tronto 1993, 167–168). Equal opportunities can be seen not only as achieving institutional goals, but also as the crossroad of interests, needs and attempts to live a good and quality life where women and men are aware that equality is possible only when we agree about it and set the “rules.” By rules, both, legal, formal, and “informal rules” are meant, such as relations among people, which are after all the responsibility of the citizens, NGOs, media and educational system and not exclusively a state matter.

**Rethinking the Act with an ethic of care as a “lens”**

Slovenian equal opportunities policy aims to integrate more women into the public sphere, in paid labour and in political participation, and in that way to solve the problem of the unequal positions of women and men in the society. The assumption is that an equal opportunities policy that deals only with one side of the coin, that is achieving equality of women and men in the public sphere, and not also with the other, might be insufficient to achieve its main goal, equality of both women and men in the private and the public spheres (Act, Article 4). The idea of this section is to rethink the Act from the perspective of an ethic of care, especially by taking into consideration its main values: responsibility, relationality and inter-dependency. The question is, would an ethic of care make a difference if considered within the equal opportunities policy, particularly in the Act.
Including these values of the ethic of care into the equal opportunities framework would imply that policy documents, such as this Act might be situated more “on the ground of knowledge of actual needs for care” and interests, instead of only emphasizing equality as the state of independence and autonomy (Sevenhuijsen 2004). Attentiveness and relationality would lead to the reconsideration of equal opportunities policy about the problem: inequality exists not only between women and men, but also among women as well as among men. It would reconsider the relation between the public and private spheres, and “gender” roles, because care would become a publicly and politically recognized matter of all, men and women in all spheres of life.

Responsibility would thus encompass the responsibility of both citizens and state to act towards the relation between care and equality. This means, that in the public sphere care cannot be ignored and equality promoted, since equality has to be understood as equality of women and men in the public and in the private spheres. Considering care as essential in human lives, meaning that people are in the positions of care-givers and care-takers, leads to the acknowledgment of interdependency and to the perception that equality is a “political and social agreement,” which goes beyond legal rights and opportunities.

In Sevenhuijsen’s words (2002, 34) “the demand for equal access to different spheres of life springs from the democratic moral impulse that individuals should have the ability to circulate in different roles and positions, where they can become acquainted with the needs and moral viewpoints of different social actors.” Understanding the ethic of care as a “political ethic” would contribute to the equal opportunities policy to be more realistic. Equality for women and men would not be only a matter for the state and its institutions, but also a matter of citizens’ commitment, activities and initiatives. Conceiving care as an integral part of politics would lead to the acknowledgment that equal opportunities are not just about equality of rights and equal access to positions and goods, but encompass also the diversity of interests, needs and life situations.
Conclusion

The Slovenian Act on Equal Opportunities for Women and Men has been analyzed from the perspective of an ethic of care by implementing the Trace method. The problematic aspects of the Act have revealed not only the paradox of the Act, but also the wider social and political attitude towards gender politics in Slovenia. First, the Act (Article 4) states the need to assure equality in the private and public spheres, but deals mainly with equal opportunities in the public sphere. Second, the Act entitled the Act on Equal Opportunities for Women and Men does not define equal opportunities. It can be claimed that the Act take equal opportunities for granted, in the sense that relations between women and men are not acknowledged as power relations, but rather as neutral relations. Third, the Act understands equality of women and men as equal access to goods and resources, equal treatment and equal opportunities. Moreover, the concept of care is absent from this Act, neither is care mentioned nor is it in any way related to the norm of equality for women and men.

In Slovenia, the shift from socialism to democracy with a liberal social concept of citizenship also brought the relocation of care from the public to the private sphere. If care was a state matter under socialism, it became a private matter for citizens in the post-socialist neoliberalist system. Sevenhuijsen (Sevenhuijsen 2003, 2004) notes the relocation of care from the private sphere to the public sphere in West European countries, while in Slovenia the opposite can be observed. In addition, the social liberal concept of citizenship, which includes equality and independence as prime qualities and the integration of Slovenia into international institutions, such as the European Union, also changed the idea of equality. The Slovenian state seeks, as this Act supposes, to assure equality for women and men, namely in the public sphere and in politics. At the same time the state tries to displace care (minimizing social provisions and benefits) from its own responsibility to the responsibility of the citizens, overwhelmingly to women. Thus the analysis of this Act shows a clear picture of the wider liberal social concept of citizenship in Slovenia: equality in the public sphere and care in the private sphere.
The question that arises at this point is how to go beyond the legal basis of the Act, namely justice perspective. One possible way is the combination of justice with the care approach (Squires 1999). In the example of the Act, this would mean including care in the concept of equal opportunities on a legal basis. Equality of women and men, however, should go beyond the redistribution of work and care in the public as well as in the private spheres. In the case of Slovenia, care has to be first included in equality debates and into equal opportunities policy. This approach would broaden the justice perspective, and open further avenues towards the inclusion of wider participation of citizens, NGOs and media in the project of equality for women and men. Above all, if equality of women and men were both a private and a public matter for citizens, institutions and the state, it would enable us to go beyond the legal bonds of equality.

References


