



# Caringscapes:

## *experiences of caring and working*

There is growing interest in ways in which people combine working with caring, and what can be done to make the balance of work and care more manageable. In this paper, Linda McKie, Susan Gregory and Sophia Bowlby explore experiences of caring and working, arguing that new ways of thinking need to be developed. Here they propose that the concept of 'caringscapes' can help look at the relationship between work and caring responsibilities in a different, multi-dimensional way, leading to a better understanding of the demands and needs of those combining work and care.

### Key points

- Accessing available, affordable and quality childcare remains a key concern for parents combining caring and working.
- Most of the sourcing, organization and resourcing of care is still usually undertaken by women, illustrating and reinforcing the gendered aspects of caring.
- The needs for care change over time as children grow or older people become frailer. They also change on a day-to-day basis. The implications of the arrival of a sibling, changing schools, illness and other family crises are left to workers and their employers to manage.
- Successive governments have not addressed the shifting time frames in which parents or carers consider and plan daily and longer-term arrangements for care.
- Care takes place in a range of socially constructed spaces - mostly the home, nursery, childminder's home, after school club and day centre but including many other geographically diverse locations.
- There is a presumption that care services are organised around work with no provision for providing care free or child free time in families.
- A caringscapes perspective reflects the range of activities, feelings and positions in parents' or carers' mapping and shaping of caring and working.
- Caringscapes include past and current experiences, knowledge of the experiences of others and anticipation about the changing nature of caring and work.
- Government policies, services, employers and voluntary sector organizations need to take account of the complex and dynamic contours of the management of caring and working and how this shifts over time and across a range of spaces and places. A caringscapes perspective offers a multi-dimensional approach, acknowledging the multiplicity of demands on parents, carers and children.

## Caring and working

Successive UK and Scottish governments have had a fragmented approach to the everyday and long-term realities of combining caring and working. For example, many social and employment policies presume a seamless shift from home to work for parents and carers. This poses particular issues for primary carers, usually women. There continue to be gendered assumptions about women as the obvious and often termed 'natural' carers. Many women enjoy caring and/or do not feel able to give up aspects of care and domestic work because they see no alternative arrangement offering an equivalent quality of provision.

This view is supported by the slow pace of change in the work/life balance of men (Baxter, 2000; Sullivan, 2000). Policy debates focus on the desirability and possibility of childcare taking place outside the home. Changes in needs over time, as children grow or older people become more frail, as well as the everyday implications of illness, and other family crises, are largely ignored or left to individual employers and carers to manage. Decision-makers and employers are largely silent on gender inequality within the home and expectations of family life and kin relations that expect caring work from women and pose barriers to men who wish to care.

The choices parents and carers make necessarily reflect available, acceptable and affordable sources of formal and informal care (McKie et al., 2000). The National Childcare Strategy aims to ensure quality, affordable childcare for children aged up to 14, and up to 16 for those with special needs. A National Strategy for Carers provides a website and helpline for carers, grants to allow carers breaks, and work-focused interviews for carers on benefit. Again the focus is upon retaining carers in the labour market and offering information rather than services. Some employers do provide workplace nurseries or support for caring. These measures tend to be provided by larger firms and aimed at the retention of women employees.

In the UK there are around 5.7 million carers for chronically ill, sick or frail relatives or friends. The study 'Could It Be You?' concluded that Britain's ageing population, coupled with current community care policy, will result in an extra 3.4 million carers needed by 2037 (Carers UK, 2001). On the basis of current demographic and morbidity trends it is likely that three out of five people will eventually find themselves caring for someone who is chronically sick or disabled. Recent estimates suggest 5.5 million employed men and 4.5 million employed women have family commitments in Britain.

Comparative research in the UK and European Union has charted the long hours worked by male employees in Britain compared to other member states. Men's hours of work tend to increase with additional children

bringing increased financial pressures (Hogarth et al., 2000). This, coupled with the growing participation of women in paid employment (both full-time and part-time) increases pressure for parents to balance caring and working effectively. Nevertheless, 'equal' parenting does not currently appear to be a reality and, with childcare increasingly configured as an employment issue, policies (especially welfare and taxation) implicitly constructs those women not in paid work as dependants. The potential for and value of parent free and child free time for families is rarely considered.

## Defining 'Caringscapes': temporal and spatial perspectives

At different times in people's lives working and caring mutually influence one another through the formation of families, the bearing of children, the changing needs of kin or friends for assistance in illness and old age, and participation in education, training and employment. The interaction between the private – the space in which caring work for the very young is located – and the public – where paid work and caring for older children is located – involving a complex system of physical manoeuvres most obviously linked by processes of 'getting to work on time' and 'leaving work in time to pick the kids up' or 'making time' to check up on the frail elderly parent. This process of thinking and dealing with different places and journeys throughout the day and week can be thought of as a system of spatial reference. These everyday realities are informed by past experiences and future anticipation of caring.

Caringscapes can be thought of as shifting and changing multi-dimensional terrain that comprises people's vision of caring possibilities and obligations: routes that are influenced by everyday scheduling, combining caring work with paid work and the paid work of carers (McKie et al., 2002; McKie et al., 2003). People create routes through 'caringscapes', which change and evolve as they move through the lifecourse.

For many carers some caring pathways are ill-defined, or taken for granted or restricted by the availability of caring resources, income and services. Caring routes must be amenable to change and amendment at short notice; changes are sometimes induced by public policies such as the New Deal for Lone Parents or focused by personal events such as the arrival of a new baby or illness of a relative. Nevertheless, people have expectations about their social obligations to provide care and about the care they may receive, and act to achieve desirable outcomes or prevent those seen as undesirable. Thus caringscapes are not static but shift in response to experience, the influences of others and changes in mobility, communication, and institutional organisation. Care needs change as children grow, parents change

jobs, elderly parents become dependent and other demands emerge. In Adam's (1995: 94) words, 'not all time is money' and 'not all times are equal'.

This relationship between work and time throws up issues of power that pose challenges for social theory and policy. A gendering of time makes different valuations of men and women's time and tasks. Different physical realities of time (most obviously pregnancy and childbirth but also gender differences in longevity and patterns of illness) impact upon power and the ability to negotiate everyday and longer term care and work plans. Adam (2000: 125) proposes an understanding of timescales, uses of and attitudes to time that goes beyond simply thinking in terms of chronological time. Her challenge to social policy to achieve a timescape perspective led us to adapt her work (and others) to develop a temporal/spatial framework for analysing caring and working (Ermath, 1998).

### **Caringscapes: a spatial-temporal gaze on caring**

A caringscapes perspective considers the complexity of the spatial and the temporal and engages with a range of activities, feelings and reflective positions in people's mapping and shaping of routes through caring and working. It requires examination of the realities and possibilities of the way time and space relate to the places that caring takes place. It questions the association of female biology (such as pregnancy or childbirth) with feminized tasks (such as housework or childcare), which associate naturalness with the caring that women are expected to undertake. This challenges power imbalances between those who can choose to care, usually fathers, sons and other men, and those who must and should care, particularly wives, daughters and mothers.

To conceptualise the relationship between time and space we need to incorporate dimensions within caring and working processes, such as: "*planning, worrying, anticipating, prioritising, accessing care, controlling care, shifting work patterns, job (in)security, moving home, managing family resources, supporting schooling, and many more (Mckie et al., 2002)*".

Incorporating a caringscape perspective into policies and services to support the range, multi-dimensional and dynamic nature of the various time-space uses would benefit carers, those who are cared for and employers at all stages of the caring process. For example, during the course of becoming a parent and taking maternity or paternity leave, it becomes evident that a range of services and policies come into play. Speculating and planning about parenting starts many years prior to pregnancy and the actual experience of parenting.

Children and young people will speculate about parenthood; they play 'families' in nursery and school, participate in social and personal education classes. Schools and other social settings promote certain notions of family life and locations of family living (the 'home'). Children grow up in 'their family' in a particular locality and within their social networks and will think about parenting and what they might do differently when they grow up. In some families children and young people may come into contact with social and legal services as a result of abuse or divorce.

On moving into adulthood, for some the decision to become a parent is planned while for others pregnancy may be unexpected. For a minority of adults becoming pregnant may prove difficult or impossible. A European survey on attitudes towards family formation established the factors that were most influential in determining the number of children couples wanted. In order of priority these were: housing, the economic situation and unemployment, the cost of bringing up children, worktime flexibility, the availability of good quality childcare and parental leave (Malpas and Lambert, 1993). In Britain social services and the NHS become an inevitable part of these processes as maternity leave entitlement and arrangements are negotiated. So while the process of becoming a parent may appear to be one that individuals or couples are in control of, at various stages in their lives this process is influenced by a growing range of services and policies that would benefit from an appreciation of the ways in which time-space uses, services, people and policies interlink, and this can be conceptualised by a caringscapes perspective. A similarly complex constellation of factors, services and policies is involved in the process of becoming a carer for a sick, disabled or frail elderly person, although this may not often be as anticipated, planned for and socially supported as parenthood.

Adults who decide not to have children are still likely to have considered the future with and without children. Governments are concerned about low fertility rates, the high level of divorce and financial implications of these 'personal' choices, such as the costs of pensions and the availability of workers in future labour markets and economies. The inexorable links between personal choices, private behaviours, private and public services and public life may be influenced by but not necessarily driven by social and public policies. Changes in family life and personal choices demonstrate a complexity and dynamism that policies, policy-makers and some researchers find difficult to comprehend and appreciate. Political parties may vie to be the 'party of the family', to promote the family as the 'bedrock' to society and to propose measures to support specific types of families. Yet those who care continue to find balancing caring and working highly problematic.



## Policy concerns

The construction of the home and family as a private domain, only to be intruded upon by the State in times of emergency or dysfunction, has prevented the complexity of the ordinary everyday organisation of domestic tasks and activities informing and directing public policy in areas, which relate to family practices. The family routinely navigates interlocking locations brought together through time and space, the management of which tends to be the responsibility of wives, female partners and mothers. For governments' policies to successfully support those who wish (and are strongly encouraged) to combine work and informal caring in the home, consideration of the time-space framework in which this navigating takes place is essential.

We are suggesting that future government policy in areas related to informal caring (whether directly or indirectly) needs to incorporate the complex contours of the everyday management of combining caring and working, by building this into policy formation. Such a move invites research into caring generally, but particularly where caring and work are combined, placing time-space perspectives central to policy recommendations.

The New Deal for Lone Parents illuminates a number of the issues we have considered. The idea of an advisor working with a parent, to review training and employment opportunities has much to commend it. This relationship has the potential to incorporate a caringscapes perspective of advice and support. Yet the underlying ethos of the scheme (namely, to move as many lone parents as possible off benefit), coupled with the limited availability of accessible and affordable caring services and resources is likely to preclude a flexible and child/ parent focused approach to care.

It is unlikely to promote a longer-term caringscapes perspective that draws upon previous experiences and reflects upon future opportunities and constraints.

A caringscapes approach to policy development would encourage reflection on the varied and complex ways in which care needs, and unpaid and paid care work, is anticipated, experienced and planned. This would involve examining influences over the individual's lifecourse as well as that of the family and transmission of beliefs and views across generations. It would also recognise the significant spaces and interactions that affect the family generally, parents in particular, but have the most impact upon mothers and women as conveyers and organisers of informal care work. This concept offers the potential for policies to explore the very ambiguities in the experiences of those who seek to combine care and work. These experiences, while 'craggy and ever-changing' are crucial to the (re)production and maintenance of the societies.

There is much to gain if we are to shift research, policy debates and practice, from a uni-dimensional to a multi-dimensional caringscapes approach to acknowledge the multiplicity of demands, that arise from the simple desire to combine caring and working. We assert that caringscapes offers service providers and policy makers with a framework through which to identify and seek to tackle (gendered) inequalities in care work across the lifecourse. This would draw attention to persistent inequalities both in the home and in the workplace which leave women largely responsible for informal caring and so, as a consequence, limited in the resources that they can call upon in old age, which would have been a product of full time continuous employment. It would also draw attention to the structural barriers to caring experienced by men.

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