In this article, I argue that care is a useful tool to think about consumption as embedded in social relations within and outside the market, and draw the consequences for moving towards sustainable lifestyles. To do so, I engage in a review of the literature that brings together consumption and care in its various forms. I review three main bodies of work: the literature on consumption that links care to consumer behaviour and consumption practices; the work addressing the commodifications of care and how it feeds in the neoliberal organisation of society; and the literature on climate change and the development of sustainable lifestyles. Iclose with a reflection on some lessons of care for academic researchers studying sustainability, consumption and a transition towards more sustainable and just societies.

Key words care • commodification of care • consumer behaviour • consumption • neoliberalism • sufficiency • sustainability

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Introduction

In his article titled ‘Consumption’ published in 2011, anthropologist David Graeber observed that consumption has come to mean ‘any activity that involves the purchase, use or enjoyment of any manufactured or agricultural product for any purpose other than the production or exchange of new commodities’(2011: 491). He noted that for wage labourers, this can cover almost anything they do when not working. Indeed, the use of goods and services procured on the market now seeps into all areas of our everyday lives. This includes relationships with loved ones and everything we do to help them – and ourselves – progress through life, by means of routine activities like cooking and cleaning, or activities of a more symbolic nature, like gift-giving. As such, activities of care are now inseparable
Care and consumption

from consumption, with consequences for how we think about both topics, as researchers and as a society.

Care is a concept rooted in feminist ethics. First popularised in the 1980s (for example, Gilligan, 1982), it aimed to account for the specificities of women’s lived experience and morality and how, as a result of their experience, they were more prone to value ‘intimacy, responsibility, relationships and caring for others’ (Norlock, 2019).

This early perspective of care ethics was criticised as essentialising care by tying it too closely to femininity. In the 1990s, the concept of care was brought beyond the realm of intimacy to account for its political and social dimensions, power relations and inequalities (for example, Tronto, 1993). Today’s more encompassing definition was crafted by Fisher and Tronto (1990: 40), who 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’ (emphasis in original).

Following this definition, and for the purpose of this article, I would like to highlight three features of care. First, care involves bodies and the material world, including sentient and non-sentient beings. In discussing her definition of care, Tronto (1993) highlights the fact that caregiving almost always involves direct contact with the recipient of care and physical work – that is, engaging with and acting on the material world. This has obvious implications for thinking about consumption, as it involves interactions with both the people and objects in our everyday lives.

Second, the notion of care implies vulnerability and interdependence. Vulnerability is an essential part of human life, linked to the fact that we are embodied beings, and that bodies need to be cared for and sustained. Susan Dodds (2014: 182) defines it as ‘a disposition of embodied, social and relational beings for whom the meeting of needs and the development of capabilities and autonomy involve complex interpersonal and social interactions over time’. As such, care as both a concept and a set of practices accounts for the fact that we all rely on each other to fulfil our needs and to lead our lives. It also offers ways to think about our interdependencies as ‘not a contract but a condition; even a pre-condition’ of being in the world (Puig de la Bellacasa, 2012: 198). Third, care is a way of knowing and interacting with the world. As discussed by María Puig de la Bellacasa (2012: 198), ‘thinking with care’ means acknowledging our interdependencies and making our thinking part of a collective endeavour, such as ‘standing for sustainable and flourishing relations’, working towards sustainable wellbeing (Gough, 2017), the good life (Fuchs et al, 2021) or creating a ‘safe and just space for humanity’ (Raworth, 2017a; 2017b).

Building on these three features of care, I argue that care is a useful tool to think about consumption as embedded in social relations within and outside the market, and outline the consequences for moving towards sustainable lifestyles. To do so, I present a review of the literature that combines consumption and care in its various forms. I start by looking at the academic literature on consumption practices and consumer behaviour, and then turn to the commodification of care and the consequences of its subjection to the logic of the market. Following this, I investigate the potential role of care for moving towards sustainable lifestyles. I close with a reflection on lessons of care for academic researchers studying sustainability, consumption and the transition towards more sustainable and just societies.
Consumer practices through the lens of care

In the scholarly writing on consumer behaviour and consumption practices, care is mobilised in three major ways: to understand the role of consumption and commodities in building relationships and identity; when studying green consumerism and ethical consumption; and to better understand sustainable consumption practices as part of everyday life.

Studying consumption as a cultural phenomenon, Daniel Miller (2005) has shown how shopping is an act of love, done mostly by women, and tied to building and maintaining family relationships, romantic relationships and friendships. Within this strand of literature, often referred to as Consumer Culture Theory (CCT), shopping for food, clothing or other household items is considered part of taking care of family members and children: it is emotional labour. In this respect, consumption and commodities are also a support for constructing family identity through everyday interactions and rituals (Epp and Price, 2008), or through engaging in practices such as cooking homemade food (Moisio et al, 2004). Self-care through consumption is also a recurring topic in CCT. Sharing and gift-giving within the private sphere have been discussed as emotional and care work, primarily accomplished by women and undervalued (Belk, 2010). In this literature, engaging in ethical consumption is presented as one way for new mothers to build their identity (for example, Carey et al, 2008; Heath et al, 2016), and motherhood is a prototype for the labour of love as accomplished or expressed through consumption.

Another way of addressing care and consumption is to look at ethical consumption, green consumerism and, more generally, care within market exchanges. One approach is to look at how ethical consumption and pro-environmental behaviour take place in relation to other activities of care, most often mothering (for example, Heath et al, 2016). An alternative approach is to study the market as a space for caring for a ‘distant other’: through ethical buying, consumers can engage in virtual relations of care (such as buying fair-trade products) with different stakeholders within the value chain, especially producers, putting trust in the intermediaries involved and hoping that acts of benevolence reach their ultimate object (Shaw et al, 2017). Ethical consumption takes place in moralised markets, where consumers are trapped in the enduring ambivalence between ‘selfishly maximizing profit’ while ‘altruistically doing good’ (Suckert, 2018: 697). Caring consumers are then constrained by the market logic when attempting to express care through consumption behaviour, as the market imposes strong limits on what they can accomplish, the possibilities being for the most part limited by supply rather than driven by demand (Dubuisson-Quellier, 2008).

Finally, through care, it is possible to shed light on the practical and ethical underpinnings of sustainable and everyday consumption practices. Everyday consumption is heavily oriented towards taking care of oneself and others, for example through food, hygiene or clothing. In this vein, regarding energy consumption within the home, Hargreaves and Middlemiss (2020) show how consumption practices are tied to relations with family and friends, which are ‘relationships of care and intimacy’. The demands and desires of loved ones contribute to shaping practices, through the fixed and rigid needs of babies and children, for example, or through socialisation and the development of shared expectations. Similarly, the adoption of more sustainable lifestyles happens through everyday consumption and is tied to the fundamental feature of care underlined by Fisher and Tronto (1990) that is ‘maintaining or repairing our world’. As such, embracing more sustainable consumption practices translates into changing everyday routines and habits,
which involves caregiving. This change represents the work itself, and is only made possible by using resources such as time and money, which are unequally distributed between and within households. As transforming routines and habits most often requires effort from the people already providing care, it risks creating or entrenching inequalities within the home – most often gender inequalities – and reinforcing the social dynamics that perpetuate them (Hall, 2011; Godin and Langlois, 2021).

All three approaches show how consumption is a determinant part of caring for loved ones, distant others or the material world, and how the possibilities to do so often depend on consumers’ access to the market and resources more generally. Along these lines, Tronto (1993) identifies the availability of resources, namely materials, time and skills, as a condition for providing good care: since we are all vulnerable and all rely on care provided by ourselves and others, being able to both provide and receive care depends on the allocation of such resources, which is unequal and tends to limit the possibilities for caregiving. The availability of resources for providing and receiving care becomes an issue of power and position within society, linked to the questions of who does the work and in what conditions. Over and over again, research has shown how care work is mostly done by women worldwide, which is precisely why the concept was developed in feminist social theory. But nothing better illustrates the extent of the inequalities affecting care than its commodification, which in itself allows our current lifestyles – based on paid work, consumption and growth – to continue.

**Consuming care**

As theorised by Arlie Russell Hochschild (2000; 2003), the contemporary commodification of care is a consequence of a ‘care deficit’ that pervades developed countries. The care deficit is itself a result of the combination of, on one hand, the entry of women in the workplace, who tend to follow traditional (male) career paths that rely on other people (traditionally a housewife) to accomplish care work, and on the other, the state progressively relinquishing its support in providing care, following decades of neoliberal governance and austerity politics. The traditional role of housewife and the involvement of the state receded, but the amount of care to be provided to both people and things did not. It thus created a demand for care work, leading to the expansion of a ‘care industry’ that mainly relies on migrant women as its primary resource. These migrant women, mostly coming from the global South, provide their services to families and institutions in developed countries through ‘global chains of care’, that is, ‘a series of personal links between people across the globe based on the paid or unpaid work of caring’ (Hochschild, 2000: 131).

The care deficit in developed countries leads to a care drain in less developed countries. As women from the south move north to work for families as nannies and maids, or in institutions as healthcare workers, they leave behind children, parents, friends and peers who still need to be loved and cared for. The global chain of care, then, is also a ‘global heart transplant’ (Hochschild, 2003: 22). Love is taken from one part of the world and brought into another, creating suffering for the children and families left behind, and the mothers who have left them. Rhacel Parreñas (2001: 123), cited by Hochschild (2003: 22), provided a telling example:

Vicky Diaz, a college-educated schoolteacher who left behind five children in the Philippines, said, ‘the only thing you can do is to give your love to the
child [in your care]. In my absence from my children, the most you could do with my situation was to give all my love to that child'.

Discussing this phenomenon, Isaksen et al (2008) argued that global care chains and the heart transplants they lead to represent an erosion of the socio-emotional commons, which refer to:

[A] group of people whose actions express a principle of ‘generalized reciprocity’. Each individual in a common is poised to give to others in the community because that individual—and those close to her or him—have received something from the community in the realm of random small favors in normal times and big favors in times of emergency. (Isaksen et al, 2008: 408)

The commodification of care robs communities of the presence and emotional involvement of members who are nonetheless embedded in the commons. This is, as Isaksen et al stated, but one expression of the damages of capitalism and the neoliberal order inflicts on communities worldwide.

Another (rather unexpected) answer to the care deficit – or, in this case, what the authors term the ‘wife drought’ – has been the emergence of the ‘smart wife’ (Strengers and Kennedy, 2020), defined as ‘smart technology intended to carry out domestic labors traditionally associated with the wife’s role and any smart technology that is treated as a smart wife by those who interact with her’ (Strengers and Kennedy, 2020: 3). Smart wives are ‘friendly and sometimes flirty, docile and efficient, occasionally glitchy but perpetually available’. They can be virtual assistants such as Siri and Alexa, connected doorbells providing surveillance and a sense of security, connected appliances such as vacuum cleaners or washing machines, sex robots, holograms that bring emotional comfort, and so on. They are also increasingly involved in caring for sick and elderly people when a physical presence is not possible, in a twist of Tronto’s view that caregiving involves physical contact between caregivers and care-receivers. While not exactly new, these technologies have developed rapidly in the last decades, following the progress of electronics and other technological innovations. Unsurprisingly, smart wives dedicated to accomplishing ‘women’s work’ are developed by and mainly used by men, and tend to reproduce harmful gender stereotypes and power relations, while in some extreme cases legitimising or enabling coercive control, psychological and physical violence. Strengers and Kennedy (2020: 154) wrote:

Smart wives provoke acts of ‘everyday sexism’. They are subjected to a spectrum of abuse ranging from ‘harmless’ innuendo all the way to sexually violent and debasing behaviour on a day-to-day basis—without a voice to call it out or even the ability to refuse serving people who abuse them.

In studying and criticising the smart wife, Strengers and Kennedy are not advocating for its disappearance altogether, but for a redesign that would free the technology from gender stereotypes and other forms of power inequalities. These tools would nonetheless remain a form of the commodification of care, which tends to empty care of what makes it meaningful, that is, its ability to crystallise the interdependency between people and the world.
Indeed, the development of global chains of care and innovations such as the smart wife mean that more and more, in times of great vulnerability such as childhood, sickness or old age, our physical and emotional needs are being addressed through market exchanges. When constrained by the individualising effect of the market, care can no longer contribute to the communities that people need to thrive. Rather, care as a market commodity plays right into the capitalist, neoliberal utopia that French sociologist Pierre Bourdieu (1998) described as a ‘programme for destroying collective structures which may impede pure market logic’ and for the ‘methodical destruction of collectives’ (emphasis in original). Caregiving, care-receiving and everything that accompanies them are a direct manifestation of our inherent vulnerability and of our interdependencies as a precondition for being in the world (Puig de la Bellacasa, 2012). As a consequence, activities of care are a powerful demonstration of the fundamental incompatibility between ‘pure market logic’ and the development of societies that allow its members to escape undue suffering and to flourish. In other words, care is a key element of the collectives which, in the words of Pierre Bourdieu, are ‘what keeps the social order from dissolving into chaos’. In an era of climate change and rising inequalities, this is particularly important.

Care and the creation of sustainable lifestyles

In recent years, the scientific community has been issuing increasingly alarmed calls to be wary of the endless pursuit of economic growth and affluence, as the catastrophic consequences of climate change to which they contribute are already being seen (Ripple et al, 2017; Wiedmann et al, 2020). Indeed, accelerated climate change is one consequence of the pure logic of the market guiding the development of our societies, and the availability of undervalued, underpaid care work as a commodity allows the current social and economic arrangements to continue. However, when put at the service of communities, care might just as well hold some keys to challenge the status quo. In this spirit, ‘vandal economist’ Kate Raworth (2017a; 2017b) has been advocating for the development of something akin to a care economy, or an economy that would relinquish its impossible expectations of infinite growth to centre around social reproduction and the establishment of a ‘safe and just space for humanity’. This space would be made possible by developing an economy that would be ‘regenerative and distributive by design’ (Raworth, 2017a: e49), and that recognises the centrality of planetary health for human wellbeing. This safe and just space for humanity would find itself between a social foundation that accounts for a number of minimum standards for wellbeing (such as access to water and gender equality) and an ecological ceiling ‘beyond which lies an overshoot of pressure on Earth’s life–supporting systems’ (Raworth, 2017a: e48). Practical examples of such an economy include investing money and time in hospitals, schools and daycares; providing services that support the development of strong communities; fighting poverty; and recognising the value of the care provided at home and freeing up time for it to be offered. An alternative proposal for thinking about limiting consumption as a way to achieve human wellbeing is that of consumption corridors (Fuchs et al, 2021). Consumption corridors would be located between a maximum consumption which would ensure that ‘a person’s consumption does not imperil the good life of others’, and a minimum consumption that would equate to the ‘basis of the good life for individuals’ (Fuchs et al, 2021: 34). As it frames need satisfaction in terms of the good life, human wellbeing and ‘living well within limits’ (Fuchs et al, 2021: 4, emphasis in original), the notion of consumption corridors incorporates both
the individual pursuit of the good life, which involves material consumption, and the centrality of the collective for people to flourish. Similar ideas have also been developed by proponents of degrowth (among them Jackson, 2017; Kallis, 2019; Hickel, 2020).

As such, while no silver bullet, care offers some tools to think about what a sustainable world could look like, and how it could engage individuals in their everyday activities as it brings together the most private, intimate aspects of our lives and the broader social organisation, in relation to what is needed to perpetuate both. Indeed, consuming and consumption practices are an integral part of self-identity and how we present ourselves to the world (Giddens, 2008). This is unlikely to fundamentally change, as consumption is one of the main ways we, as social beings, relate to the material world, but its meaning could easily be transformed if care and caring become central to our priorities throughout society, from intimate lives to macroeconomic policy. In relation to consumption, change is already underway, and takes shape through transformations in lifestyles such as the zero waste movement, the rise of plant-based diets along with concerns for food production and its impact on people and the planet and, more generally, individual restraints and a more reflexive approach to consumption. Although there have been uneven expressions of support from various levels of government around the world, discussions are taking place and citizen engagement is rising. In relation to sustainability, collectively recognising care as essential to human life and flourishing communities, but also to a balanced relationship with nature and the material world that doesn’t threaten life on Earth in its current form, would be a decisive step in the right direction. It would support a necessary ideological shift, from the productivity and growth mindset endemic to consumer society and capitalism, to investing in relationships, collective wellbeing and the reproduction of society more generally.

‘Thinking with care’

In the context of climate change and the environmental crisis, studying consumption, human need, wellbeing or the good life is not only an academic enterprise, it is also a political endeavour as it deals with existential issues for humanity. This has an impact on the way science is produced and received. In the words of María Puig de la Bellacasa, this is akin to ‘thinking with care’, which involves recognising that knowledge is situated, and that ‘knowing and thinking are inconceivable without a multitude of relations that also make possible the worlds we think with’ (Puig de la Bellacasa, 2012: 198). We are part of the world we think about and how we think is not only inseparable from this world but contributes to constructing it. Similarly, philosopher Lorraine Code develops a view of ‘ecological thinking’ as an epistemic approach that ‘relocates inquiry “down” on the “ground” where knowledge is made, negotiated, circulated; and where the nature and conditions of the particular “ground,” the situations and circumstances of specific knowers, their interdependence and their negotiations, have claims to critical epistemic scrutiny’ (Code, 2006: 6). This means that we need to be accountable to the people and groups we study, throughout the entire research process. The increasing popularity of participatory and community research demonstrates the recognition that knowledge production is anchored in society and communities, and the growing engagement of researchers towards the groups they study. The same holds true for researchers outside the academic world, who engage with the media or civil society and place their role as citizens at the heart of their research practices. These are some of the ways researchers can engage in care, make knowledge production an
activity that contributes to building strong communities and collective wellbeing, and root their thinking in the world in which their allegiance lies.

Conflict of interest

The author declares that there is no conflict of interest.

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