Introduction : The Social Science of Caregiving

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For most people, most of the time, caring for others, particularly close others – children and parents, wives and husbands – is at once one of the most meaningful, important, and morally compelling things we ever do – and one of the most difficult. With a few exceptions, however, this foundational human capacity has been oddly invisible in the social and human sciences. In this volume of *Dædalus*, "The Social Science of Caregiving," we aim to at least begin to remedy this. We include essays ranging across a wide landscape of the social sciences and sciences, from biology and psychology to philosophy, political science, and policy. The collection derives from an interdisciplinary project of the same name at the Center for Advanced Study in the Behavioral Sciences (CASBS) at Stanford University, co-led by the issue editors in collaboration with Alison Gopnik's lab at the University of California, Berkeley.

Several overarching themes emerge from these essays. First, there is the wide-ranging nature of human care, both in terms of the cared-for and the carers. The canonical biologically grounded case may be care for offspring, but this rapidly extends to care for elders, for the ill, for distant others in a "community of fate," and even care for the dead.¹ A strikingly wide variety of people may be carers with different relationships to the cared-for. Again, the canonical biological example may be mothers, given that relationships of care have a long evolutionary history, particularly in mammals and birds. But these essays emphasize the ways that men and women, as well as a diverse group of paid and unpaid people, are involved in caregiving.² Similarly, a remarkably wide range of institutions, with very different histories, roles, and structures, is involved in caregiving. This ranges from more obvious government institutions and policies to religious traditions and institutions, to formal unions, geographical neighborhoods, and historic Black community centers.³

We might ask then, what unites this disparate range of relationships and phenomena? What makes them all examples of care? A few themes emerge here as well. One is that care is intrinsically asymmetrical; it depends on the idea that the carer has resources that the cared-for person does not. Second, care has an intrinsically altruistic character: it involves the carer donating resources to the caredfor, regardless of return, and doing so precisely because the cared-for lacks the necessary resources. This is particularly vivid in unpaid care relationships, such as family relationships. But even when care is paid labor, it has this kind of altruistic element. In most cases, the caregiver is paid by someone other than the cared-for person, either another caregiver or an institutional source of care. And psychologically, paid caregivers often feel altruism toward the people they care for, and indeed this is a source of meaning and satisfaction. These features of care make it very different from the kind of standard social and economic transactional relationships, such as those between employers and employees, buyers and sellers, or cooperative partners, that can be characterized in terms of a social contract between two equivalent autonomous agents. They also differentiate care from power relationships, which involve similar asymmetries between those with more resources and those with less, but assume that the consequence of such asymmetries is that the less powerful agent will serve the interests of the more powerful one. These distinctive features of care may indeed have contributed to the neglect of these relationships in standard economic and political accounts.

Other features of care are more variable but nevertheless seem to be important in many cases. Care often seems to involve local attachments, whether these are the classic emotional bonds of attachment theory or more abstract relationships between members of a particular community, such as the Black institutions discussed by Maisha T. Winn and Nim Tottenham in their essay, or even the relationships we have with those who are no longer alive, as Phil Ford, Jacob G. Foster, and J. F. Martel describe in their contribution to this volume.⁴ On the other hand, care can also take on a kind of universality in religious or philosophical contexts, as Zachary Ugolnik and Eric Schwitzgebel discuss in their respective essays. Similarly, there are interesting questions about the motivations and objectives of care. In the simplest case, carers might be motivated to increase the objective well-being of the cared-for - what economists would call their objective utilities - for example, by feeding an infant or giving medication to an elder. But in other cases, the carer may be more concerned with the subjective utilities of the cared-for - what the cared-for thinks of as their own best interests rather than what the carer might consider to be best for them. The case of elders makes this contrast vivid: what should a carer do about a parent who is determined to eat meals that are objectively bad for him or to continue living in a house that may no longer be physically safe? A third form of care involves neither type of utility but rather tries to donate resources in a way that confers autonomy on the cared-for. Rather than trying to fulfill particular desires or goals, subjective or objective, the carer may be working to give the caredfor enough resources to fulfill those goals themselves. This sort of care is especially vivid in cases like adolescence or illness. But it may also be involved in, for example, the decisions of a richer community that aims to care for one with fewer resources.

e have organized these essays into roughly three groups: one that focuses on biological and psychological perspectives, another that addresses more abstract philosophical and sociological themes, and a third that is concerned with policy questions. The first set of essays examines the psychological and social underpinnings of care both for children and elders. Ashley J. Thomas, Christina M. Steele, Alison Gopnik, and Rebecca R. Saxe consider how infants themselves understand and identify caregivers, with empirical results that suggest that even surprisingly young infants make inferences about care.⁵ Seth Pollak and Megan Gunnar review the substantial literature on the crucial effects of early care and nurturance on later development, an area where there has been extensive empirical work, and discuss its broader implications.⁶ Monica E. Ellwood-Lowe, Gabriel Reyes, Meriah L. DeJoseph, and Willem E. Frankenhuis explore the particular issues that arise in low-income families and discuss the ways that different environments might shape caregiving practices, while preserving the basic structure of care.7 Winn and Tottenham look to Independent Black Institutions (IBIs) established in the late 1960s as sources of insight.⁸ They explain how three pillars of Black education across IBIs (Identity, Purpose, and Direction) map onto beneficial practices identified in the psychological and neuroscience literature on care and development, such as exposing children to caregivers beyond simply their parents and teachers by including elders, school employees, and other alloparents. Toni Schmader and Katharina Block consider the question of why people might choose to take on or fail to take on the role of carers, with men as a particularly striking example, showing that paradoxically, cultures with more gender equality may make it more difficult for men to take on such roles.9

The essay by Claire M. Growney, Caitlin Zaloom, and Laura L. Carstensen and the one by Elizabeth Fetterolf, Andrew Elder, Margaret Levi, and Ranak B. Trivedi argue for a new model of care for the elderly in which the need for autonomy and usefulness of the cared-for has equal standing with their need for assistance.¹⁰ For Growney, Zaloom, and Carstensen, changes in real estate markets, zoning, and planning are essential to create and sustain age-diverse neighborhoods that enable elders to help in the care of younger people, and the young to aid the old in turn. Fetterolf, Elder, Levi, and Trivedi focus on the necessary, if stressful, negotiations between the person in need of care, their family members, the in-home carers, the health experts, and those who pay the bills. The introduction of technology into these relationships can ease some of the human burdens of care but can also introduce conflicts. The authors document both.

The second set of essays looks at more abstract aspects of care. These essays focus on the interrelated issues concerning the care of others, the divine, the dead, and AI agents.¹¹ They also explore how these approaches can inform our daily life and offer insights into what we value in human care. Notably, these authors provide different types of care that are meaningful in their particularity and, at once, potentially expandable based upon that foundation of meaning. Schwitzgebel compares the Golden Rule (do unto others as you would do unto yourself) to what he calls extending your "concern for those nearby to more distant people" as different philosophical strategies aimed at generating care more broadly.¹² Ultimately, assuming we care for those already close to us, he argues that extending that concern can be a more effective strategy to guide our actions than starting with our own preferences and projecting those preferences upon others.

Ugolnik addresses the underlying importance of religious practices and institutions upon caregiving.¹³ Comparing Buddhist and Christian narratives of care, he argues the divine often cares and is cared for, elevating care to a sacred action. According to these traditions, care is thus a divine activity in which humans participate by engaging in caregiving practices, an experience that extends beyond the giver and receiver of care into a wider network of relationships. Ford, Foster, and Martel examine how we care for the dead, offering a theoretical approach to acknowledging the material and cultural links between the past and the present, highlighting our dynamic relationships with those who are no longer living.¹⁴ Brian Christian looks at our conceptions of artificial agents both as potential carers and reflections of human care.¹⁵ He emphasizes the long history of human thought about relationships to and among these artificial agents, well before such agents actually existed. But, of course, these considerations are particularly salient as AI becomes more sophisticated and plays a more central role in our lives.

Collectively, this philosophical set of essays broadens our understanding of various types, models, and motivations of care and caregiving, whether we are involved in a caregiving relationship with the dead, the divine, or the artificial. The authors also provide substantive insights we can apply when supporting care in our political economy, the focus of the remaining essays.

The third set of essays argues for care as a social and governmental responsibility that comes with costs, yes, but also individual and collective benefits. This means, first, the recognition of the obligations of the members of a society to those beyond their family and friends. Second, it requires attention to the infrastructure of care: the laws, institutions, organizations, and financing to support these obligations. Finally, these essays claim that a caring society is based on a complex network of relationships that includes not only family and friends but also paid caregivers, medical professionals, insurance agents, nonprofit and religious organization personnel, and, inevitably, government bureaucrats.

The essays go beyond the neighborhood community and the home. Their concern is transformation of the contemporary political economy. Robert H. Frank advocates increased public investment, supported by a small change in taxation policy.¹⁶ The effect would reduce wasteful consumption while using those dollars to fund collectively beneficial outcomes for society at large. Elizabeth Garlow and Anne-Marie Slaughter make the case for a worldview of care in which human relationships and connections take precedence over approaches grounded in narrow self-interest.¹⁷ They draw on scientific evidence and current practices to demonstrate the viability and superiority of policies informed by the worldview of care. Gregg Gonsalves and Amy Kapczynski use the history of both the successes and failures of public health to argue for major reform of the infrastructure and public financing necessary for what they call "the social life of care."¹⁸ Its inception, however, will depend on effective social mobilization, a question Levi addresses in her essay.¹⁹ The fact that all of us need care and so many of us provide care forms the basis for generating an expanded and inclusive community of fate. One effect would be the capacity for collective action. Another would be a venue for civil, if heated, debate about the most appropriate policies.

Finally, Jane Hirshfield's poem "O, Responsibility" and Roz Chast's cartoon about the paradoxes of elder care capture the subtle and revelatory insights that only art can provide.²⁰

The Social Science of Caregiving is an ambitious project; indeed, it is just the kind of project CASBS at Stanford University thrives on. The workshops and the essays gathered in this issue of *Dædalus* represent small and initial steps toward assembling what we know, what we need to know, and what we need to do. Bringing together multiple disciplines reveals the diversity of forms of care and caregiving across history and place. But it also clarifies what all successful care and caregiving have in common: a commitment to the autonomy and well-being of the cared-for, respect by means of both recognition and appropriate compensation for those providing the care, and the establishment of supportive societal and public institutions.

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ENDNOTES

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- ⁴ Winn and Tottenham, "Looking Back to Look Forward."
- ⁵ Thomas, Steele, Gopnik, and Saxe, "How Do Infants Experience Caregiving?"
- ⁶ Pollak and Gunnar, "What Developmental Science Has to Say About Caregiving."
- ⁷ Monica E. Ellwood-Lowe, Gabriel Reyes, Meriah L. DeJoseph, and Willem E. Frankenhuis, "Caring for Children in Lower-SES Contexts: Recognizing Parents' Agency, Adaptivity & Resourcefulness," *Dædalus* 154 (1) (Winter 2025): 52–69, https://www.amacad .org/daedalus/caring-children-lower-ses-contexts-recognizing-parents-agency-adaptivity -resourcefulness.
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- ⁹ Schmader and Block, "Why Do Women Care More & Men Couldn't Care Less?"
- ¹⁰ Growney, Zaloom, and Carstensen, "The Human Geography of Care"; and Fetterolf, Elder, Levi, and Trivedi, "Technology & the Dynamics of Care for Older People."
- ¹¹ For care of others, see Schwitzgebel, "Imagining Yourself in Another's Shoes versus Extending Your Concern." For the divine, see Ugolnik, "Divine Care." For care for the dead, see Ford, Foster, and Martel, "Care of the Dead." For care related to AI, see Brian Christian, "Computational Frameworks for Human Care," *Dædalus* 154(1)(Winter 2025):183– 197, https://www.amacad.org/daedalus/computational-frameworks-human-care.
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- ¹³ Ugolnik, "Divine Care."
- ¹⁴ Ford, Foster, and Martel, "Care of the Dead."
- ¹⁵ Christian, "Computational Frameworks for Human Care."
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- ¹⁷ Garlow and Slaughter, "A Worldview of Care & a New Economics."
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- ¹⁹ Levi, "Expanding the Community of Fate by Expanding the Community of Care."
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