Caring Subjects: Migrant Women and the Third Sector in England and Scotland

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Abstract

We situate racialised migrant mothers as political actors in the landscape of austerity in England and Scotland. We explore the possibilities of a politics around caring work. We ask: what ‘caring subjects’ are possible, under austerity? A ‘politics of care’ can challenge the dichotomy between private caring and public citizenship practices (Erel 2011). However, we argue that the shift from a ‘culture of care’ to a ‘culture of cuts’ poses significant challenges to this politics in third sector spaces, particularly when processes of racialization are brought to the fore. We move beyond ‘reductionist economism’ to explore how the current economic crisis is also one of social relations. The re-privatization of caring and reproductive work generates new forms of subjectivity and social reproduction (Hajek and Opratko 2015). Within the supposed ‘monolith’ of neoliberalism, a multiplicity of subjectivities are engendered which open some spaces for resistance and subversion.

Article History: Received 27 02 2016; Accepted DD MM YYYY

Keywords: migrant women, austerity, racialisation, England, Scotland

Our starting point is the invisibility of minority groups’ experiences in informing policy problems or solutions unless, as Ann and Aisha Phoenix have argued, these groups are interpellated in particularly racialised and gendered discussions of social problems (Phoenix and Phoenix 2012). This interpellation dictates when the persistent poverty and unemployment of minority groups typically feature as a ‘public issue’, i.e. in the contexts of moral panics over ‘failed’ families and state strategies (ibid 2012: 62). In this article we draw on our broader research on minority women (see Emejulu and Bassel 2017) to focus specifically on the interpellations and experiences of stigmatised mothers whose ‘failed femininities’ are perceived as leading to family breakdown and public disorder, rendering invisible ‘private’ experiences of poverty (Allen and Taylor 2012).

The crisis and politics of care

These ‘failures’ must be read against the broader failures of the welfare state. Nancy Fraser (2016: 112) identifies a ‘crisis of care’ where, alongside state and corporate disinvestment from social welfare, women are recruited into the paid workforce:

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externalizing carework onto families and communities while diminishing their capacity to perform it. The result is a new, dualized organization of social reproduction, commodified for those who can pay for it and privatized for those who cannot, as some in the second category provide carework in return for (low) wages for those in the first.

This crisis, as Hajek and Opratko (2015:2) argue, encompasses multiple spheres of society enabling us to go beyond ‘reductionist economism’ and look at the current economic crisis in its relatedness to a crisis in gender relations, gendered social subjectivities, and social reproduction.

The ‘politics of care’ we explore in this challenging context is developed drawing on Patricia Hill Collins’ (2000a: 209) groundbreaking work which demonstrates how political consciousness can emerge from Black women’s everyday lived experiences and foster a distinctive political sensibility. Hill Collins identifies the ways in which motherhood – whether bloodmother, othermother or community othermother – can be invoked as a symbol of power, through which Black women express ethics of caring and personal accountability and build a different kind of community—and a different kind of politics (Hill Collins 2000a: 192-3). Through a generalized ethic of care, motherhood acts as a catalyst for activism and a site of agency and authority. We draw on this framework in considering the ways in which racialized migrant mothers, and their ‘third sector’ advocates – working in civil society organisations – might enact a politics of care within and around third sector spaces.

We ask: what ‘caring subjects’ are possible under austerity and the re-privatisation of caring and reproductive work in England and Scotland for racialised migrant mothers who live, react to and resist stigmatising interpellations? We first explore the re-privatization of care and reproductive work at an individual level, and suggest that this process interacts in unpredictable ways with the political resources motherhood can provide racialised migrant women. As Ruth Lister (2008) and others have argued, an ethic of care is a contradictory political resource: care can be a citizenship practice and a way to challenge the dichotomy between public citizenship and private caring (Erel 2011). The work of mothering can constitute a citizenship practice, in particular where it has effects beyond the household. Yet caring responsibilities can also be an obstacle to women’s citizenship. Here we contribute to this debate by insisting on the ways in which these processes are racialised, with dynamics that are specific to the different contexts we examine as well as sharing broad commonalities. In ‘placing’ migrant women as racialised citizens, we also consider the emotional toll on women involved in grassroots and third sector initiatives as they try to enact public forms of ‘care’ in the face of context-specific challenges.

In the context of third sector organisations, the story of ‘reprivatisation’ needs to be told carefully. These organisations are sites permeated by ‘enterprise culture’ where both compliant and resistant subjectivities are generated by and with migrant mothers. The relationship between private caring and public citizenship has changed; third sector organisations have shifted from being potential spaces of public caring and reciprocity to spaces shaped by an ethos of competitive market-driven service delivery and personalised service delivery. We characterize this as a shift from a culture of ‘care’ to one of ‘cuts’. We
find that migrant mothers and their third sector advocates have experienced this culture shift in two ways. First, as a hardening of the boundary between public and private, with it becoming less/im-possible to do the ‘emotional stuff’ and enact a politics of care, particularly in a context of austerity and harsh anti-migrant public sentiment, political discourse and law.

Second, this shift is experienced as a reconfiguration of the relationship between public and private. ‘Public’ caring is increasingly only possible when interpellated as enterprising carers, bringing its own risks and problems that reinforce as well as subvert the contours of migrant mothers’ ‘caring’ citizenship. In this article we pose the following questions: who enterprises and at what cost? With what support? On whose terms?

We now turn to our cases—England and Scotland under austerity—and our methods.

Context, Cases and Methods
We draw here on our broader research exploring the extensive reduction and restructuring of the British welfare state and its effects on minority women (Emejulu and Bassel 2017). This restructuring, arguably the most extensive since the Second World Ware, is well-documented (Yeates, Haux et al. 2011); (Taylor-Gooby and Stoeker 2010); (Taylor-Gooby 2011);(Whitely, Clarke et al. 2014)) and has included the following measures and announcements under three successive governments:

- During the five-year Conservative-Liberal Democrat Coalition Government from 2010 to 2015:
  - £80 billion spending cuts announced that included £18 billion reduction in welfare spending (Brewer and Browne 2011 4);
  - a 27% cut to local government—the key mechanism for delivery of public services—and a 68% cut to the social housing budget (Taylor-Gooby 2011 4);
- With the unexpected Conservative victory at the polls in May 2015, the then Prime Minister David Cameron and the former Chancellor of the Exchequer, George Osborne:
  - further £12 billion reduction in social welfare spending announced;
- Theresa May’s Conservative government, in power following the June 2016 Brexit referendum:
  - have not advanced a clear economic policy beyond a statement abandoning George Osborne's commitment to generate a budget surplus by the next general election, set for June 2017 at the time of writing.

The Scottish National Party (SNP) Government at Holyrood opposes the Westminster austerity programme and has an official policy of mitigating its impact in Scotland through a combination of its Social Wage and the full mitigation of the so called ‘bedroom tax’ (Scottish Government 2015). Under current devolution settlement, however, the Scottish Government is obliged to implement these dramatic spending cuts. Despite immigration and some areas of fiscal policy are reserved to Westminster, devolution appears to have opened up alternative political spaces whereby the governing SNP is distinctive for advancing pro-migrant and anti-austerity positions. The SNP platform specifically distances itself from Westminster austerity measures through its budget proposals, by staggering and mitigation of Westminster-driven austerity policies and – at the time our fieldwork was
Conducted – in its plans for an independent Scotland. Consequently, the articulation and practices of a politics of care might be possible in a seemingly anti-austerity and pro-migrant Scotland.

In England, a longstanding Black and Minority Ethnic (BME) third sector might arguably enable a politics of care and defend third sector spaces for and with migrant mothers. Yet under the Coalition government – at the time of our fieldwork – harsh austerity measures were being introduced. These measures, which disproportionately impact on minority groups (Sandhu et al 2013), have changed the nature of services provided but also the ethos of organisations—the cultural shift from care to cuts that we refer to in our analysis. Furthermore, while the BME third sector in England has played a key role in championing issues relating to BME groups, filling in or bridging of gaps left by public services and even acting as a potential site of resistance (Speaker, Knowledge Exchange Event 2013) such spaces also tend to be dominated by men (Discussion, Knowledge Exchange Event 2013).

London, where a good part of the England-based research was conducted, was the most ethnically diverse area across England and Wales according to the 2011 Census. In contrast, Scotland’s BME population is much smaller but concentrated in the largest cities, Edinburgh and Glasgow, where this research was conducted. As our discussion will show, this difference in size and visibility was significant for some women in Scotland who participated in our study. Our focus is on narratives and experiences as situated within these two cases, not on comparing them directly and systematically or making broader claims about ‘migrant women’s experiences in England v. Scotland’.

In this article we explore the so-called ‘third sector’, a term that is notoriously difficult to define (see, for example, (Martens 2002); (Vakil 1997)). In our broader study, we define it as the collection of civil society organisations positioned between, and strongly influenced by, both the state and the market (Emejulu and Bassel 2017). We have sampled across the spectrum, including in our study third sector organisations that range from traditional social welfare service providers to organisations offering so-called ‘militant provision’ (crisis relief and political organising for destitute and/or undocumented migrants) and campaigning and policy advocacy organisations that are closer to social movements in that they situate their activity as part of ‘a network of informal interactions’ (Diani 1992). Gender equality/feminist organisations are not our primary focus because feminist organizing is already well-documented in the literature (Sudbury 1998 ; Dominelli 2006)(Author 2 2011) (Annesley 2012)) and we seek to challenge the assumption that the responsibility for recognizing and advancing the social justice claims of and with migrant women lies only with feminist and gender/equality organisations.

We draw primarily on data collected through interviews and focus groups. We conducted 27 semi-structured interviews and 2 focus groups in Glasgow, Edinburgh, Manchester, Coventry, London, Wales (one participant) from September 2011 to May 2014. These interviews and focus groups were conducted with: minority and migrant women activists; directors, policy officers and development workers in anti-poverty, housing, migrant rights third sector organisations; and civil servants and local government officials with briefs for the third sector and/or equalities. Additional material was collected from a separate
research project and three knowledge exchange events. In this paper we draw specifically on nine individual interviews and two focus groups (Table 1).

Our sample includes the following: women who self-identify as ‘Black’, a label they use politically; women who self-identify as ‘refugee’ or ‘migrant’ or who work for or with organisations with names including these terms; women who, in the course of interviews, refer to their own identity or background e.g. ‘my family is from…’. The sample also comprises self-identified advocates of specific groups of women, e.g. asylum seekers, migrants. These advocates were sometimes part of the white mainstream, sometimes self-identified minority women or women who situated themselves as ‘advocates’ though also belonging to a minority group they were discussing. Some participants identified as minority women who, while minoritised along some axes, were advantaged along others, e.g. social class and education. In some cases this was specifically identified as a resource on the basis of which they could advocate on behalf of other racialised women. We have identified the social location of participants cited to the extent that this does not compromise their anonymity in Table 1. We fully acknowledge the limitations of using the terms ‘minority’ or ‘Black and Minority Ethnic (BME) in relation to the women in our study. As North Americans working in Britain, we prefer the term ‘women of colour’ but understand that this label is seen by some as a problematic importation of North American race politics. We do not seek to impose this identity on the participants in our study so we have opted to use the labels they use to describe themselves (see also Emejulu and Bassel 2017).

Section 1: Reprivatised mothers and the politics of care

In this section we explore the re-privatization of care and reproductive work at an individual level, and suggest that this process interacts in unpredictable ways with the political resources motherhood can provide racialised migrant women. While a politics of care is not foreclosed, this interaction does not necessarily lead to outcomes that challenge the dichotomy between private caring and public citizenship – particularly because of the racialisation of processes of claiming public space as well as their gendered dimensions - and places a tremendous toll on women involved in grassroots and third sector initiatives that is experienced in different ways across our contexts as a challenge to identity and values.

Under austerity, the extent to which racialised migrant mothers can even occupy public space, and be mothers in public (Baraitser 2009) is increasingly constrained, with mothers describing ways in which they were de facto physically confined to domestic spaces. Public services, particularly childcare, English for Speakers of Other Languages (ESOL) classes (see also (Lonergan 2015 138)) and after-school activities for children, had been the key way in which women were able to participate in everyday life. Cuts to these services, particularly at the local level, may further isolate women who are already in a precarious social and economic position. Lack of money for bus fare constrained some participants’ physical mobility, in conjunction with lack of income to participate in leisure activities with children and, for those working outside of the home, lack of time due to increased pressure to work longer hours, straining relationships of care within families and generating new emotional challenges. As described by a Scotland-based participant:
I feel the climate is...affecting us emotionally...We’re not able to do anything with the kids as much as we want to do. We have to make sure their main priority are given. But every child’s got individual need but every child needs family time and with family time you need certain things...Even to go on holiday. vi

Childcare was universally identified by our participants as a major obstacle, specifically in preventing their access to ESOL classes and as a key factor in gendered choices over whether to go back to work. While these considerations are not new, they deeply affect migrant women. With reduced household budgets, access to ESOL and participants’ awareness of their precarious possibilities in the racialised and gendered labour market, the current climate of cuts was affecting how childcare expenses factored into the decision to go back to work (Sosenko et al. 2013).

Many of these effects of austerity have been documented in broader studies, even noting the disproportionate impact on lone mothers (Lonergan 2015). However, these studies rarely distinguish the disproportionate impacts on racialised women for whom, as our own participants insisted, nothing is ‘new’ here but instead a deepening of longstanding inequalities that are invisible in ‘the numbers’. Making these connections visible in public debate was a political stance for some racialised women:

People are gonna die...if you’re too scared to...telephone Gateway [a legal aid agency] about a legal issue, if you’re having to decide whether you’re gonna pay the rent because your benefit’s now capped, especially if you’ve got three or more children, whether you put food on the table for your kids. If you’re suffering from some mental health illness...you’re not gonna figure this out are you? And that’s when I realised how unjust the whole thing is... you can’t separate this, all this stuff from the way we’re [migrants] conceived in society. (Participant 1)

In response to the asymmetrical impacts of austerity and the unjust immigration system that the participants in our study repeatedly identified, migrant mothers and their daughters articulate and enact a politics of care and seek to build new forms of community, drawing explicitly on motherhood as a source of resistance to austerity, racism and xenophobia:

I am the mother of a black boy, imagine if I’d told my son I didn’t do certain things in my life as he grows up because white people...told me I wasn’t ready to do this...In terms of being a mother yeah, what I do I’ve always done for my son yeah and his generation...I have to fight discrimination the way my mother in this country coming from the Caribbean was told she was a monkey, did she live in the jungle, did she have a tail, yeah, that’s quite a lot of discrimination (Participant 3)

Mothers’ and daughters’ experiences ensured political consciousness spanning several decades:

My mother is from a Caribbean island, she was a teacher and she was a community activist in the 80s, which was when I was becoming politically aware, that’s the decade of my upbringing. And she ran anti-racism courses so that’s where I knew
about the different discriminations and how it impacts and I've been able to then recognise it when I see it in workplaces or in groups I've been involved in later. (Participant 4)

Yet motherhood and caring do not always suffice as a catalyst for activism and a distinctive political sensibility under austerity which, we suggest, has toxic effects on politics of care. As Janet Newman argues of the UK context, ‘the politics of austerity...offers an inhospitable climate for progressive feminist projects’ (Newman 2013: 217). It is increasingly difficult for activists to find time or resources for ‘creative political work’ because ‘cuts in public and welfare services are intensifying the time pressures on women, making it more difficult to reconcile care work, paid employment, casual work, study, voluntary or charitable contributions and political activity’ (Ibid: 217). We add to this analysis a focus on the ways in which processes of racialisation in England and Scotland further intensify these challenges and create additional obstacles.

Our participants described the path from motherhood to a politics of care as incredibly difficult. Mindsets are affected, people ‘don’t have a life’ and hardly see their children because they are ‘just doing so much...It’s scary’ (Participant 2). As our only Wales-based participant articulated this the public politics of caring, particularly for racialised asylum seeking women for whom she feels a personal responsibility because of her own experience, was in direct competition with family caring responsibilities:

I have a very young family. And that [third sector] organisation is taking too much of my time... Yeah despite our passion, despite our goodwill, we can’t keep on doing it. I will not keep on doing it...One day I will just say, ‘you know what, I’ve tried...I can’t keep on doing it’. So hopefully it won’t come to that...I was...once upon a time I was [in] that situation [asylum seeker]. And some people listen to me when I was crying. I want to do the same. It’s taking [its toll] on my life (Participant 5)

In England the struggles that our participants face are not only gendered in the context of cuts to third sector organisations and the reprivatisation of care but also as racialised migrant women who simultaneously contend with the disproportionate impact of austerity at the individual level and hardening public opinion, political discourse and immigration law that create further tension and division within communities. These challenges are identified in all sites of our England-based research, and observed directly in London by a migrant woman in her work:

[In this] session that I had in Brent with a group of parents was this mother who was also British, born British, raised British, had three children, she worked for 17 years in this country then she had an illness that stopped her working. Now she’s been affected by the benefit cap, she’s being affected by the changes that welfare reform, but she’s not saying OK we are in recession, there is crisis, we have to pay this and the Government has made these changes, but she’s saying I am born and raised British, why should I be affected by something that foreigners caused? So somehow the blame for all these changes that are happening at the moment is pointed towards migrants and that will increase racism, discrimination, specifically against migrant families...that kind of hostility is dangerous.
Racialised migrant mothers clearly draw on motherhood and experiences of racism as a resource but also, as racialised migrant mothers, may abstain from a public politics of care. The unpredictable nature of the interaction of reprivatised care, motherhood and processes of racialisation in an increasingly anti-migrant environment does not foreclose a politics of care. However, this interaction does not necessarily lead to outcomes that challenge the public-private dichotomy in the form of a viable politics of care with and by racialised migrant mothers, not least because of the emotional toll exacted on women involved in grassroots and third sector initiatives.

In Scotland, given the relative isolation and exclusion of minority ethnic groups combined with the new (only partly mitigated) austerity regime, some groups are choosing not to engage in a public politics of care and focus instead on working for the benefit of the family and kinship networks. In this case activities such as volunteering are used as an employment strategy rather than a form of public care and engagement:

"We are here to earn money and to make lives for ourselves, activism is not really for a minority community and I think that’s a sort of a prevalent environment in Edinburgh because we are quite small, I think in London you will find differences or may be in Glasgow because it’s much bigger so there’s a greater chance to find an activist. Personally I don’t think that anybody who works in [organisation] would do it [volunteer] for free, they do it because they get a job...We are still trying to fit in...if we wanted to change the world we would have stayed where we were...from the women we see, very few of them will take active steps to make things better collectively (Participant 7).

Despite pro-migrant, pro-multiculturalist SNP rhetoric during the independence referendum, some participants expressed doubts about the fate of racialised communities in an independent Scotland and this appeared to prevent them from taking part in public politics: ‘I can’t see ethnic minorities at George Square [the main public space for protest rallies in Glasgow] talking about cuts...we are even fearing the Scotland independence, some of people are, we are really fearing it, we don’t know what will happen to us...[it’s] better to keep quiet’ (Focus Group 1). A consistent theme in the Scottish data was minority ethnic and migrant women feeling excluded and isolated from the broader polity, despite the prevalence of an anti-austerity and pro-migrant nationalist rhetoric (Bassel and Emejulu forthcoming 2017). Instead, as racialised migrant women, they were in fact positioned outside of an ostensibly inclusive national project and its protest culture which speaks for rather than with them, making it difficult for them to build coalitions with other activists and more broadly in Scottish society.

We will now turn to examine how the changing nature of the third sector in Scotland and England is impacting on migrant mothers’ politics of care.

**Section 2: Third sector: Shifts from a ‘Culture of care’ to ‘culture of cuts’**
The impacts of budget cuts on the not-for-profit sector are increasingly well-documented (Independence Panel 2013), but few studies consider the intersectional effects of austerity on organisations’ programmes and advocacy (Bassel and Emejulu 2014; Emejulu and Bassel 2015) and for the politics of care enacted by racialized migrant women and their advocates. In the UK, the rise of ‘enterprise’vii as a dominant ideological frame for action has continued apace during the crisis, generating dilemmas for third sector organisations working in the anti-poverty, housing and migration sectors (Emejulu and Bassel 2013). Principles of competition, the accumulation of assets and the commodification of services and products have been imposed onto individual organisations by the local or national state. The ethos of enterprise has fundamentally shifted relationships between state, market and civil society. These shifts generate a difficult context for third sector organisations as, with the rise of privatization of social welfare in the wake of austerity, they must either become ‘any willing provider’ or, often, face extinction. The politics of care by and with migrant mothers is, we argue, compromised as a result because of the ways these processes combine with racialisation that our work highlights. While not experienced uniformly, participants identified a change in the nature of the relationship between private and public caring that we characterise as a hardening of the boundary between the two, making it less/im-possible for third sector workers to translate an ethic of (private) care into (public) caring work within third sector organisations working with and for racialised migrant women that, in one woman’s view, can no longer ‘do the emotional stuff’.

This minority ethnic woman in Scotland demonstrated the ways in which it was harder to provide ‘extra’ services that had previously enabled women and children, who had experienced domestic violence, to participate in a range of activities, e.g. providing taxis so women can attend social activities and access services (Participant 7). She gave a specific example describing her role, and that of her organisation, as that of ‘surrogate mother’:

I’m thinking of a woman who has only just arrived yesterday and she has three children, she left her house with nothing, no clothes, cannot even read a word of English, has been locked up in a house for four years, and now is in temporary accommodation somewhere in Edinburgh... If it was a white woman, a lot of the things we wouldn’t need to do. We wouldn’t need to show her how to get on a bus, we would tell her ‘no. 5’. Even if...she can’t read numbers, she should be able to speak to somebody randomly and ask for help. She will not have fears of ‘is this person going to be racist to me, or are they not going to understand me’. This woman has no social network so in between all of this we are sort of becoming surrogate mothers to her, who is going to do that?

Policymakers are no longer willing to grant ‘specialist’ funding which threatens the survival of the organisation and its effectiveness in providing intensive support, curtailing this role of ‘surrogate mothers ... you know teaching them what it means to be free as well as what it means to live here [in Scotland]... the emotional stuff’. Her view is that the ‘creative’ projects are less of a priority:

We need to be really strong doing the things that we already do rather than trying be creative... Yes there is a need for emotional interventions but the environment that we are in I think government funders will want you to be as practical as possible,
and I think this is how we’ve always looked at it as well, we need to be really strong and consolidate our funding.

It is striking that what we would obviously include as a vital part of a ‘politics of care’—emotional support and interventions—becomes ‘creative’, meaning superfluous, work as opposed to the ‘real issue’ of housing. This is not to criticise the participant but to reflect on the cultural shifts that change third sector workers’ understanding of their work and what constitutes being ‘practical’ and securing funding. While this is how this participant claims her organisation has ‘always looked at it’, she also notes that it is the ‘emotional stuff’ and role as surrogate mothers that now does not fit strategies for organisational survival. There is therefore a shift in her perception of what is practical and consolidates resources, and how it affects the migrant women with whom she works, as well as her own professional identity. What is significant is how little weight can be given to their role as ‘surrogate mothers’ undertaking emotional labour as, for and with racialised migrant women.

This shift was by no means experienced uniformly across all participants and organisations. Migrant mothers’ social and political potential to express an ethics of caring and personal accountability and build solidarity and community (Hill Collins 2000a: 192-3) rather than focus on their victimization, were recognized and promoted by other organisations and individuals.

The same minority ethnic woman in Scotland quoted above (Participant 7) identifies a chilling effect on how some racialised women workers think about the potential of their organisation and their own identity:

It also has an impact on the quality of not just the service that we provide but also on the way we look at ourselves as workers...because if you’ve worked in an organisation like XXX and you try and go and work in a mainstream organisation they don’t necessarily see your skills as transferable because actually your expertise is with black minority ethnic women, what do you know about white women, so even for those of us who work there, we experience similar levels of discrimination and some of it is internalising, we assume as well that this is how the world is going to think of us because that is how they think of the women we work with anyway, so why are we so different? (Participant 7)

Similarly to the individual level, we see that within third sector organisations the boundary between public and private has hardened making it difficult for workers to translate ‘private’ care to ‘public’ politics of care due to intertwined processes of erosion of the welfare state and racialisation. However, through the experiences of those working in the third sector, we see an added dimension—the development of a neoliberal subjectivity. In this case, these processes are consciously experienced. This woman knows she is internalising intertwined processes of racialisation and (cultural and material) shifts in the third sector—the ‘emotional stuff’ and creativity must be abandoned and her professional identity must be even more commodified to meet the demands of the racialised and gendered labour market that does not place a high premium on her skills and those of other racialised women. She clearly articulates the challenge to her personal and professional values and identity and the precarity of her situation where her professional status and legitimacy are
under threat because of racialising, neoliberal imperatives. Her responses demonstrate the simultaneity of hardening borders from ‘private’ to ‘public’ when trying to ‘care’ publicly, and racialising neoliberal encroachment in the opposite direction.

**Section 3: A Reconfigured Relationship**

Our boundary imagery needs further elaboration when we consider the complex functioning of ‘enterprise culture’ within third sector organisations. Here we question the ‘monolithic’ portrayal of neoliberalism ‘as a singular force folding feminism and other movements into a new, undifferentiated hegemonic form’ (Newman 2013: 214) and, like Janet Newman, identify ambiguities. We argue that these ambiguities signal a different kind of movement across the border between ‘private’ caring and ‘public’ politics of care, with specifically racialized dimensions for migrant women in third sector spaces.

Through the call to ‘social enterprise’ – a concept and practice which emerged within the European third sector in the 1990s and has always been deeply connected to it (Defourny, Hulgård et al. 2014) – racialised migrant mothers are increasingly interpellated as agents of care, at the same time as being interpellated as social problems (Phoenix and Phoenix 2012), ‘failed mothers’ (Allen and Taylor 2012) and victims of their communities (Bassel and Emejulu 2014). Initiatives identified in the course of our study included highly gendered activities such as community cafes, crèches and sewing groups which, as participants argue, were to serve as sources of employment and income for individual women but also organisational survival for third sector organisations. We argue that social enterprise reconfigures this relationship between public and private, where ‘public’ caring is possible for racialised migrant women when interpellated as enterprising carers. This interpellation certainly brings its own risks and problems, reinforcing the inequalities of race, class and gender inherent to ‘enterprise culture’, and which echo concerns expressed about ‘homeworking’ in the 1980s (Allen and Wolkowitz 1986). But it also engenders a multiple subjectivities, some of which are resistant and/or subversive.

This highly contested terrain was identified as a space of paradox marked by (sometimes simultaneous) experiences of coercion, pragmatic acceptance, and (sometimes subversive) endorsement, where a politics of care was either doomed, unlikely or a site of resistance.

The experience of coercion was best expressed by one participant as ‘it’s not like the light bulb’s gone on and thought this is a great idea, it’s more a case of do it or else you fail’ (Participant 8). While migrant women might perceive social enterprise as ‘an option for them...because they can’t find work that fits in with their...childcare responsibilities, their everyday responsibilities’, advocates questioned their own stance asking ‘is it okay for us to say, well, yeah, okay, start up your own business where you might...actually end up working, like, 24 hours a day...to try and get hardly any money’ (Focus Group 2). The problem, identified in this focus group, is that these forms of enterprise centre ‘around [those] who are the most exploited, and vulnerable in our society. So if you look at the experiences of most of the home working that’s done...by ethnic minority women, the majority of them
were home workers, traditional home workers... [doing] sewing’ because they also face barriers to entering the labour market (Focus Group 2).¹⁰

In this view, social enterprise is a vehicle for reprivatising social care with a further twist, where migrant (and minority) women must in turn commodify their labour as key agents of social reproduction. These participants ask: who enterprises? At what cost and on whose terms?

Some resistance to enterprise was more pragmatic, with participants asking: with what support? In practical terms, how can would-be migrant mother entrepreneurs make social enterprise work? Here social enterprise was seen as an unrealistic ‘perfect dream’, while in reality there is a lack of funding to enable migrant women’s success. Helping women set up their own businesses ‘doesn’t happen by osmosis, you have to have the funding to enable you to train and support those women on their way’ (Participant 8). The desire to learn the language, to build confidence, to work, was only too present, particularly as mothers who ‘want to make their lives better and... a better future for their children as well... a lot of women we see they’re so far removed from actually being able to set up their own business’ (Participant 8). This pragmatic response focuses on migrant mothers’ deficits, defined in enterprising terms, rather than social and political transformative potential.

Others identified social enterprise as a creative space that arguably creates a bridge between private and public caring, making it possible to care politically. Through her social enterprise, one migrant woman provides welfare rights advice to single migrant mothers in response to the dramatic cuts to legal aid (Sommerlad and Sanderson 2013) and in the landscape of xenophobia she identified earlier. Rather than simply informing migrant women of the nature of changes to their benefits:

    in all my information session I tend to put something positive and to make it balanced and although it’s depressive, this is how I’m telling you how you’re going to be affected... then the rest of the session would be this is what you will need to do, this is what there’s options [sic], this is what the law says and often I find myself saying do not trust any government official ... it’s very important to inform people for them to understand what their rights are, and whether they can join campaigns or whether they can do something. (Participant 6)

In Scotland one participant identified social enterprise, specifically around food, as an opportunity to build solidarity and community that other Scotland-based participants identified as sorely lacking in their highly visible and vulnerable position in Scottish society:

    The bottom line is to bring community together around food... We’ve another... women group, [a white] Scottish group to get together and develop a café. At the beginning the Scottish women were reluctant so we didn’t know, but when we started talking, talking, talking and yeah now they feel... very enthusiastic to work with us... In [organisation] we say doing this around food could bring people (Focus Group 1)
However even when endorsing social enterprise some did question whether social enterprise always reflected concerns of their constituents or of organisations desperate to survive. Even while endorsing and undertaking social enterprise this woman calls the underlying power relations into question:

Why not grow something if you can grow it from grassroots? And is the objective set by the very people it’s supposed to benefit? Then I think it [a social enterprise] can work. I would question whether, at the end of the day, their [third sector workers] interest is in what’s the benefit of their service users or is it in the interest of the people in their organisation...I’m the same. I had this idea for the cooking and the cleaning but I never spoke to any women about it. I just thought what skills have the women got, where they haven’t got high literacy or numeracy levels. They haven’t got high levels of qualifications. But they can bloody cook (Participant 1).

The interpellation as enterprising carers engenders a range of responses and subjectivities: coerced, pragmatically accepting and, occasionally, subversive. While ‘enterprise’ is an inescapable frame for action regardless of the various organisational or individual positions that are adopted, racialised migrant women as enterprising agents of care can be subversive, even within their endorsement. This range of subjectivities and responses challenges a ‘monolithic’ reading of neoliberal and racialising processes as absolute obstacles to a politics of care for racialised migrant women in and around third sector spaces.

**Conclusion**

The path from private caring to a public ‘politics of care’ is increasingly difficult for participants in our study because of the unpredictable ways in which the re-privatization of care and reproductive work interacts with the political resources motherhood can provide, which are inextricable from context-specific processes of racialisation. The increasingly neoliberal third sector encroaches on family life and thwarts attempts to act according to political values to build new forms of community. Additionally, unprecedented austerity measures, xenophobic public opinion, political discourse and repressive laws hamper individual strategies for a politics of care. Activities such as volunteering do not necessarily play a political role but are part of a broader survival strategy particularly for Scotland-based participants who also identify fear of independence and lack of solidarity in segregated communities as obstacles to individual and community-driven public action. Within third sector organisations, the boundary between public and private has hardened making it difficult for workers to translate ‘private’ care to ‘public’ politics of care due to intertwined processes of erosion of the welfare state and racialisation.

Foregrounding a politics of care can, as Erel (2011) suggests, spotlight some of the contradictions of being and becoming citizens in European multi-ethnic societies, as well as revealing new formations of citizenship. This is not necessarily a direct challenge to the dichotomy between private caring and public citizenship, nor is a ‘monolithic’ reading of neoliberal and racialising processes as absolute obstacles to a politics of care by and with racialised migrant mothers justified. Instead, when interpellated as enterprising carers
racialised migrant mothers and their allies demonstrate a range of subjectivities and responses including new, subversive forms of politics in which care is an unstable but powerful resource.

**Table 1: Participants cited**

<table>
<thead>
<tr>
<th>Participant 1</th>
<th>Location</th>
<th>Professional Role</th>
<th>Social Location/Self identification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>England</td>
<td>Consultant, social entrepreneur</td>
<td>BME woman</td>
</tr>
<tr>
<td>Participant 2</td>
<td>England</td>
<td>Social entrepreneur, co-chair of women's organisation</td>
<td>British Asian woman</td>
</tr>
<tr>
<td>Participant 3</td>
<td>England</td>
<td>Activist</td>
<td>Black woman “When I say Black throughout this I’m talking in a political sense, I’m talking about the visible ethnic minority women when I say Black”</td>
</tr>
<tr>
<td>Participant 4</td>
<td>England</td>
<td>Development officer in legal organisation</td>
<td>Black British</td>
</tr>
<tr>
<td>Participant 5</td>
<td>Wales</td>
<td>Founded women’s organisation</td>
<td>African woman</td>
</tr>
<tr>
<td>Participant 6</td>
<td>England</td>
<td>Director of social enterprise</td>
<td>Refugee woman</td>
</tr>
<tr>
<td>Participant 7</td>
<td>Scotland</td>
<td>Development worker for a minority women-led organisation</td>
<td>Minority ethnic woman</td>
</tr>
<tr>
<td>Participant 8</td>
<td>England</td>
<td>Leader of women’s organisation</td>
<td>White British woman</td>
</tr>
<tr>
<td>Participant 9</td>
<td>England</td>
<td>Head of migrant advocacy organisation</td>
<td>Migrant woman</td>
</tr>
<tr>
<td>Focus Group 1</td>
<td>Scotland</td>
<td>Organised through an anti-poverty organisation</td>
<td>7 migrant women activists</td>
</tr>
<tr>
<td>Focus Group 2</td>
<td>England</td>
<td>NGO workers</td>
<td>4 people: British Asian man, British Asian woman, white woman, phone participant</td>
</tr>
</tbody>
</table>

**Acknowledgements**
This project was funded by the British Academy (Reference: SG112539), the College of Social Sciences Research Development Fund, University of Leicester and the Centre for Education for Racial Equality in Scotland, University of Edinburgh.
References


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1 A close reading of the SNP’s proposals for an independent Scotland demonstrates that the Party did not rule out austerity—however, these debates are beyond the scope of this paper.
Our research design involved knowledge exchange events during the project to elicit feedback on emerging findings from key actors on the ground.

City information has not been included in Table 1 in order to preserve anonymity.

By ‘minority women’ we refer to women who experience the effects of processes of racialisation, class and gender domination as well as other sources of inequality, particularly hierarchies of legal status. The term ‘minority women’ implies a process in which women at these intersections are ‘minoritised’ and, in turn, forge their own political identities and strategies drawing on the resources these social locations offer.

Please see Sosenko et al. 2013.

This material is drawn from Sosenko et al. 2013.

We define enterprise as encompassing the values of ‘individualism, personal achievement...and the assumption of personal responsibility’ (Diochon and Andersons 2011 96). Entrepreneurship is the independent actions of self-interested individuals for profit making activities (Anderson and Smith 2007). Enterprise and entrepreneurship are oftentimes used as synonyms for innovation, risk-taking and dynamism—the market-derived meanings for these terms have been obscured.

The concept of social enterprise, i.e. business solutions to social problems, has gone hand in hand with neoliberal policies taking hold in Britain since the 1990s (Kamat 2004; Evans, Richmond et al. 2005; Choudry and Kapoor 2013).

See (Wolkowitz 1986) on the myth of autonomy, range of coercive practices, sexual division of labour, control through kinship networks that characterise ‘homeworking’.

City information has been removed to preserve anonymity.