



Working Paper Series  
Volume 7  
Issue 3

ISSN: 2700-1415

Editor: Jessica A. Albrecht

All papers have been peer  
reviewed

Layout and Publishing:  
Jessica A. Albrecht

To cite this article:

Fox, Violet: "Why the Global  
North/West Still Needs  
Intersectionality. A Review of  
Welfare-State Policy  
Paradigms of the Last 100  
Years", En-Gender 7:3 (2024),  
34-44.

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## Why the Global North/West still needs intersectionality

### A review of welfare-state policy paradigms of the last 100 years

#### ABSTRACT

This paper examines the necessity of integrating intersectionality into welfare-state policy paradigms in the Global North/West over the past century. Through an analysis of Keynesian, neoliberal, and social investment paradigms, it highlights how each has addressed economic vulnerabilities related to care provision, yet often overlooked the nuanced disadvantages faced by individuals with multiple marginalized identities. The Keynesian model reinforced traditional gender roles, while neoliberalism exacerbated inequalities through austerity measures, disproportionately affecting marginalized groups. Social investment theory, though an improvement, remains constrained by its economic focus and failure to challenge entrenched gender and racial biases. This paper argues that an intersectional approach is essential for developing equitable care policies but faces challenges within the prevailing neoliberal, patriarchal capitalist culture. It concludes with a call for policymakers and scholars to operationalize intersectionality more effectively and consider alternative paradigms that prioritize well-being over economic efficiency.

#### KEY WORDS

welfare state, intersectionality, policy, feminist economics

#### BIO

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## **Why the Global North/West still needs intersectionality**

### **A review of welfare-state policy paradigms of the last 100 years**

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by *Violet Fox*

### **Introduction**

Since the mid-1930s, there have been three distinct policy paradigms<sup>1</sup> that have ruled in the Global North/West; Keynesian, neoliberal, and most recently, social investment (Hemerijck, 2018). Each have influenced the direction and duration of welfare in industrialized societies and despite their different approaches and theoretical foundations, all three have sought to address the same critical economic vulnerabilities in life, namely, the period between education and work, the decision to have children, economic inactivity, and retirement (Hemerijck, 2018). Care provision strategies have the potential to target three out of four of these vulnerabilities; the decision to have children, economic inactivity, and retirement. This makes “care” a high-impact investment opportunity for governments seeking to economically and demographically stabilize their populations. In recent years, it has become clear that certain communities are more vulnerable to crises when experiencing those life-course events (European Commission, 2013). The concept of *intersectionality* was coined and made famous by Kimberlé Crenshaw in 1991 but amply theorized before this time by Black feminists such as Angela Davis, Patricia Hill Collins, Audre Lorde and others. It is a way to describe and analyze the unique

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<sup>1</sup> I use ‘paradigm’ in alignment with Hemerijck’s 2018 article, Social investment as a policy paradigm, to refer to a dominant framework or popular approach used to study any number of topics. This definition is from Tania Lombrozo’s adaptation of Thomas Kuhn’s exploration of ‘paradigm shifts’ located in his foundational 1962 book, *The Structure of Scientific Revolutions*. See Lombrozo citation for more.

inequalities faced by those holding multiple marginalized identities, making it an exceptional tool for policymakers seeking to address and remediate disadvantage in society (Crenshaw, 1991). Therefore, an intersectional perspective is necessary in care provision policy because it elucidates the barriers faced by people with marginalized genders, races, ethnicities, ages, physical and intellectual abilities, etc. in living out their full potential<sup>2</sup>, whether they are the cared-for or care-takers. In other words, the application of intersectionality to the policymaking process provides the means to effectively and efficiently target certain communities for additional care resources. However, the continued challenge faced by equitable care provision policy is the fact that it must operate within the larger culture of neoliberal, patriarchal capitalism dominant in the Global North/West.

In this paper, I will begin by outlining the three social policy paradigms of the last century and their respective relationships to care provision using an intersectional lens. This includes an explanation of how the current paradigm, social investment theory, best incorporates the practice of intersectionality, but is inevitably limited by its pursuit of economic ends as opposed to liberatory ones. The following section elaborates on the oppositional relationship between intersectional care provision policy and the culture of capitalism, with particular attention paid to the focus on activation and the ideal worker model (Jenson, 2015; Lott & Klenner, 2018). I conclude with a call-to-action for policymakers and social scientists to better operationalize intersectionality in social policy and to consider the formation of new paradigms that privilege non-economic success indicators.

## **Keynesian**

The Keynesian approach formed in response to mass unemployment from the Great Depression and had relative success until ‘stagflation’<sup>3</sup> in the 1970s (Hemerijck, 2018; Jahan et al., 2014). It sought to bolster economic productivity overall, but ultimately targeted ‘working age’ and ‘old age’ populations through generous public infrastructure projects and the implementation of contribution-based retirement payments (Hemerijck, 2018). In line with conservative gender roles of the time, these

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2 The term ‘full potential’ is the language used by the European Commission statement on investing in early-life programming, specifically: ‘Children that grow up in poverty are more likely to suffer from social exclusion and health problems in the future, and also less likely to develop to their full potential later in life’ (italics mine, European Commission, 2013). It is not explicitly defined by the EC.

3 Stagflation is a combination of ‘stagnation’ and ‘inflation’, and refers to both economic phenomena happening at the same time thought to be caused by Keynesian-era government spending and an over-regulation of market mechanisms (Jahan et al., 2014).

positions and benefits were granted to men only and therefore, worked to solidify the male-breadwinner model. This made women and children dependent on working fathers/husbands despite women's employment being previously high during the war (Hemerijck, 2018; Lewis, 1992). Therefore, care provision was in principle a non-issue, since the idea was that women and girls were more or less homebound and households were able to function on a single income.

In reality, this single-earner household phenomenon was class specific since 'working class women have always engaged in paid labor to some degree' (Lewis, 1992: 161). Even more, in settler-colonial contexts that relied on enslaved and indigenous people for social reproductive<sup>4</sup> labor such as Australia, Canada, and the United States, race and class cannot be so easily separated, hence the necessity of an intersectional perspective when accounting for intergenerational disadvantage (Bhambra & Holmwood, 2018; Glenn, 1992; LeBaron, 2010). Where much of Western Europe was able to profit from off-shore colonial economies and sourced domestic care laborers, these younger nations with relatively more diverse populations relied on structures of racial prejudice for the same work (Bhambra & Holmwood, 2018; Glenn, 1992). Black, brown and immigrant women were increasingly employed as domestic workers and caretakers for white middle to upper middle class households but unable to pay for similar care in their own homes, resulting in what would later be called the *care chain* (LeBaron, 2010; Peterson, 2010). In short, the social and economic gains of the post-war era up until the 1970s, signified by the male-breadwinner model, were felt by only a portion of the Global North/Western population.

## **Neoliberal**

Characterized by deregulation and free-market ideology, the neoliberal policy paradigm sought to reduce government interference in market mechanisms, believing it would produce the most efficient and equitable outcomes if left alone (Hemerijck, 2018). From the 1970s and into the 2000s, there were significant cuts to publicly funded services and welfare programs across Western Europe and North America as a response to economic crises and inflation (Cain, 2106; Farris & Marchetti, 2017; LeBaron, 2010). Because women constituted the majority of employees and recipients of state services— a trend that continues into the present— they were disproportionately affected by these cuts (Cain, 2016;

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<sup>4</sup> I use 'social reproduction' to refer to the work involved in biological reproduction, maintenance and production in the home, and cultural reproduction as described by Rai, Brown & Ruwanpura in their 2019 analysis of SDG 8, see citation.

LeBaron, 2010). In the US, the choice to pull funding did not affect all branches of welfare programs equally, but was concentrated in services that specifically aid poor women, such as dependent payments (Orloff, 1993). Similar to the Keynesian era, the “typical” citizen—around which social policy and care provision was designed—took the form of an independent, able-bodied, working man whose social reproductive needs are taken care of at home, assumedly by a mother or wife (Daly, 2011; Orloff, 1993). What differed, was the insistence that this approach was gender-neutral, which was substantiated through the influx of service industry employment and consequent increase in labor market-dependent benefits for women (Hemerijck, 2018). What became clear was that ‘gender-neutral’ reflected the needs of white, able-bodied, heterosexual men as austerity cuts largely erased the services available to marginalized and disadvantaged communities (Hemerijck, 2018; LeBaron, 2010).

Since the 2008 crisis, financial inequalities have steeply increased and the response chosen by the neoliberal paradigm was to ‘responsibilize’ the workforce by pushing low-income welfare recipients to take up waged labor regardless of its quality (Cain, 2016) and to seek out private care services for any dependents (Brennan et al, 2012). The result of which was the solidification of a phenomenon called the *care deficit*, which has greatly contributed to present day transnational social inequalities (Peterson 2010; LeBaron, 2010; Lutz & Palenga-Möllenbeck, 2012). *Care deficit* refers to the fact that as more women and mothers must enter the waged workforce to survive, their ability to provide at-home care for children, elderly, or other dependents has decreased, creating a greater need for affordable care provision services (Peterson, 2010). This need remains as government assistance has stayed low, prompting the key realization that ‘the re-positioning of women with respect to economic activities does not constitute a reconfiguration of gender coding’ (Peterson, 2010: 279). What appears to be greater economic opportunities for women, when approached with an intersectional lens, can be clearly seen as a reification of racialized socioeconomic hierarchies. Its effects are well illustrated by the increasingly globalized private care market, in which predominantly poor women of color and/or migrant women are precariously employed for long hours and low pay, yet simultaneously expected to fulfill their own care duties at home (Peterson 2010; LeBaron, 2010; Lutz & Palenga-Möllenbeck, 2012). This marketization process served to reinforce and amplify existing inequalities as government mediation withdrew completely from the realm of social disadvantage in an effort to incentivize the poor to take up waged work and exercise choice in regard to private care services (Brennan et al, 2012; Cain, 2016). As the morality of poverty became progressively negative due to the dominant narrative of individual responsibility, workless lone mothers, elderly, and disabled folks—magnified by the presence of a minority racial or ethnic identity—appeared increasingly of low

character, which led to the invisibilization of broader structural inequalities (Cain, 2016). Intersectionality, given its ethos of interconnected and variable oppression, opposes the myth of complete autonomy and individuality and can be understood as an antithesis to the neoliberal welfare ideology.

## **Social Investment**

As discussed above, a significant flaw of both the Keynesian and neoliberal paradigms is the inability to address the differential impacts of life transitions and economic instability for women and the many intersectional identities that can accompany womanhood. In contrast, social investment theory takes a preventative approach and *targets* mothers and children as a means to correct, or balance, inequalities. The approach is characterized by ‘the recognition that poverty was often not a transitory phase and that social mobility was often blocked’ in historically marginalized communities (Jenson, 2015). Thus, early intervention strategies are required to boost human capital and reduce future welfare claims and government expenses (European Commission, 2013; Hemerijck, 2018). This led to investments in early-life and working parent welfare programs that purportedly insure against economic instability through public pre-K, subsidized child care, and dependent payments (Hemerijck, 2018). Indeed, the 2013 social investment strategies of the European Commission reflect an interest in targeting marginalized communities and increasing their human capital via mothers and children, stated most obviously in their recommendation entitled, *Investing in children: breaking the cycle of disadvantage* (European Commision, 2013). Care provision thus arose as an efficient investment due to its multiplied capacity to increase current and future human capital through both freeing-up the mother’s time for paid employment and nurturing the development of a future working citizen (European Commission, 2013; Hemerijck, 2018).

However, this robust and relatively recent focus on intergenerational disadvantage does not take place in a vacuum and carries with it the ideological weight of the still-present neoliberal paradigm. This is shown through social investment theory’s persistent organization around existing binaristic gender norms— exemplified by its primary focus on mothers and their labor activation as opposed to gender liberation and the incorporation of men and fathers into caring roles (Hemerick, 2018; Jenson, 2015). Through prioritizing mothers’ entry into waged labor without challenging gender and sex-based workplace inequalities, discrimination and harassment, social investment theory ignores issues of job

quality and sustainability and neglects to address the ‘double-day’ of the working woman (Brush, 2002). Ultimately, this approach to policy making in regards to care provision shows that while progress has been made in increasing ‘gender awareness’ little has been done for ‘gender equality’ (Jenson, 2015: 540). In other words, this can be understood as a co-optation of the optics of intersectionality through which more social justice-oriented language is being used, but without the substantive interrogation of gender and racial inequalities and their histories which would lead to mass socioeconomic reconfigurations. Therefore, even though social investment theory is most aligned with the principles of intersectionality out of the three paradigms described in this paper, it lacks commitment to the major cultural shift that is required to dismantle systems of oppression.

## **The Culture of Capitalism?**

The persistent challenge to governing with an intersectional approach in the Global North/West is the “transnational white supremacist capitalist patriarchy”- as named by bell hooks 20+ years ago that inevitably leads care policy to be reduced to economic ends. This is best exemplified through the ideal worker model and activation incentives. The tension between culture and policy is well catalogued by many progressive scholars who are at the center of debates concerning how to achieve social change, and whether policy is the right vehicle for it (Browne, 2012; Brush, 2002; Himmelweit & Sigala, 2004). The notion of the ideal worker is a key feature in the socio-cultural expression of capitalism. It is represented by someone who is unencumbered with social reproductive duties at home, finds fulfillment through working, and is committed to career development above all else (Lott & Klenner, 2018). Importantly, men and women experience these expectations differently since fatherhood norms and ideal worker norms are often in alignment, leaving working women to deal with competing messages when they are considering starting a family:

Mothers...are perceived as ideal when their foremost concern is caring for the family. This effectively puts them in a double bind – if they conform to the norm of the ideal mother, they violate the norm of the ideal worker, and vice versa (Lott & Klenner, 2018: 577).

The pressures, both social and physical, to secure a well-paying job and perform according to one’s company culture can be debilitating for women and, if they are new mothers, it forces them to choose between satisfying gender norms or ideal worker norms (Lott & Klenner, 2018). As company policies have shifted in tandem with more generous parental leave policies across Europe, there remains an expectation that for fathers, the leave time and workplace flexibility are primarily a symbolic gesture.

This is due in part to the fact that men still earn more than women on average and are expected to further their careers and provide financial security for their families (Lott & Klenner, 2018). This phenomenon affects women of all races, classes, and abilities since workplace structures continue to privilege the independent, able-bodied and masculine worker and impose normative heterosexual, nuclear family structures on parents/workers via these implicit discriminatory values (Brush, 2002, Cain, 2016).

On the other side of the spectrum is the push for activation, which functions by ‘enabling or compelling people to be active for the purposes of employment, self-actualization and self-sufficiency’ (Daly, 2011: 3). Increased economic productivity has become the primary objective of most social policy; therefore, individuals who do not desire to, or are unable to, obtain waged work materialize as burdens on the state (Daly, 2011; Hemerijck, 2018). The drive toward economic independence tends to then obscure additional social inequalities in the name of efficiency. Meaning that women, people of color, and migrants are feminized and essentialized into caring and service roles through specialization rhetoric and those who are decided to be permanently economically unproductive, such as some elderly and disabled people, see the least amount of assistance from governments (European Commission, 2013; Brush, 2002; Daly, 2011; Hemerijck, 2018). This results in care provision policy that targets poor working-age women as mothers and seeks to ‘empower’ them and their children through employment, but eventually substitutes ‘child welfare for women’s emancipation’ through granting only child-specific aid (Brush, 2002: 175; Daly, 2011). The organization of social policy around financial independence thus communicates that ‘all must learn to generate profit’ and contributes to the overall ‘financialization of human experience’ (Cain, 2016: 492). Elderly and disabled folks whose employment prospects are more complex due to limited physical or intellectual abilities, workplace discrimination, and lack of training are similarly encouraged to find empowerment through waged labor and to rely on informal networks over welfare as much as possible (Brennan et al, 2012; Roets et al, 2020). This, in turn, causes one to question the degree to which social investment prioritizes labor participation over an individual’s wellbeing (Brennan et al, 2012; Roets et al, 2020). Hence, the ‘ideal’ parent or worker dynamic paired with the pressures to maintain employment through activation incentives has led to unavoidable discrepancies between social investment care policies that aim to eradicate social inequalities and the realities of a neoliberal, patriarchal, capitalist society (European Commission, 2013; Lott & Klenner, 2018; Cain, 2016).

## Conclusion

Social policy directed at families and care has progressed in many ways since the 1930s, much of which has been the result of persistent pressure on the part of gender, race, and disability scholars and activists. Intersectionality is crucial to care provision policy and is complementary to social investment theory with its increased efficiency toward allocating welfare expenses and potential for more equitable outcomes. However, the main challenge is that a truly intersectional approach which addresses the gendered and racialized underclass exists in opposition to the larger neoliberal, patriarchal capitalist culture and leaves caretakers in a difficult position when it comes to the decision to have children and/or enter the workforce (Bhambra & Holmwood, 2015; Brush, 2002; Lotte & Klennen, 2012). Therefore, the liberatory potential of intersectionality is compromised by the attachment to economic growth, efficiency, and the desire for high return-on-investment, which infiltrates the state's relationship to even the most marginalized communities. It is evident that as long as women are essentialized into care work, paid or unpaid, and there are no efforts made to equalize care responsibilities among different genders, care work will be undervalued and underfunded— whether that takes the form of low wages through the free-market or the diminishing funds allocated by a government (Brush, 2002; Cain, 2016; Esping-Andersen, 1990; Orloff, 1993). A large scale cultural shift is necessary to persuade governments to take accountability for citizens' wellbeing and intergenerational disadvantage, but in the meantime, one way to combat the culture/policy conflict inherent in social investment theory is to effectively operationalize intersectionality so that it is not neglected in the future creation of care policy (Lombardo & Agustín, 2011). Through creating standardized mechanisms with which to measure and analyze family and care provision policies against intersectional values, policymakers could end the era of vaguely gender-aware policy production and begin to take actionable steps toward achieving gender equality (Pfau-Effinger, 2012).

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