



The Future of Care Work: Towards a Radical Politics of Care in CSCW Research and Practice

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ABSTRACT

Computer-Supported Cooperative Work (CSCW) and Human-Computer Interaction (HCI) have long studied how technology can support material and relational aspects of care work, typically in clinical healthcare settings. More recently, we see increasing recognition of care work such as informal healthcare provision, child and elderly care, organizing and advocacy, domestic work, and service work. However, the COVID-19 pandemic has underscored long-present tensions between the deep necessity and simultaneous devaluation of our care infrastructures. This highlights the need to attend to the broader social, political, and economic systems that shape care work and the emerging technologies being used in care work. This leads us to ask several critical questions: *What counts as care work and why? How is care work (de)valued, (un)supported, or coerced under capitalism and to what end? What narratives drive the push for technology in care work and whom does it benefit? How does care work resist or build resilience against and within oppressive*

systems? And how can we as researchers advocate for and with care and caregivers? In this one-day workshop, we will bring together researchers from academia, industry, and community-based organizations to reflect on these questions and extend conversations on the future of technology for care work.

CCS CONCEPTS

• **Human-centered computing** → **Human computer interaction (HCI)**.

KEYWORDS

care work, social reproduction, feminist political economy

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1 INTRODUCTION

Care work can broadly be defined as the maintenance of people, environments, and communities [11]. CSCW and HCI have long

focused on how this labor is carried out—by, with, and for whom, challenges that arise in the process, and how it might be supported. Much of this work has taken place in the domain of health, looking at nurses, medical teams [10], and more community-based or long-term care, such as community health [13, 31], family caregiving [5, 12, 22, 25], living facilities [4, 17], and the multi-faceted response to disasters [28]. Prior workshops have proposed to expand the sites of care work we study in CSCW and HCI [6, 20, 29, 30]. Park et al. suggest looking at care *networks* in health, past narrow dyads such as patient-clinician [20]. Toombs and colleagues encourage us to look beyond care within formal or siloed contexts, such as the hospital or self-care, to study *everyday care* that is always taking place in communities and how this can inform CSCW [29, 30].

We extend these prior conversations to engage with feminist political economy, which in addition to studying the material and relational aspects of care work, also analyzes how care work reproduces (or resists) larger systems that organize society [2]. Scholars and activists such as Silvia Federici, Dorothy Roberts, and Vandana Shiva have analyzed how the many care infrastructures we are deeply embedded in are foundational to and serve to stabilize capitalism and colonialism [9, 24, 27]. This includes the institution of marriage and the heteronormative nuclear family, state welfare, control of women's reproduction, and the coercion and devaluation of caring labor through gender, race, and colonialism. At the same time, when theorized from the positions of marginalized communities, we find a radical politics of care in which care labor works towards survival (which is itself resistance) and changing the conditions that produce oppression (e.g., [8, 18]). For CSCW and HCI, this body of work implies that the power structures that shape care work in turn shape the political consequences of technology for care work. Wagner, for example, in early work on technology in nursing, describes how even when tools are designed by and for care workers, they are still subverted into management tools, making it necessary to relate “the local, immediate and personal... to more global views and demands” to understand care work [32]. This workshop aims to bring this analysis to care labor beyond formal healthcare as well, looking at unpaid work in the home, domestic work, teaching, service work, wellness work, and more.

This workshop is timely due to the increasing intensity of the technological gaze on care work. CSCW and HCI have engaged with rapid changes in the technologies used in care work—for example, gig work platforms, AI tools, self-tracking, intelligent assistive technologies, and mobile money (e.g., [1, 14–16, 21, 23]). Raval and Pal study the platformization of beauty work in Bengaluru, India, describing how it offers women workers modes of respectable work, while also taking advantage of their vulnerabilities and desire to earn to get them to take on risk [23]. Kaziunas et al. describe how contexts of systemic health disparities require navigating infrastructural brokenness and multiple social worlds, combating neoliberal logics of care as an individualized problem solvable by information transfer or AI tools [16]. More recently, Mateescu and Eubanks discuss how algorithms and surveillance are emerging as a band-aid for chronic under-investment in care, but undermine the autonomy of carers and those being cared for [19]. These studies are just a few examples of how novel technologies are reproducing the logics that devalue caring labor and justify a lack of care infrastructures for marginalized communities.

There is also potential for a more radical politics of care to inform research and design, the complexities of which we aim to further explore in this workshop. For example, Sciannamblo et al. argue that designing with care and “commoning”—or relations based on cooperation, sharing, and responsibility towards one another and the environment—could resist labor precarity [26]. However, care relations and careful acts within capitalist systems and societies are also often contaminated and marked by individual and communal limits and norms that inform the design and distribution of care in sociotechnical systems. For example, commoning also creates exclusions—Bidwell finds that technology configurations in rural community-based telecommunications marginalize the tempo, spatiality, and relations in women's commoning work [3]. Not all care is automatically radical. It is thus vital to recognize the contexts and contours of care-giving in order to realize alternative politics.

An analysis of the politics of care work requires practice in asking critical questions of care. It also requires drawing connections between different sites of care work that we study. It would also benefit from a transnational perspective as capitalism works along with colonialism, imperialism, and other forms of domination that shape ideology, culture, and flows of labor. Attending to feminist political economy produces an understanding of complex structural problems that, for many, raise the question of what we can do as researchers to support and advocate for care workers. Thus, this workshop aims to bring together researchers studying care work globally, to draw connections to critical perspectives on care and advocate for and imagine a just future of care work.

2 WORKSHOP THEMES

We will explore the following three related themes:

Critical Perspectives on Care Work: This theme will encourage participants to draw connections between one another's work and feminist political economy. Relevant reflections include: What counts as care work? How do the cultural meanings, forms of control over, and economic and political contributions of care work change depending on the context? How has/does technology fit into these meanings and mechanisms? What methods are useful for comprehensively answering these questions and how can researchers and designers enable a critical reflection on care work?

Design For and With a Radical Politics of Care: The goal of this theme is to understand the role that design can play to meaningfully support advocacy for and by caregivers, sociopolitical means of valuing care work, and care work that resists systems of oppression. We will ask: What are the continuities between participatory research and design and other design justice agendas (e.g., [7]) and care-focused research? How can we learn from a radical politics of care rooted in, for example, mutual aid or commoning? What is the potential for speculative design as a way of understanding how to design with a radical politics of care?

The Future of Care Work: Through this theme, we will explore forthcoming trends in the use of technology in care work, taking a broad view of what counts as work. We will discuss how this positionality could inform future of work discourse in CSCW and HCI, including avenues for policy change and workplace organizing. This theme also offers the opportunity to consider on a meta-level the ways that researchers do (often unpaid) care work in

research and within our workplaces to create safer environments, and introspect on doing more going forward.

3 WORKSHOP LOGISTICS

3.1 Online Spaces

The workshop will be entirely virtual. We will engage over a video-conference platform such as Zoom, but will offer participants multiple modes of interaction to ease collaboration and allow for conversations before and beyond the workshop. A **website** will serve as the main information hub for the workshop, including the workshop proposal, submission instructions and deadlines, workshop agenda, and relevant media on the topics of discussion. We will create a **Discord server** to enable one-on-one chats and parallel discussions before, during, and after the workshop. This will also be used as an additional channel to coordinate workshop activities asynchronously. We will also set up a **Miro Board** or similar to enable group activities. It will be used to help participants explore and annotate workshop submissions, form groups based on shared interests, and record notes during group conversations. Throughout these activities, we will have designated note-takers to support accessibility. Finally, we will use a **video-conferencing platform** such as Zoom to enable synchronous communication. During the workshop, it will support conversations, information delivery, and creation of breakout groups. Before and after the workshop, we will use the platform to arrange coffee hours for socializing.

3.2 Recruiting Participants

We will recruit 20-25 participants (not including the organizers) broadly interested in care work and workers, advocacy and the practice of care in their own work, and the future of care work. We believe this would be of interest to many researchers and practitioners working in a range of domains of care work, as listed above. We will publicize through online channels like social media and mailing lists. We will reach out to researchers and practitioners as well as regional professional groups to reach diverse audiences. Interested attendees will be asked to submit a two-page position paper or other format that describes their ongoing, past, or planned research around care work. These may advocate for, problematize, or extend critical care perspectives in CSCW.

4 WORKSHOP STRUCTURE

4.1 Pre-workshop

The pre-workshop activities will be focused on socializing and creating shared starting points for discussion. We will hold two coffee hours, share two reflection prompts on Discord, and share a manageable list of recommended podcasts, zines, or readings on care to facilitate reflection. We will also share the accepted submissions on Miro and the website which will be grouped either based on domain or workshop theme. During the coffee hours, participants will be invited to casually browse the submissions and share additional discussion points. They will also be encouraged to annotate submissions that they resonate with, would like to engage more deeply with, or have questions about. We will also solicit participant bios so that participants will have the opportunity to share an interesting intro before the workshop.

4.2 Workshop

The four-hour workshop will take place on Zoom as follows:

Opening and introductions (1 hour): We will first introduce the workshop motivation, agenda, and the organizers. This will be followed by speed dating, where participants will be put into breakout rooms to get to know each other, their research, and their expectations from the workshop. We will then have time to review the workshop submissions and any comments from the pre-workshop activities. We will form groups based on the themes that emerge from this process. Organizers will facilitate this process by putting together initial groups based on the submissions.

Breakout groups (1 hour 50 minutes): The groups will be organized into breakout rooms for most of the workshop, bookended by two 10-minute breaks. At least one organizer will join each of these groups and serve as facilitator and note-taker to record the conversation on Miro. The groups will be provided discussion points based on workshop conversations and themes to stimulate conversation. They will also be asked to develop plans of action for future work in this space at a personal and collective level.

Whole group discussion and closing remarks (1 hour 10 minutes): The groups will share their discussion points, also naming future questions to explore. Other groups will be encouraged to ask questions to spark further conversations beyond the workshop.

4.3 Post-Workshop

The discussions taking place during the workshop will be documented on Miro. These notes will be organized and shared after the workshop with participants, along with next steps that are identified during the workshop. We will summarize and share the discussion with the broader CSCW community through blog posts, Twitter, the website, and potentially an article in Interactions magazine. We will also keep the Discord space available and open it to attendees of prior workshops on care to create a larger community.

5 ORGANIZERS

Naveena Karusala is a PhD student at the University of Washington. Her work focuses on why and how technologies to support caregiving in the home are being used to shape the gendered division of labor around maternal and newborn health in rural India.

Azra Ismail is a PhD student at Georgia Tech. Her research focuses on women frontline health workers in urban India who operate on the margins of the government healthcare system, and examines how technology might recognize and legitimize (rather than exploit) their knowledges and underpaid care work.

Karthik Bhat is a PhD student at Georgia Tech. He works on designing technologies that facilitate constructive, and socio-culturally situated engagement with health data in resource- and infrastructure-constrained contexts.

Aakash Gautam is a PhD student at Virginia Tech. A part of his research examines the complexities surrounding care practices in anti-trafficking organizations in Nepal.

Sachin Pendse is a PhD student at Georgia Tech. His work focuses on how our identities influence how we express and experience our mental health, towards designing safer and more inclusive (technology-mediated) mental health spaces.

Neha Kumar is an associate professor at Georgia Tech. She conducts research at the intersection of human-centered computing and global development; matters of care are central to this work.

Richard Anderson is a professor at the University of Washington. He works in computing and global development, focusing on on healthcare and previously, education.

Madeline Balaam is an Associate Professor at KTH Royal Institute of Technology. She designs interactions and interaction techniques that invoke new forms of care for the body and bodily processes. Her work is grounded in feminist theories.

Shaowen Bardzell is a professor at Pennsylvania State University. Her research explores the contributions of design, feminism, and social science to support technology's role in social change. She is co-author of *Humanistic HCI* (Morgan Claypool, 2015) and co-editor of *Critical Theory and Interaction Design* (MIT Press, 2018).

Nicola Bidwell has worked with rural dwellers and indigenous people for nearly 20 years, particularly in Africa. Recent work studies the social and gender impacts of community networks, and predictive logics in the Kalahari for AI design. She is an adjunct professor at the International University of Management, Namibia.

Melissa Densmore is an associate professor at the University of Cape Town, South Africa. Her research explores community-based innovation with bandwidth-constrained users. Her work in maternal and child health seeks to empower mothers, fathers, and other caregivers as co-designers of appropriate digital interventions.

Elizabeth Kaziunas is Research Lead of the Algorithmic Care Project at AI Now, where she studies social impacts of AI in healthcare. Her work examines social/organizational contexts of health information systems and lived experiences of health datafication.

Anne Marie Piper is an associate professor at the University of California, Irvine. Her work aims to create more equitable and inclusive digital experiences for people of all ages and abilities.

Noopur Raval is a postdoctoral researcher at New York University. She studies the histories and current implications of emergent technologies with a focus on the Global South.

Pushpendra Singh is a professor at IIT-Delhi. His research is at the intersection of mobile computing and HCI with a focus on technologies for low-resource settings, especially in public health.

Austin Toombs is an Assistant Professor at Purdue University. He studies the impact that digital technologies have on how communities develop, are maintained, and foster (or not) strong interpersonal relationships between community participants.

Nervo Verdezoto is a Lecturer at Cardiff University. His work has investigated invisible care work in the home, hospital, and community health. His recent work explores how care infrastructures and sociotechnical and cultural practices influence maternal and child health in the Global South.

Ding Wang is a senior HCI researcher from Google AI India and People AI Research team. Her research focuses on the practices, processes and organisations of work (e.g. the collection, annotation and documentation) on data that is essential to ML and AI systems.

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