



## Gender and assistance: historical and conceptual considerations regarding assistance practices and policies\*

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### Abstract

The article offers some theoretical and historical reflections on the concept of gender as it relates to the notion of assistance. Explores the political dimensions of both concepts and problematizes the dichotomy between the gender-marked realms of the political and the pre-political, a dichotomy that has greatly influenced modern political theory and thought. It examines the modern state's care practices and the transformations in assistance which occurred within the charitable and assistance organizations that took shape in parallel and in consonance with this state action.

Keywords: gender; assistance; politics; care; Brazil.

Much to the contrary of what has been said, woman has always been and will always be the holy soul that guides men in the great destiny of the fatherland and especially in matters of assistance, where their knowledge is more refined than that of men. Much has been said about woman's role in organized societies, but everything that has been said about her is little compared to how great, truly very great, she shall be in the future.

*Otelo Renzo Turi* (1946, p.12).

Social assistance is a science that demands of those dedicated to it their perseverance, work, dedication, and moral superiority.

*Boletim da Legião Brasileira de Assistência* (1946, p.1.)

Founded on August 28, 1942, the Legião Brasileira de Assistência (Brazilian Assistance Legion/LBA) had a long life and represented a milestone in the organization of social assistance in Brazil. Its first efforts focused on the needs of the families of soldiers fighting in Europe, following Brazil's entry into World War II. The organization's very name in fact has a military connotation. First Lady Darcy Vargas gathered women from the country's most well-to-do classes to form a legion of women fighters who would never see the battlefields of Europe but would nevertheless serve as veritable soldiers in Brazil, doing what they were able to: caring for the needy, above all the families of recruits. Soon after the war ended, the LBA newsletter explained that in peacetime the organization would provide social assistance in collaboration with government agencies and private institutions, covering a broad gamut of services (O programa..., 1945, p.6). Structurally speaking, the LBA was organized along the lines of a super-ministry or super-department, with services ranging from social assistance to healthcare, education to housing, social research to publicity – in other words, it was active on a number of fronts, not incidentally priorities under the Vargas administration.<sup>1</sup>

The organization of the LBA and its specialization in social assistance illustrate how the Estado Novo laid the foundations for exercising what we might call a feminine citizenship based on women's social usefulness, thereby extending their maternal role in moral terms to society. This quite conservative strain of citizenship was also found in other political contexts, like Salazar's Estado Novo, Fascist Italy, and Francoist Spain. These regimes enjoyed substantial support from women organized in associations much like the LBA, grounded on the idea that women should participate politically using their specific skills for social intervention, that is, their naturally endowed ability to nurture.

The creation of the LBA was contemporaneous with the organization of social assistance rooted in the political rationale of welfare states and based on the scientific research norms, strategies for action, and human resource training approaches employed by Western countries. This new political scenario is the point of departure for this article, which explores the links connecting three distinct words, both theoretically and historically: state, assistance, and women. In principle, these words have different historical origins

and could hardly be aligned, as I'm proposing here; after all, they belong to distinct lexicons: the term state belongs to the political lexicon, while women and assistance form a duo that is associated with other moments of life, that is, reproduction and care – outside the bounds of politics. However, these words and the agents that lend them substance meet, mix, and mutually sustain and transform themselves over time along multiple, complex pathways.

Taking historical and philosophical feminist scholarship on gender and politics as my point of reference, my analysis articulates the category of gender with historical experiences in care, in the intent of arriving at an understanding of the links between state, assistance, and public action by women. I am including assistance as part of a set of activities and values that Joan Tronto (1996, p.142) has called care: “caring [can] be viewed as a species activity that includes everything that we do to maintain, continue, and repair our ‘world’ so that we can live in it as well as possible”. In this article I am not adopting a differentialist or essentialist view of the concept of care. If care-related activities have historically been associated with women and therefore gender-marked, we must take a step beyond that, as Tronto (1996) has underscored. This step is both hermeneutical and theoretical. Analysis should not serve to second the dichotomous thinking that pits politics against care, public against private, the ethic of justice against the ethic of care, or masculine against feminine. On the theoretical level, we must understand the role that gender plays in defining human activities and their social and moral status. Likewise, gender is a cognitive category that sanctions places, positions, status, privileges, and authority in the construction of power relations and social hierarchies. As a category, it is key in establishing symbolic values and creating binary oppositions between spaces, bodies, and different human actions. The gender approach pushes us to construct more comprehensive, complex, and plural interpretations of politics, object of this article; this examination of the discourses and practices of assistance ultimately leads me to propose a resignification of both terms, care and politics.

### **From moral duty to assistance policy under the modern state**

Caring for those who for a wide variety of reasons need help and attention entails a range of distinct activities: taking care of children, the infirm, and the elderly, or, more usually, caring for people classified as poor and for those who are not minimally able to survive and must depend upon others to do so. These activities were long associated with the realm of the household and with patriarchal and slave/master power, at least until modernity.

According to Aristotle's *Politics*, home and family – as determined by the natural order of things – exist to provide for our more immediate material needs, like food, childcare, and care for the sick and elderly; thus they fulfill their natural purpose, which is the reproduction of life. In his differentialist, hierarchical view of the political order, Aristotle argues that family constitutes the first natural order of power, based on the principle of men's preeminence and superiority. Persons involved with care are not citizens, according to Aristotle, but non-political subjects, like women and slaves. According to *Politics* – a

classic of political thinking even in modernity – care activities are secondary and even inferior to political action because they are limited to technique and to dealing with bodies and matter; they entail relations of dependence and do not generate autonomy. In the Aristotelian view of the political order, care activities are restricted by circumstances and are quite localized in time and space, and only those who manage to transcend these limitations can participate in the dynamic, lofty sphere of politics. From this viewpoint, the world of politics stands in stark contrast with the world of specificities, needs, and care, leaving a deep ontological and functional dichotomy between both, marked by social condition and gender. In Aristotelian thought about the differences between the patriarchal world of family and the political world of citizens, gender is a key category. Within the family, power belongs to the man – husband, lord, father – while it is here that women play their role in the reproduction and sustenance of life. Women are expected to comply with the dictates of nature, thereby remaining confined to this space and to the limits of their duties. The dichotomy between politics and pre-politics (family) in Aristotelian political thought means that these two worlds are considered interdependent spheres, closed to the possibility of interconnection because the world of politics comprises free and equal people at a remove from any interference by bodily needs or by the unfortunate social conditions of inferior people.

This dichotomous view that contrasts politics with care long held sway in political thought, at least until the Christian notion of charity was introduced. As underscored by Tronto (1996) and Geremek (1995), neither Christian authors nor followers of the new religion saw poverty and its attendant forms of suffering as a misfortune but rather as a sign of salvation – after all, the son of God had dwelled among the less fortunate and had defended humility and the poor. The ascetic, monastic traditions of Christianity held poverty and caring for the neediest in high regard, but Christians interpreted these practices from an angle that differed from the Aristotelian opposition between politics and care, that is, from the angle of religious and spiritual experience. Caring for the needy thus occupied a realm quite different from that defined by Aristotle. The notion of care became associated with compassion for those who truly suffer, whether the cause is wretchedness, illness, or any other inability to care for oneself. In the ideological and moral framework of Christianity, giving alms, sustenance, or even one's time to care for the ill, the abandoned, or the persecuted became a lofty spiritual virtue. According to Tronto (1996), such actions were seen as rising above worldly values and goals, and thus above politics, which was usually concerned with the immediate and sometimes not very Christian interests of the 'earthly city.' Those who sought the true joy of salvation and their share in the blessings of the 'city of God' possessed the talent of charity. The care they offered those who were suffering – the poor, the infirm, children, women, the persecuted – did not make them either subjects of a realm prior to politics or political subjects per se; rather, the charity and compassion they showed sufferers and the needy set them apart, in a place belonging neither to the realm of apolitical exclusion in the home nor to the political arena of equals. Their place lay above these; it was defined by talents, faith, and the spiritual motivation of salvation.

Seen as an activity that was either pre-political or above politics, care has always been associated with certain social positions and positions of power. In the Aristotelian dichotomy, care had to do with the reproduction of life and thus belonged to an essentially female world. Caring for, assisting, providing for, helping, and protecting were all activities that could only be performed by subjects who were closer to the lowly, be the latter lowly by condition or by temporary circumstances. In the social order as conceived by Aristotle and his Western readers, women, owing to their natural condition, were linked to the world of matter and its vicissitudes and thus excluded from politics by their immanent inferiority, left to occupy a place outside politics and public affairs, a place reserved for care.

In Christian *ethos*, gender was not at first so relevant or even defining when it came to care activities. Since care was not associated with politics but with religious life and its spiritual dimension, both men and women could possess and develop the talent of charity. In hagiographies, we see how the men and women who walked the path to sainthood did so not only through martyrdom but also by making a preferential option for the poor and by helping the needy and misfortunate. Starting in the twelfth and thirteenth centuries, mendicant orders lent greater visibility to the question of renouncing the world of wealth and sin. The biographies of female saints thus depict them as women who loved poverty (even though some had been members of the nobility) and devoted themselves to aiding the needy. Hagiography and mariolatry, which also spread through the medieval Christian world, strengthened this connection between charity and femininity. Among the many titles given Mary, mother of Jesus, we find lady of charity, of aid, of the needy, and of the afflicted – along with many other names that reflect her willingness to care for her many children. Hagiographic models certainly played a vital role in the education of noble women and in constructing a notion of what was expected of them not only as women but also as the daughters and wives of great lords, who should display this Christian virtue-action, that is, charity (Duby, 1989).

Subsequent to the union of the Aristotelian and Christian concepts, care acquired a double meaning in modernity. On the one hand, it was still associated with the sphere of the home and with female management. On the other, following the sixteenth-century religious reforms and what we could call a spiritual revival that commenced among both Protestants and Catholics in the seventeenth and eighteenth centuries, charity not only represented a most praiseworthy Christian virtue but was also associated with moral worthiness, in the case of both men and women. Nevertheless, it is noteworthy that the initial distinction between the realm of care and of politics remained nearly unchanged, reinforcing gender marks, because even if Catholics and Protestants did not assign care exclusively to women, women were always at the fore in both actual daily practice and in the establishment of charitable institutions; likewise, charity was just as important as virtue and modesty in defining female qualities (Davis, 1990, 1997).

We should also bear in mind that when the aristocracy underwent a reconfiguration in modern Europe, especially in countries like England and France, the traditional notion that the privileged classes should support the needy through almsgiving or by donating money to build hospitals and orphanages was fortified. According to this paternalist tradition, aristocratic women were expected to play the role of protectors and providers of

aid to the lowly, as well as the role of intermediaries between their powerful fathers, husbands, sons, or brothers and the subaltern.

Despite these subtle changes in the concept of care from the view of the Christian *ethos* of charity, there was no shift in the dichotomy between the realms of care and of politics, just as there was no shift in the places assigned the genders within these two realms. Power and action in the world of the Republic were the attributions of men, while care was the attribution of women, starting with care for those closest, like children, the elderly, and the infirm inside the family nucleus. In compliance with the norms of Christian life, women should also look out for those who deserved their aid, despite distance between social classes.

An important, double-faceted change transformed the Aristotelian-Christian view of care, inaugurating what we could call the political problematization of care. This was first manifested in the organization of institutions and the drafting of laws meant to ameliorate the harsh effects of urban impoverishment that ensued from the introduction of capitalist production and new forms of labor. This new economic organization was a corollary of the formation and strengthening of modern states around the concepts of political sovereignty, centralization, and the personalization of political power. The second sign of change lies in the formulation of political thought or, more precisely, of political philosophy, which defined the Otherness of the state and in so doing expanded its attributions, including those in the realm of care. In *Leviathan*, Hobbes leaves no doubts about the fact that this matter is political:

And whereas many men, by accident unavoidable, become unable to maintain themselves by their labour, they ought not to be left to the Charity of private persons, but to be provided for, as far-forth as the necessities of Nature require, by the Lawes of the Commonwealth. For as it is Uncharitableness in any man neglect the impotent, so it is in the Sovereign of a Commonwealth to expose them to the hazard of such uncertain Charity.<sup>2</sup>

Christian rhetoric notwithstanding, in this passage Hobbes calls attention to the political dimension of assistance, or care for the needy. In his homeland of England as in other European nations, the state began organizing the principles of what we could call public assistance, with varying degrees of direct presence. Since the sixteenth-century drafting of the Poor Laws, social assistance had been emerging in England and other European countries in the form of hospitals and institutions to protect invalids, the sick, and orphans. More precisely, the modern state did not take it upon itself to organize the work that was in the hands of private charities, as Hobbes points out, but it did begin to intervene, even if only in localized or sporadic fashion, in a sphere that had previously lain outside politics (Geremek, 1995; Himmelfarb, 1988).

It must be emphasized that this intervention by modern states in the field of charity or care for the needy differed greatly from what would later become public assistance policy. Within the context of the solidification of modern states, the paternalistic, Christian *ethos* of charity was reiterated, now led by the sovereign and his ministers. Despite limitations, it is remarkable how philosophical texts written in that context began to introduce into the political lexicon, even if only in localized fashion, words and activities that had previously been absent from both political vocabulary and political practice.

This signaled a significant change, which commenced in the West and was to have substantial impact on gender politics. Despite the persistent dichotomy between the spheres of care and politics, the subjects of both began interacting more often. Perhaps even more pertinent was the resignification of care when it became part of the political agenda of liberal states. Inaugurated in the late nineteenth century in Europe and the United States, and in some Latin American countries as well, this process opened up new possibilities for women, not only bringing their practices and values into the sphere of politics but also affording them the chance to participate professionally through the enforcement of new assistance policies.

### **From the gender of assistance to gender politics**

The paternalist tradition governing assistance to the poor through the mid-eighteenth century saw both men and women taking part in charity efforts. Yet the women historians who have studied the ideology of domesticity and its correlate configuration in gender relations have shown that women were the ones who began devoting themselves more heavily to charitable activities, in consonance with the ideological values of gender in the middle classes, in both Europe and the United States (Elliott, 2002; Smith, 1981; Prochaska, 1980; Poovey, 1984; Perrot, 1998).

In England and France particularly, the conjoining of religious and philosophical discourse resulted in a utilitarian moral definition of women. If we turn to the main educational texts published as of the late seventeenth century and throughout the eighteenth century – a long tradition, of which Locke, Fénelon, Madame de Sevigne and Rousseau are some eminent representatives – we will observe the unfolding of a model of women that represents neither the ‘genteel’ woman eager to enter the world of letters and philosophy nor the aristocrat from the superficial world of luxury and appearances but the maternal figure who personally sees to raising and educating her children, without ever forgetting her Christian duty towards the weak and needy. This educational, advice literature ushered in the maternal empire that was to have a long and contradictory existence.

So women’s place had been well defined: it was in the home, as loving wives, devoted mothers, and benevolent ladies. Their natural, moral qualities equipped them for maternity and domestic affairs, but from both a religious and a moral-philosophical point of view, they were also expected to place these skills at the service of others, those who were suffering and in need of care. According to a meticulous analysis by Elliott (2002), the ideology of domesticity constrained female ambition and bridled women’s thirst for knowledge, the right to express themselves, and a role in the public world, while concomitantly suggesting it might be possible to take part in the world precisely from the place that had always anchored women outside of public and political life: the place of care. A good share of women from the elites began devoting themselves to this socially sanctioned work, through the religious discourse of charity or the new secular discourse of philanthropy, formulated in the context of the Enlightenment.

At first, not-for-profit work unconnected with need or with survival was not marked by gender, and male forays into charity and philanthropy are well known, especially on

the part of successful middle-class businessmen who won renown for their benevolence (Elliott, 2002). However, as women began to participate ever more actively in charitable work and as it grew more closely associated with woman's gendered place as defined by the ideology of domesticity, the link between philanthropy and femininity steadily tightened until the former eventually came to be seen as a female activity.<sup>3</sup> So it was on the basis of gender policy which excluded women from the public world that assistance became defined as female work that did not jeopardize a woman's morality or virtue.

This feminization of care and assistance for others developed into part of the middle-class imagination in the mid-eighteenth century, a tendency that literature of a moral nature as well as novels helped spread. Many female characters in novels devoted themselves to philanthropy and were generally described as women of lofty morals, sympathetic to the suffering of others, benevolent and empathetic. They were examples of how women could and even should concern themselves with others, perhaps thus finding the happiness that eluded them in their relationships. This female construction of assistance and care was also an expansion of the notion of maternity, including single women who were not mothers. So even if women played ever more public roles through philanthropy, this work was not antithetical to the ideology of domesticity, because it was grounded on the notion that this activity complemented maternity and those qualities that had been deemed feminine, extending them into the world beyond home and family. In this regard, it is worth noting how the female professions occupied by educated middle-class women came to be defined in areas consistent with this gendered construction of assistance, like nursing, medicine, teaching, and, later, social work.

Defining the gender of assistance was not a process devoid of contradictions. As a political procedure inherent to the development of the ideology of domesticity, the separation of public and private harbored a conflict that many nineteenth-century observers wrote about: the contradiction between the place women should occupy in the private sphere and their participation in the public world through philanthropic work (a trend that was on the rise albeit not in linear fashion). If many advocates of feminine philanthropy saw nothing incongruous in this two-way movement, some of the more conservative feared that women's constant exposure at assistance institutions, the dwellings of the poor, in the streets, at public events, and in the anterooms of politicians and ministerial offices could be prejudicial to the decency, morality, and even health of such fragile, sensitive beings. Elliott (2002) remarks that writers did not fail to feature this contradiction in their novels, especially Dickens, a social observer. Female characters who worked in philanthropy began to be depicted in pejorative, stereotyped terms, like the impertinent, authoritarian, unfeminine spinster who stuck her nose into the lives and homes of the poor. This inversion challenged the maternal ideal of the woman who worked in philanthropy and made it clear that women should not use the good purposes of philanthropy to cross the lines between public and private. Care was required and necessary, but clear lines had to be drawn, putting limits on just how far outside the home this shift could take women.

Despite such conservative, derogatory reactions, women did not retreat. Many embarked on another movement that carried them definitively into the public and even political

world. Organized on both sides of the Atlantic, the reform movement mobilized women from a broad scope of ideological bents, from Catholic and Protestant conservatism to socialism and feminism. There are a variety of reasons why so many women became involved with the reform movement in European countries and the United States. The early nineteenth century was marked by temperance campaigns, women's participation in the abolitionist movement (especially in England and the United States), and wide-ranging forms of female participation in what we could call social issues.

The growth of cities and factories drew increasing numbers from the countryside and smaller towns, a phenomenon in turn tied to a sharp rise in poverty and its attendant ills, triggering social criticism. It was precisely in the nineteenth century that the problems deriving from capitalist society became the object of analysis within social thought. In this endeavor to understand reality and intervene in it, women participated in the sphere of social issues through their recognized 'natural talent' to provide assistance to the needy (Himmelfarb, 1988; Koven, Michel, 1990; Elliott, 2002; Perrot, 1998).

Until quite recently, feminist historians paid little heed to women's participation in philanthropy because they understood it as an example of the mechanisms that serve to reproduce the ideology that public and private life belong to separate realms, as well as the notion that women are subaltern and passive. Many women doing philanthropic work certainly defended the idea that they were naturally different from men and that this difference determined their places in society. Nor can we forget that many of these women agreed with this separation of place and also that boundaries had to be established for the activities of men as well as women. Ergo, if women could not and should not take part in the public world through politics and business, men could and should not occupy themselves with affairs of the home and of care. The notion of a physical and intellectual as well as moral difference between men and women underlies this dichotomous thinking, a point constantly driven home by reform women and women engaged in philanthropy.

In this female reshaping of the differentialist discourse present in philosophy and medicine since the eighteenth century, their sensitivity and maternity reinforced the notion that women possess greater moral stature. This view of female morality explains why women believed they were better equipped not only to gestate and bear children but also to provide care. For many reformers, the meaning of care grew ever broader, encompassing such work as participation in abolition movements, the fight against child labor in mines and factories, support for single mothers and working women, and the creation of various assistance organizations.

As women grew active in the reform movement and they became prized for their morality, one political and ideological outgrowth of philanthropy came to have sizeable significance in the drafting of gender policies by liberal states, starting in the latter half of the nineteenth century and especially at the dawn of the twentieth: maternalism. This development did not come about in the same way or at the same time in all Western countries. Nor did the women who took part in assistance practices grounded in maternalism share the exact same political ideals and moral values.

Here I am adopting the concept of maternalism employed by Koven and Michel (1990), a term used by female historians who study women's social and political participation

from the viewpoint of the moral and social defense of maternity and the glorification of maternal qualities related to care for others (not only children) and to assistance: “Maternalism always operated on two levels: it extolled the private virtues of domesticity while simultaneously legitimating women’s public relationships to politics and the state, to community, workplace, and marketplace. In practice, maternalist ideologies often challenged the constructed boundaries between public and private, women and men, state and civil society” (p.1081).

But why was maternity the road that effectively led many women to challenge such well-guarded boundaries between public and private? Why was the defense of maternity and of its moral value one of the paths by which women entered the public world, the world of politics, and the world of professionalization, awakening in some a feminist consciousness? To answer these paradoxical questions, we must understand why maternity gained such visibility as a social issue starting in the nineteenth century.

As of the 1830s and 1840s, both fictional narratives and official reports published in England showed that the extreme poverty mounting in popular neighborhoods of cities like Manchester and London was hitting women and children the hardest. Statistics on child mortality started to be released in England during the Industrial Revolution, as well as in France and Germany. With the intent of warning authorities about the problem, physicians and philanthropists were the first to make use of these data, incomplete yet very revealing of the effects of poverty.

Looking at the whole of medical texts published between the 1850s and 1870s, particularly in France, we realize how much this social issue was transformed into a moral and political one. The high infant mortality rates in Europe’s industrialized countries were basically a reflection of poverty. Studies by doctors highlighted the housing situation and child nutrition as the main causes of death and disease rates. Yet rare were those who sought more comprehensive solutions to the matter, questioning, for example, the organization of labor relations or, more specifically, family relations. On the contrary, physicians started blaming mothers for infant deaths, pronouncing a moralist discourse about the value of breastfeeding while ignoring these women’s need to work. The doctors rarely addressed the question of female labor and when they did, it was to condemn it, as if it were a matter of individual choice and not of women being forced into factories by economic pressure.

As Alexandra Kollontai (1916) made so clear in one of the most thoroughgoing early twentieth-century analyses of maternity, those engaged in this debate had an outdated, anachronistic view of the family, since in capitalist society the family was no longer a productive unit where all activities entailing childcare and care of the elderly, infirm, and incapacitated were performed without greater ado or hardship. With the profound changes generated by the Industrial Revolution and capitalist production, all family members had been brought into the world of wage labor, and this change had a direct effect on women, who for the first time ever had to find individual solutions for childcare while they continued to work, without any resources or any type of help.

Authors like Kollontai who were engaged in the defense of women’s and workers’ rights pointed up the enormous hardships that laboring women faced, since most had to

leave their children alone or had to put the youngest with wet nurses. What physicians and others involved with the matter failed to or did not want to see, according to Kollontai (1916), was that raising and educating children could no longer remain the sole responsibility of the family and women but had to be assumed by society and the state. The government had to be more active, intervening in the relations between capital and labor in order to protect working mothers and children – for example, by offering maternity allowances, creating institutions that provided milk and food for mothers and children, and establishing daycare facilities and shelters.

A number of those taking part in the debate defended this idea, or variations thereof. The central question in Kollontai's text and other writings by female reformers of the late nineteenth and early twentieth centuries is that protecting maternity and childhood could no longer be confined to the sphere of the family and dealt with as a private matter. Motherhood and childcare were matters of public interest and a woman's right; therefore, they would be treated as such, that is, protected by the state.

While physicians, women activists, labor organizations, philanthropists, and religious figures had different focuses, the issue of maternity and childhood gained in both visibility and importance starting in the 1870s, when it found its way onto the agendas at medical association meetings and labor and women's congresses. The issue also touched a chord with a few representatives of the employer class, who introduced certain protective measures, like compensation funds that provided family allowances; however, these measures were meant to supplement the wages of the heads of large families, indeed as a way of ensuring that the worker's wife would remain in the home (Beltrão, 1962, p.129-131).

As ties between the issues of maternity/childhood and women's labor grew more apparent and irreversible, the more conventional, conservative ideas were supplanted by others of a reform nature, giving rise to the first laws to protect women's and child labor as well as maternity. Some representatives of Catholic thought, however, defended the need for men to receive higher wages (the family wage) so they could fulfill their role as family provider, keeping their wives from leaving home to work. Perhaps one of the texts that best synthesizes these ideas that opposed women's work with the intent of protecting the family and children is German Bishop Wilhelm Emmanuel von Ketteler's *The Labor Question and Christianity* (1864), a precursor to the ideas later expressed in *Rerum Novarum* (Van Gestel, 1956, p.85). Worker grievances included a ban on child labor and on women's work in factories, "especially mothers of families. Religion ordains that a mother should spend her day at home fulfilling her holy, lofty mission towards her husband and children" (p.85).<sup>4</sup>

Ideas about the dichotomous roles played by each gender persisted in this debate. Even among representatives of non-Catholic worker organizations, it was a challenge to broach the issue of female labor and maternity in social terms, as Kollontai (1916) explained in her comments on the first European worker congresses, which began in the 1860s. According to this author, while labor leaders debated whether working mothers should be offered protection, the measures they proposed lacked solid foundations and were generally contradictory, therefore not representing workable solutions.

The bibliography on welfare and the shaping of policies to protect maternity and childhood reveals that viable arguments and solutions were advanced by physicians and

women activists, both feminist and non-feminist. Hygienists, obstetricians, and pediatricians used statistics on infant mortality as their main argument, defending children's right to be near their mothers, who could care for, nurse, and educate them. For physicians, the question had very serious moral and political implications, thereby requiring cautious interference, timid as it might have to be in order not to threaten domestic privacy or authority within the family. Physicians constituted the most conservative reform group, although some were quite daring in their humanitarianism, espousing measures like the establishment of maternity shelters for women who needed to hide their pregnancies, investigations of paternity, maternity insurance for single mothers, and an end to the distinction between legitimate and illegitimate children for the purposes of legal protection.<sup>5</sup>

Another group quite active in drafting laws and policies to protect maternity and childhood were activist women. In addition to the aforementioned women's organizations that grew out of religious and lay philanthropic work, another form of activism sprung from the women's rights movement. Generally comprised of educated, well-informed, middle-class women, this group also advanced the notion that women and maternity had claim to a special moral stature. But its representatives went beyond moral discourse, politicizing maternity by affirming that it was not simply a natural function, limited to the sustenance of family, but rather one of the most important social functions, demanding of women much dedication, time, and work. Since maternity had a social purpose, then it also had rights, and these the state should guarantee.

It should be noted that this type of political activism that valued maternity also stemmed from a differentialist view of gender. Although women should develop their talents and skills and exercise their rights as citizens, it was not a matter of making women equal to men but rather of protecting them in their differences; maternity and housework should not be considered inferior to other activities or bereft of rights. Gisela Bock (1995, p.453) explains that these women "did not underestimate the gender difference but insisted on a woman's right to be different, a position seen as expressing a woman's pride, power, and self-affirmation and not her lack of power or her resignation."

Maternalist political action consisted of activities in organizations, the development of programs among poor women, and participation in international meetings and congresses where women exchanged ideas and learned about the forms of political action used by other women and organizations. In most European countries that adopted the earliest legal protection measures, the proposals put forward by women's movements were at least partially adopted.

In analyzing the first laws to protect workers and specific social groups like the infirm, elderly, incapacitated, and mothers and children, it is important to note that the actions that became known as social policies – related to education, housing, sanitation, health, welfare, and social assistance – were, even if sporadically and partially, formulated and implemented by private groups and organizations of the most varied political and ideological stripes. Taken as a whole, they represent social welfare thought, ranging from religious-based philanthropy and humanitarian and reform activism to ideas of socialist inspiration. The common thread running through them all was an awareness of the

social question, the need to be responsible for the weak and powerless, and the need to improve or even transform the realities of those concerned.

This clarification is necessary because these welfare policies were not necessarily a product of new arrangements in the relations between state and society or even of the welfare state. To the contrary, the policies were advocated and enforced by very different organizations, at times working alone and at other times in collaboration with other organizations or even in collaboration with local authorities. Perhaps this explains why the first welfare state policies to be adopted were those already implemented by civil organizations, which were, after all, the ones that could count on enough political mobilization to pressure the legislative branch and also had experience working with the social groups targeted for assistance. This was the case with policies to protect maternity and childhood.

It is worth highlighting at least two initiatives later adopted by municipal authorities and central governments, taken from the experience of women activists working with poor mothers: 'social visitors' and maternity homes. Activism by women in both England and France was aimed at improving the living conditions of poor mothers. Periodical visits were made to their homes in order to learn about the popular classes' customs and more urgent problems. The visitors were not always well received by the poor, as middle-class women generally judged the latter by their own moral values and ultimately blamed them for their own poverty. Yet not all observations produced class prejudice. Many of the women committed to social reform managed to overcome cultural differences between the classes and arrive at quite realistic diagnoses of poverty and social causes. They also helped ensure that the information on hygiene and eating habits disseminated among poor women was more accessible and less authoritarian (Thane, 1996). Local British authorities adopted this model as part of its visiting physicians service, intended to prevent disease and disseminate information on nutrition, hygiene, and health.

As historian Françoise Thébaud (1986) has reported, the other initiative, that is, to create maternity shelters or homes for unwed mothers, emerged in France and was meant to serve the needs of single mothers – the 'pariahs' of motherhood – most of whom came from small towns and villages or were immigrants. Motherhood outside of wedlock was vehemently condemned, but feminists and some doctors tried to protect these mothers, as much for natalist reasons as for humanitarian ones. Pregnant women could find shelter in these homes until their babies were born or could give birth and nurse there. A woman's identity was confidential in these places; there were no formalities or any type of investigation. The women and children also received medical consults, and efforts were made to prevent disease and infant mortality and encourage mothers to breastfeed.

Generally speaking, almost all European countries had private assistance policies for mothers and children that served poor women, generally unwed mothers, widows, or women abandoned by their husbands. But these policies were not enough, as they reached only a very small number of women. Both the public receiving these services and the services themselves had to be expanded, and in this regard a combination of voluntary efforts and the action of local authorities proved quite fruitful, during the time before

central or federal governments moved to enact maternity and childhood policies, creating institutions, providing personnel, and allocating funds.

In principle, female maternalist activism lays bare a paradox, since it was the experience and values associated with the world of care and private life that allowed many women to cross this frontier and become active in the public world. In moving from the margin to the center, many women activists, feminist and not, resignified the actions and values of care in political terms, blurring the lines between public and private, between politics and care. In this sense, when we observe the diverse forms of political action taken by maternalist activists, we can see that many women transformed their exclusion into action through a restrictive, exclusionary gender ideology, the gender of assistance. In so doing, they contributed to the formulation of a gender policy devised by social welfare states that, despite its limitations, tried to respond to the most urgent needs in the areas of health, income, food, housing, social security, and education.

### **Some political dimensions of assistance in Brazil**

So far we have explored the tense, ambiguous, contradictory, and yet historically convergent relations between care activities and care values and the institutional and professional dimensions of politics. But there are other political dimensions of assistance that merit an examination, besides the inclusion of demands from the care experience on social welfare state agendas.

In order to avoid the pitfalls of the dichotomy addressed in the first part of this article, I will begin by looking at criticisms of the concept of care, or of assistance. Tronto (1987) has forcefully criticized the concept of an ethic of care as put forward by Carol Gilligan (1985) and employed by other feminist authors, as Tronto believes Gilligan's contrast of an ethic of justice with an ethic of care is problematic.

In brief, the argument goes, the ethic of justice is the product of the moral development of men, underpinned by values like right and wrong and the premises of equality and universality, with the individual serving as the moral reference point. The ethic of care, on the other hand, is the product of women's moral development, grounded in responsibility and relationships more than in the individual and in the interconnections between people, everyday experience, and the problems of particular historical, cultural people rather than on abstract, universal values. Like Tronto (1987), I believe it is questionable to equate care with women since this implies that one originates from the other or that there is a necessary relationship between gender and morality, and between women and the ethic of care. As much as Gilligan and the women authors who have drawn inspiration from her research may have understood that the moral and ethical differences between men and women are the result of historical and cultural processes, their studies did not include the political dimension of other variables, like class, race, and ethnic-cultural issues, and so they failed to avoid the pitfalls of differentialism's dichotomous thinking.

On this basis, I would argue that the discussion about the political dimensions of care and assistance should not be associated with gender alone, relegated to the world of women and their supposed drive to care for life. Differentialist and even essentialist thought

ultimately debilitates both gender politics and care politics. According to Tronto (1987, p.662), unless we move beyond gender in this discussion of care and assistance, we run the risk of reproducing the discourse of difference that was historically constructed on contrast and on relegating women's place to the segregated activities of care.

Going beyond gender does not mean neglecting it; rather, it means directing our attention to the political, institutional, and symbolic forms assumed by this category in the conception and organization of care. This raises some important questions not only about historical investigation but also about the care policies developed by the state and by civil society. With this in mind, I will turn my analysis to some specificities of the issue in Brazil.

If we start with a more general question, like the boundaries of care, we can think about how the agents involved with care in Brazilian society built models of benevolence and of beneficiaries based on social hierarchy, especially the hierarchy of a society historically marked by slavery and paternalism. Research on patronage relations, kinship, elitist sociabilities, and relations of subalternity can help us understand the historical construction of these boundaries. This means we must understand, from the early days of the country, what values and references shaped the concept of who was considered deserving of care (family members, neighbors, slaves, soldiers, the infirm, foundlings, orphans, the dead) and to what extent and how this boundary was loosened or tightened, in consonance with interests, the assignment of merit, and a willingness to care for and assist.

This issue should be further investigated as it relates to the organization of social assistance in Brazil, a terrain about which we know only a little to date. There are inarguable documental limitations, but access to the little-known records of charitable and philanthropic organizations (especially those founded as from the 1910s, which later worked in partnership with the state) could help us elucidate not only the question of the boundaries of care but many others as well. Brazil's federal and state archives hold well-preserved records on the organization of social assistance.<sup>6</sup>

Minutes of meetings, reports, letters to the authorities, and, as available, interviews with those who took part in these organizations can supply information on changes in the motivations of agents of benevolence and especially on the relations between the two care models. The first model was founded on the Christian, moral duty to care for the needy, while the second – the rational model under which care would target different social groups – was established by the scientific discourse of medicine and social service and by government bodies, especially starting in the 1930s and 1940s.

There is a political dimension to care that warrants greater consideration, especially in research on the topic in Brazil. Because of the attention that U.S. and European historiography has directed to maternalism and its ties with feminism and with the awakening of a consciousness about more far-reaching movements, like civil rights and women's rights, power relations and differences within maternalism itself and within the practices and policies of care and social assistance have been overshadowed or disregarded. As Linda Gordon (1991, 1992, 1994) has suggested, views of care, welfare, and the people whose needs should be met, and even the very definition of these needs, have been forged at the intersection of gender, class, and race differences and inequalities. Gordon's research

on the organization of U.S. welfare policies uncovered differences between the models and actions of black and white women activists.

We know that in Brazil public care work was first tied to the moral concept of Christian charity, conducted under the responsibility of men and women from the most well-to-do classes. The agents of benevolence were people who shared the idea that poverty was a fatality and that it was up to good Christians to ease the misfortunes of the poor and helpless. This understanding found resonance not only within Catholicism but also within the networks of protection and dependence formed by both the master-slave society and by other social groups, like slaves, freedmen, and whites and those of mixed-race who often times lived on the edge of poverty, forced to rely on protection from their peers or the charity of masters and their benevolent wives.

Starting at the close of the nineteenth century, there was a growing perception within medical circles that the problems stemming from poverty could not be left merely to charity or the good will of some. Influenced by the critical thinking of their French colleagues, Brazilian physicians began defending the need to implant public assistance in Brazil, organized by the government, founded on rational, scientific, objective bases, and equipped with an institutional structure as well as technical and administrative personnel.

In this late-nineteenth/early-twentieth century context, this moral model of care began interweaving with the new rationalist, public model that Brazil was just beginning to implement, then called philanthropy. Two important agents of assistance were most directly involved in this interweaving: physicians and women from the upper and middle classes, not all of whom had ties to experience in assistance or charity work. With the help of these women, physicians also began enjoying more space, a larger clientele, and the infrastructure that would allow them to put their assistance ideas into practice. Institutions that served mothers and children were organized in a number of Brazilian cities, like the women's associations to protect maternity and childhood, *Protetorados do Berço* (associations that provided clothing for newborns), *Gotas de Leite* (modeled after the French *Gouttes de Lait*, which furnished sterile cow's milk), milk dispensaries, *crèches*, and children's and maternity hospitals (Leite, 1997; Martins, 2005; Mott, 2001; Rodrigues, 2004).

Records from women's associations await further exploration, as do the records generated in their relationships with government, particularly after the 1930s, a period when an intricate web of agreements and interactions developed between public agents and women working with assistance. Access to these records and to the memories of people active in philanthropy and social assistance could clarify a number of questions: how women became involved with the public activity of care; under which circumstances and in accordance with which values they decided to work with assistance associations; how the type of assistance they rendered was organized; and what support strategies were used (familial, friendship networks, or political and governmental means). In other words, this information would allow us to understand the motives and mechanisms behind assistance action.

This type of investigation interrupts the dichotomy between care and politics by looking for their contact points and, above all, by realizing that the definition and social organization of care must necessarily take place in the realm of politics, even when in

ideological terms care seems connected to the realm of women's good will and kind hearts. Assistance activists knew they had to learn to work resourcefully within public spaces and to organize politically if their assistance work was to be successful.

Another outgrowth of an analysis that emphasizes the political dimensions of care has to do with the production of alterities, that is, of those who deserve care. Assistance activities are necessarily based on the perception of social, cultural, and racial differences. The groups and individuals who receive care are defined by benevolent agents on the basis of their needs, degree of vulnerability, and how difficult it is for them to support themselves. But these definitions are not givens; that is, the parameters or criteria for establishing alterity are not defined by need or happenstance (for example, droughts, famine, joblessness, loss of income, war) but by the ideas and values that have been historically constructed about the Other. These ideas and values reflect ideologies of gender, class, and race, and thus the organization of assistance work and the decision about who does or does not deserve care is determined by places of power. This means that a relevant research question would be the exploration of the power relations between benevolent women and beneficiaries. Not much import has been assigned this topic in research on women in Brazil, as researchers have overlooked class and race conflicts and inequalities in their eagerness to bring to light women's actions and organization.

Thinking about the political dimensions of care leads us to another facet of the matter, which is how the meanings of gender have slipped into the political realm and the political lexicon. As discussed in the first part of this article, care has historically been organized and articulated in tune with the binary opposition between public and private, male and female, practical reason and feelings.

When the meaning of care underwent a political rearticulation based on a profile of humanitarian, secular, scientific, and rational values – a process that got underway in Brazil at the dawn of the twentieth century and gained institutional form under Vargas – the boundaries of this gender contrast began to be blurred by the era's nationalist ideological discourse, which called for women to participate in building a new social order. Women were supposed to contribute politically to the nation and the state from their place, using their own 'natural' skills. An appeal to women's natural sentiments, like goodness, solidarity, and sympathy for the suffering of others, urged them to go beyond domestic and family care, engaging in assistance work among the poor and needy.

When the meanings of gender entered political practice and discourse another outgrowth was that it opened up new professional possibilities for middle-class women. Women teachers, doctors, nurses, social workers, lawyers, and civil servants from the administrative area of services took active part in organizing Brazil's welfare state – a process about which we have little information as yet. We must bear in mind that the era's political discourses – exemplified by this article's epigraphs – fostered an overlapping of values and meanings by asserting that qualities previously defined as female and related to the world of feelings and care should be extended to the rational, practical world of politics. Especially under authoritarian political regimes, as was the case of Brazil, the state and personalized political authority were defined according to a set of values and concepts that were familial and emotional in nature: the state should care for workers as if they were all one family. The

head of state was thus made to resemble a paternal figure who protects his children and guarantees them security and proper living conditions, while women were called upon to play a role in this political arrangement – and the familial state should be transformed by these so-called female qualities.

The partial research agenda on care and the organization of assistance in Brazil presented in this article may contribute to expanding not only social policy studies and studies on the specificities of the welfare state but also studies of the intricate networks linking private assistance institutes and the government, from a gender perspective. A political approach to care and assistance could certainly shed light on the complex ways in which gender takes form politically and how it is shaped within political orders and discourses.

## NOTES

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<sup>1</sup> A systematic study of the LBA has yet to be undertaken but in her book, Simili (2008) offers a thought-provoking analysis of Darcy Vargas and the LBA.

<sup>2</sup> Thomas Hobbes, *Leviathan*, London, Printed for Andrew Crooke, at the Green Dragon in St. Pauls Church-yard, 1651, p.251. Available at: [http://books.google.com/books?id=-Q4nPYeps6MC&printsec=frontcover&source=gbs\\_ge\\_summary\\_r&cad=0#v=onepage&q&f=false](http://books.google.com/books?id=-Q4nPYeps6MC&printsec=frontcover&source=gbs_ge_summary_r&cad=0#v=onepage&q&f=false); accessed on Nov. 4, 2011 (Translator's note).

<sup>3</sup> Starting in the eighteenth century, the terms charity and philanthropy began to be used synonymously, although the former was associated more with religion and the latter was a formulation of moral philosophy that acquired a secular significance in the nineteenth century.

<sup>4</sup> In this and other citations of texts from Portuguese, a free translation has been provided.

<sup>5</sup> Examples of these physicians include Adolphe Pinard (France), Eliseo Cantón (Argentina), and Joaquim Martagão Gesteira and Clóvis Correia da Costa (Brazil).

<sup>6</sup> LBA records constitute an unexplored trove for such a history. It would be valuable to know where these records are, as well as those produced by the different LBA chapters around Brazil.

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