Track 1 – Networked Care Responsibilities: Caring for Ourselves and Others in the Digital Age

Short Track Description:
Care in the digital age is increasingly shared across families, professionals, institutions, platforms, and technologies. This track examines how tools such as care-coordination platforms, AI companions, GPS wearables, self-tracking devices, and automated monitors reshape caregiving responsibilities and consumer well-being. We invite scholars to explore when technology-enabled monitoring provides safety, independence, and peace of mind—and when it creates privacy harms, coerced participation, unequal burdens, or diminished dignity. Together, participants will consider how market-based care technologies redistribute visibility, authority, labor, and vulnerability across networks of caregivers and care recipients.

Extended Track Description:
Care rarely occurs within a single consumer-provider relationship. Increasingly, care responsibilities are a collaboration among formal institutions, households, and informal networks involving families, paid workers, professionals, platforms, institutions, and data infrastructures. Moreover, as care infrastructures become constrained, consumers increasingly rely on market-based services and technologies to manage care responsibilities. Technological solutions such as care-coordination platforms, baby monitors, daycare livestreams, GPS wearables, fall detectors, medication dispensers, AI companions, and self-tracking devices promise convenience, safety, peace of mind, improved coordination, and perceived quality of care. A significant portion of technology-based care solutions involves monitoring or surveillance of oneself and others. Consumers may actively choose to surveil themselves or others when monitoring is perceived to support protection, independence, responsibility, or well-being. Self-tracking can function as anticipatory care, while monitoring children, aging relatives, or care workers may be understood as an expression of attentiveness and concern.

Yet the benefits of technological solutions to networked care responsibilities are accompanied by significant privacy risks and new forms of consumer vulnerability. Care technologies make intimate behaviors, locations, health conditions, routines, and relationships visible to caregivers, platforms, service providers, insurers, employers, and data intermediaries. Moreover, the person purchasing or controlling the technology is frequently not the person being monitored. This complicates conventional assumptions about responsibility, consent, autonomy, data ownership, and consumer choice. Individuals may also feel unable to refuse monitoring when doing so could threaten their safety, employment, independence, or continued access to care.

This Track 1 will conceptualize surveillance as a value-laden practice embedded within networks of interdependent human actors—caregivers and recipients. Technologies reorganize these care networks by redistributing visibility, authority, responsibility, and labor. Monitoring may create value for one participant while producing anxiety, stigma, diminished dignity, or privacy harms for another. It may reduce the burden of physical presence while generating new work involving alert management, data interpretation, coordination, and boundary negotiation.

Accordingly, the conference track will examine how technology-mediated care shapes consumer behavior and influences the well-being of caregivers and care recipients. We anticipate the following themes will

arise: the factors that shape consumer perceptions of surveillance as valuable or invasive; the distribution of technologically driven benefits and vulnerability across care networks; responsibility and decision-making; the marketing of safety and peace of mind; consent when buyers and data subjects differ; self-surveillance as preventive care; the monitoring of paid care workers; secondary uses of care data; unequal access to beneficial technologies; and the dignity implications of automated monitoring.

Overall, the central research question we ask is: how do market-based care technologies mediate consumer networked caregiving, and under what conditions does this infrastructural mediation produce value versus privacy harm, diminished dignity, or coerced participation for those who are monitored? Given the topical fit with the conference special issue in the *Journal of the Association for Consumer Research*, we anticipate that the primary outcome of the track will be a submission to the special issue. Given the breadth of the topic, the themes anticipated to emerge, and the scholarly profile of the track co-chairs, we also anticipate follow-up projects targeting a broad range of journals such as the *Journal of Services Marketing*, the *Journal of Public Policy & Marketing*, and the *Journal of Macromarketing*. While we hope to keep the track size manageable, we aim to include junior scholars in the final stage of their Ph.D. and/or junior faculty.

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