Care Ethics, Religion, and Spiritual Traditions

Inge van Nistelrooij  
*University of Humanistic Studies*

Maureen Sander-Staudt  
*Southwest Minnesota State University*

Maurice Hamington  
*Portland State University*, maurice4@pdx.edu

Follow this and additional works at: [https://pdxscholar.library.pdx.edu/phl_fac](https://pdxscholar.library.pdx.edu/phl_fac)

Part of the *Ethics and Political Philosophy Commons*, and the *Feminist Philosophy Commons*

Let us know how access to this document benefits you.

Citation Details

Nistelrooij, Inge van; Sander-Staudt, Maureen; and Hamington, Maurice, "Care Ethics, Religion, and Spiritual Traditions" (2022). *Philosophy Faculty Publications and Presentations*. 77.  
[https://pdxscholar.library.pdx.edu/phl_fac/77](https://pdxscholar.library.pdx.edu/phl_fac/77)

This Book is brought to you for free and open access. It has been accepted for inclusion in Philosophy Faculty Publications and Presentations by an authorized administrator of PDXScholar. Please contact us if we can make this document more accessible: pdxscholar@pdx.edu.
Care Ethics, Religion, and Spiritual Traditions

Inge van Nistelrooij, Maureen Sander-Staudt & Maurice Hamington (eds)
Care Ethics, Religion, and Spiritual Traditions
Cover from a painting by the German Jewish artist Felix Nussbaum (1904-1944). Nussbaum has—while firmly rooted in the European tradition of modern art—given the atrocities of Nazism a face. We honor his life and work by pointing at his artwork on the covers of this series. This painting represents the fragile intergenerational and embedded relations of care as they intersect with diverse religions in all of their aspects. It depicts Nussbaum’s parents, Rahel and Philipp Nussbaum, mourning the loss of a loved one while seated in a graveyard dominated by Christian iconography. His parents were murdered by the Nazis at Auschwitz in February, 1944.

Felix Nussbaum
“Friedhofsbank” (“Cemetery Bench”), 1935.
Gouache on cardboard, 61 × 47 cm
Felix-Nussbaum-Haus im Museumsquartier Osnabrück
Loan from the Niedersächsische Sparkassenstiftung
A catalogue record for this book is available from the Library of Congress.

This is an open access version of the publication distributed under the terms of the CC-BY-NC-ND 4.0 licence (http://creativecommons.org/licenses/by-nc-nd/4.0/), which permits non-commercial reproduction and distribution of the work, in any medium, provided the original work is not altered or transformed in any way, and that the work is properly cited.

D/2022/0602/48
# Table of Contents

**Preface**

Catherine Keller  

**Introduction**  

Maurice Hamington, Inge van Nistelrooij, Maureen Sander-Staudt  

**List of Figures**

<table>
<thead>
<tr>
<th>SECTION I: THEOLOGY, AUTHORITY, AND EPISTEMOLOGY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. “Care Ethics and Forgiveness: Lessons and Errors from the Christian Tradition”</td>
</tr>
<tr>
<td>Ruth E. Groenhout</td>
</tr>
<tr>
<td>2. “Against Moral Certainty and Authority: How Dogmatic Religious Ethics is Incompatible with Care Ethics”</td>
</tr>
<tr>
<td>Maurice Hamington</td>
</tr>
<tr>
<td>3. “The Pain of Imagining Others: Caring for the Abstract and the Particular in Jewish Thought”</td>
</tr>
<tr>
<td>Sarah Zager</td>
</tr>
<tr>
<td>Maureen Sander-Staudt</td>
</tr>
<tr>
<td>5. “Spiritual Care: The Spiritual Side of A Culture of Care”</td>
</tr>
<tr>
<td>Luigina Mortari</td>
</tr>
</tbody>
</table>
SECTION II: EMBODIMENT, GENDER, AND FAMILY

1. “The Fluidity of Becoming. The Maternal Body in Feminist Views of Care, Worship and Theology” 159
   Inge van Nistelrooij

2. “‘With Prayer from Your Loving Father’: Men, Masculinity, Faith and Care” 195
   Martin Robb

3. “Theologically Motivated Conversion Therapy and Care Epistemology” 211
   Steven Steyl

   Jason Rubenstein

5. “Care, the Sacred, and Sex Education in Slovakia” 273
   Adriana Jesenková

SECTION III: JUSTICE, COMMUNITY BUILDING, AND PRESERVATION

1. “In the Belly of the Whale: Theorizing Disability through a De-Colonial and Islamic Ethic of Care” 299
   Sarah Munawar

2. “Mother Eberly’s Coin: Care Ethics, Democratic Politics, and North American Mennonite Women’s Movements” 325
   Jamie Pitts

3. “Reimagining Justice as Preservative Care for Sustained Peace: Learning from Ethics of Care and Indigenous Philosophies” 347
   Robert Michael Ruehl
4. “Nature’s Hospitality, Human Prodigality: From Environmental Consumption to a Care Ethical Devotional Ecology” 379
   Kimberley D. Parżuchowski

List of Contributors 403

Index 409
Care: that word says so much with so little drama, works across such a breadth of daily registers, and stirs affective ripples beneath and beside language, that we may just take it—like many of the caregivers of our lives—for granted. We may miss the rigors of its performativity. Indeed we may think care too vague, soft, nice, affective, personal, apolitical, familiar, familial and yes (unstatedly) feminine a notion to do the serious work of ethics. Care seems to fall to the margins of the work of social justice. So despite the feminist emergence of care ethics in the 1980’s, the social ethics of progressive religious practice has done little with care ethics as such. With its emphatic feminist, LGBTQI+, antiracist, social, interreligious and ecological justice commitments, liberal/progressive religion may be motivating vast forcefields of care. But, at least in the work of Christian social and ecological justice, the language of social ethics seems to take the place of care ethics. I can hear a voice in my own head say: “We want to resist systemic injustice, we want to insist on a structural alternative. Caring is not enough!”

Certainly. But what if there is ethical work that only the concept of “care” can do? What if the disappointments of a half century of impressive struggles for justice cannot just be explained in terms of conservative reaction? What if those setbacks have something to do with the lack of a robust language of care? Does ethics without an explicit amplification of care tend toward group moralism? Does inadequate care among members of a movement or a community soon
weaken needed solidarity? Does the lack of care for those outside the
community—those just different or those opposed—undermine
the power of transformation? Does democratic agonism harden into
mere antagonism? Does lack of care for the earth and its fragile sys-
tems, human and nonhuman, render environmental crisis danger-
ously abstract?

The voice in my head, that of a feminist theologian situated in
a largely Christian context, might respond: those questions are valid.
But we have already the deep source for any effectual care, the true
motivation for ethical action. We call it love. Love carries the bibli-
cal imperative of respect, indeed care, for the other, not just others
within one’s circle, but strange and difficult others. And again, yes,
certainly. An ethical notion of care may certainly be transcribed
as love.

But beyond circles that tend to its biblical context, its deep roots
in the Abrahamic prophetic ethos, love hardly escapes the problems
of “care”. A love-ethic summons similar doubts—as to its sentiment-
tality, its weakness, its sub-political significance. But it also brings
with it a problem of parochial overstatement. Indeed, any broad insis-
tence on the vocabulary of love seems to impose a Christian vocabu-
lary and its assumptions. And such a presumption violates, however
unintentionally, an ethics of religious multiplicity—a care for the
religious stranger. Moreover, the vocabulary of love, even of “revolu-
tionary love,” may inhibit desired solidarity with secular publics. Care
ethics bears no such traces of Christian triumphalism. Furthermore,
it does not first involve one in the theological tensions of agapic vs
erotic love. Care obtains across the spectrum of love. And when prac-
ticed ethically, attends to the intimacies, needs and distinctions of
sexualities as they pose their ethical questions.

There is another sense in which care entails a more persuasive,
a more practicable rhetoric than love, possibly even for addressing
Christians. To ask that you care for the stranger or for the environ-
ment does not require that you first “love” them. This type of care
may or may not become recognizable as love. It works in freedom
from any religious, or for that matter secularist, exceptionalism. And
in the same vein, care carries a strong practical immediacy, a concreteness that is not about just feeling care. The word itself carries a whole assemblage of care practices and packages, care-givers in and hugely beyond families. The vast valor of care-giving professionals has been freshly recognized in the pandemic. Care implies an immediacy of hands-on attention, of the touching of bodies, of material support. And planetary care, in the immediacies of daily practice, of ecologically friendly energies, commitments, demonstrations, legislations, does not sentimentalize or over-personalize an ecological ethic—it demands it.

Care ethics may prove key to keeping social ethics tuned to the difficult intersectionality in and as which all of our relations materialize. No one of us exists one moment outside of those relations—which may nurture or traumatize, deaden or transform, work unconsciously or mindfully. Reigning systems of relation operate by controlling, commodifying and concealing the relations that form us moment by moment. So many around us and above us couldn’t care less. Therefore, if care ethics is to resist the stereotypes that melt its practice into charitable or interpersonal softness, it will show that, for example, Black Lives Matter is a great exercise of collective care.

Without a perspective that tunes and reveals the width of our interdependence and the depth of its deformations, care goes numb to its collectives, and private in its singularities. Therefore, it is high time to track the perspectives of embodied care across a multiplicity of religious and spiritual publics—just as this book does. The gravitational force of this volume is perhaps beneath all carried by its root attention to “the real needs of human beings in the blossoming of their relational identities.” The brilliant transdisciplinary work of Care Ethics, Religion and Spiritual Traditions unfolds a stunning multiplicity of perspectives within a remarkable coherence of vision. This work matters—its spirit fosters the care in which we all live and breathe and have our becoming.

Catherine Keller,
April 30, 2021
Religion has played a major role in organizing care; hospitals began as religious institutions. All traditions urge the practice of compassion, an essential attribute of care. Secular humanism has incorporated much of this ethical practice, but religion approaches the task of educating and instilling ideals with repetitive reinforcement, determination and organization. Of course, religion is no guarantee of good care, and religious institutions have demonstrated appalling abuse of those in their care.

Madeleine Bunting, *Labours of Love: The Crisis of Care*

Madeleine Bunting eloquently articulates one of the fundamental tensions that motivate this volume: religion and spirituality can be a force for effective care as well as an impediment to care, and sometimes, both at the same time. We can recount extraordinary efforts of kindness and compassion inspired by religious belief. For example, although precise accounting is challenging to verify, The Church of Latter-Day Saints has spent over $2US billion on humanitarian aid from 1985 to 2017 and funded $180US million in humanitarian assistance during 2017 alone (Shamlian 2020). However, we can also enumerate instances where religion spurs devastating division and oppression of people. For example, religious organizations still support conversion therapy to ostensibly suppress homosexuality, which has caused suffering for over 700,000 LGBTQA+ individuals (The Trevor Project 2020). Conversion therapy represents the antithesis of care
in the twisted valorization of religious norms over and above the real needs of human beings in the blossoming of their relational identities.

There is no question that religiosity is an essential element of most humans’ lives despite this tension. At least 84% of the world’s population identifies with a religious group (Sherwood 2018). Furthermore, morality is an element of virtually every religious or spiritual identification, as is the idea of caring for one another. So why is it that religious adherents do not always manifest care? The authors who contributed to this volume address the relationship of care ethics to religion and spiritual traditions through concrete examples and theoretical explorations. Sometimes care ethics is viewed as providing a critique of religion; sometimes, religious experience has something to offer to the theorizing of care. Sometimes, the two are merely in dialogue with one another. This introduction sets the analytical foundation of the book and explicates the terms of analysis used herein.

First, the context of the book is formed by care ethics, for which it is essential to note that an “ethic of care” is not the same thing as “care.” Each of the contributors to this collection was asked to frame their chapter in dialogue with works of feminist care ethics. Because this book is part of a series devoted to care ethics, the readers are likely familiar with a definition of care ethics. However, given the ubiquitous use of the word “care,” it bears repeating that not every activity given the label “care” meets the moral standards of a caring act, or at least effective care, under the rubrics of care ethics. Many an atrocity has been wrought in the name of care, such as the paternalism invoked by colonial manifestations of care (Raghuram 2019, 618). Care ethics offers an ethical ideal (Noddings 1984, 48-51) which describes a relational approach to morality that is sensitive to the particularities and context of moral questions. Accordingly, care describes a practice that includes inquiry, empathetic connections, and action as essential elements in service of the flourishing and growth of beings. Care ethics entails a normative element, but given the longer time horizon of relational thinking, care ethics is
concerned with more than adjudicating individual actions. Instead, it always considers these actions as embedded in institutions, structures, and a political context. Actions on all levels done in the name of “care” that divide, oppress, or disproportionately harm others are not compatible with the moral striving that care ethicists are describing (cf. Tronto 1993, 125-137).

Second, a tension that motivates this volume is the lack of intellectual dialogue between religious studies scholars and care ethics scholars. Care ethics has received a great deal of scholarly attention, particularly in business ethics, education, health care, philosophy, and political theory. There are also emerging explorations of care in anthropology, literature, performance studies, and social work. However, care ethics is a topic that is practically non-existent among religious studies scholars. What is surprising about this absence is that this lacuna is even true in the work of feminist religious studies scholars. For example, in 1996, over a decade after Carol Gilligan’s In A Different Voice: Psychological Theory and Women’s Development (1984) first named an ethic of care, the volume Feminist Ethics and the Catholic Moral Tradition was published. Although it contains 25 contributed chapters from a variety of well-respected Catholic feminist scholars in over 625 pages, there is no consideration of care ethics, even though the many discussions of feminist ethics contain resonances such as the valorization of contextualism. As of this writing, The Journal of Feminist Studies in Religion which was founded in 1985 and is self-described as “the oldest interdisciplinary, interreligious feminist academic journal in religious studies” (Schüssler Fiorenza 2020), has only had a few articles on care ethics and none during the recent burgeoning of care scholarship. By comparison, a search of the Journal of Business Ethics, which has no explicit feminist character to its academic aims and scope (Freemand and Greenwood 2020), reveals well over 50 articles addressing care ethics since the 1980s. To be fair, in the Netherlands and Belgium, care ethics has been elaborated from theological perspectives, for instance, by Annelies van Heijst (2008, 2011), to whose work we will return below. The majority of feminist care theorists, however, have only
occasionally addressed religion and spirituality themselves. Thus, there is a notable lack of dialogue between the two fields of study. This book is an effort to open up that dialogue and provoke further conversation regarding the relationship between care and religious studies. In the following sections, we address the historical relationship between care, religion, and spiritual traditions and review the historical forays of feminist care theorists into the subject, as sparse as it is.

Engagements of Care Theorists with Religion and Spirituality

The dearth of writing by care ethicists on religion and spirituality has been mentioned above. Despite this lack, there are a few care scholars whose work does engage religion, and we explore some examples in this introduction. This volume is intended to be inclusive, and so we address both religions and spiritual traditions. In this context, religion is viewed as organized beliefs and practices that entail institutional development and history. In this category, we include what is often referred to as the world's major religions such as Hinduism, Buddhism, Islam, Judaism, and Christianity. Although the distinction between religion and spiritual traditions is not always clear cut, for this project, the latter refers to beliefs and practices that are more loosely organized in lacking large institutional hierarchies. In this category, we include indigenous spiritualities, Confucianism, and new spiritual movements. Of course, Confucianism is often categorized as one of the world’s major religions, although it lacks a systematic metaphysics. This leads to a debate about whether Confucianism and other systems of thought are best understood as religions, spiritual traditions, or secular humanist philosophies. This confusion is in part because “spirit” and “spiritual” have rich and diverse meanings. Ultimately, the distinction between religion and spiritual tradition is not an evaluative one, nor is it significant to a care analysis. We employ the categories of “religion” and “spiritual tradition” loosely as an effort at an inclusive approach to the subject and remain neutral on such metaphysical debates.

A founding mother of care ethics, Nel Noddings, has probably offered the most volume of commentary regarding the relationship
between care ethics and religion. Writing only two years after Carol Gilligan coined the term “ethic of care,” Noddings was the first philosopher to offer a book-length exploration of care ethics. In her first book on the subject, *Caring: A Feminine Approach to Caring and Moral Education*, Noddings distinguishes between “natural caring” and “ethical caring” (1984, 79). She contends that humans naturally tend to care for familiar others—family and friends—with whom we share proximity and time. Such caring is not always easy, but it is so expected and routine that it appears to be natural. Noddings gives natural care an originary position that takes more significant effort and imagination to extend to unfamiliar others through what she names ethical caring. Although social institutions often place ethical caring as a moral ideal, they often fall short because “they demand loyalty, insist upon the affirmations of certain beliefs, and separate members from nonmembers on principle” (1984, 117). Noddings claims that this failure is particularly true of religions because of their “frequent insistence on obedience to rules and adherence to ritual contributes to the erosion of genuine caring” (1984, 117). Noddings goes on to author *Women and Evil* (1989), where she demonstrates her knowledge of feminist theology by engaging figures like Mary Daly, Rosemary Radford Ruether, and Elisabeth Schüssler Fiorenza in her interrogation of the underlying social narrative that associates women with evil.

*Women and Evil* allows Noddings to develop further her theories of care with a focus on institutions and gender oppression. Again, religion does not fare well in this analysis. Noddings does not advocate atheism or offer a blanket critique of religion and spiritual traditions, but she finds much harm in the history of organized religion. For example, she claims that religion contributes to a form of “othering” that can foment violence and war: “The notion that salvation rests in our relation to God and not in our relation to other human beings has often led to a devaluation of persons and a tendency to place those with whom we differ outside the moral community” (1989, 204). In 1991, Noddings delivered the annual John Dewey Lecture on “Educating for Intelligent Belief or Unbelief” (1993). This
work is not usually a significant text for care theorists as it does not address care ethics at all. Interestingly enough, Noddings recommends that all public schools should teach religion (1993, xv) and give students the information, both positive and negative, as well as the tools to assess the teachings of religion in an evidence-based manner (139-144).

Noddings continues her concern about the connection between religion and violence as she develops a social and political philosophy of care in *Starting at Home: Caring and Social Policy* (2002a). In particular, she criticizes Christianity for making certain forms of suffering acceptable: “Christianity has—in both its theological traditions and ordinary pulpit preaching—promoted the idea that pain is deserved” (2002a, 196). The premise of the book is that social policy should take its cues from the ideal caring relationships associated with home and family life. Thus, for Noddings, a concept like eternal damnation does not make sense in the moral relationships found in the home where, ideally, forgiveness and compassion should reside. Noddings recognizes that many Christians have jettisoned beliefs such as hell and damnation, but the legacy of these religious constructs remains (2002a, 196). Noddings, a professor of philosophy and education, renews her critique of religion in her writings about moral education. In *Educating Moral People: A Caring Alternative to Character Education* (2002b), Noddings is concerned about modern efforts at character education in schools which she suggests is too focused on instilling virtues. Although care ethics is often associated with virtue theory, given that care is clearly neither deontological or utilitarian, she finds virtue ethics too individualistic. For Noddings, care’s relational ontology distinguishes it from virtue theory. Thus any character education that emphasizes traditional virtues is missing the significance of the fundamental relationality of humanity (2002b, xiii). Furthermore, she suggests that character education of religion is flawed in its implicit endorsement of problematic masculine virtues. For example, Noddings criticizes the valorization of a warrior model marked by individualism, hyper-competitiveness, and hierarchical thinking (2002b, 110). Although she finds the peace and compassion-oriented teachings of
Jesus compatible with care, there exists an embedded warrior model: “Jesus, while counseling his followers against violence, promised that God would mete out justice in destruction of the wicked” (2002b, 104). Despite Noddings’ misgivings, which some care ethicists share, other writers in this volume see potential in the ways that religion, spirituality, and care can overlap and enhance one another.

The 1980s was a time when a coalescence of ideas helped form what would become care ethics. Still, as with any paradigm shift, rather than a flipping of a switch, there was a groundswell of movement toward a new way of thinking about ethics and humanity. One significant voice in this trajectory was Catherine Keller. In From A Broken Web: Separation, Sexism, and Self, Keller does not explicitly name an ethic of care, but her discussion of ontological relationality resonates strongly with the work of care theorists, especially in her use of Carol Gilligan. Keller weaves gender, sexuality, mythology, and religion into a lament about how the social imagination has valorized separateness from a variety of sources, including popular conceptions of god (1986, 35) to the patriarchal differentiation of men and women (1986, 38). Keller’s analysis is thorough and nuanced; however, it is not a critique of religion and spirituality per se. Instead, her concern is with dominant institutional and theological manifestations of religion. She argues that under different conditions, religion could be a powerful force for connectedness among people (1986, 225). However, according to Keller, religious institutions and their theologies have more often than not reified separateness: “Religion defining holiness as separation has made itself into the bearer of barriers, of disconnection, of exclusion” (1986, 219). This separateness runs counter to our composite identity. Keller declares, “I am many” (1986, 228) in affirming the web metaphor of self as multiplicity: “my many selves as the fabric of other persons, plants, places—all the actual entities that have become part of me” (1986, 227). Keller ends her argument on a hopeful note by integrating the notion of relational ontology with a process theology in claiming that rather than a detached and abstract omnipotent and omnibenevolent deity, there exists the possibility of a god that is always becoming and unfolding...
in the web of existence (1986, 248-252). Keller’s work represented a type of proto-care ethics that recognized the significance of spirituality in people’s lives.

Relational ontology was also at the center of a discussion in 2007 at a symposium sponsored by The St. Thomas Law Review titled, “Workplace Restructuring to Accommodate Family Life.” One panel of the symposium was composed of Roman Catholic feminist legal scholars as well as Eva Feder Kittay, a prolific and highly regarded care philosopher. Kittay was invited to represent a secular feminist position (2007, 468). During the paper presentations, care ethics was framed as a secular approach over and against religious approaches. In her presentation, Kittay made it clear that as much as she values the feminist religious tradition, such as the Catholic feminists mentioned earlier, there is a distinction in how she approaches human dignity. Care plays a central role in that distinction:

I really do welcome the writings of religious feminists who emphasize love, care, and human vulnerability, an emphasis that stands in contrast to an often constricting and obsessive valuing of the human capacity for rationality. Contrast the conception of dignity that predominates in philosophy with the one dominant in religious traditions. Philosophical treatments of human dignity tend to be based on our ability to reason. Human dignity as conceived within religious traditions derives from the idea that we are all created in the divine image, that we are all children of God. While I feel an affinity to attributions of dignity that are not based on the capacity for reason, I don’t think that appeal to a personal deity is the only alternative. In other work, I have argued for a notion of dignity grounded in the care humans are both able to give and receive, not, if you will, in the idea that we are all children of God, but a secular analogue, the idea that we are all “some mother’s child” (2007, 469).

Employing Martin Luther King Jr. as an example, Kittay describes what she shares with those of religious faith on issues of social and political importance as an “overlapping consensus” (2007, 471) which is possible in a pluralist society. Kittay takes issue with the presentation of Susan J. Stabile (2007), who argues that one of the primary differences between Catholic and secular feminism is that the latter
is committed to equality and individualism to the point of denigration of familial care (2007, 435). To support her position, Stabile quotes the work of Elizabeth Fox Genovese in *Feminism and the Unraveling of the Social Bond* (2007, 436), a historian who converted to Catholicism and became a leading anti-feminist voice in the United States. Stabile concludes her presentation by delineating commonalities and differences between feminists and religious scholars. Beyond the shared commitment for better valuation of the work done in the home between secular and religious feminists, Stabile claims, “The primacy of the traditional family in Catholic thought, combined with an acceptance of immutable differences between men and women, means that there will be points along this road where the paths of Catholic and secular feminist will part company” (2007, 468). Kittay responds with a review of some of the relational work done in feminist psychology and philosophy. She clarifies that “secular feminists are united in fierce commitment to equality, but not to individualism” (2007, 475). On many fronts, Kittay found resonance between the two positions but vigilantly criticizes the advocacy of traditional familial structures and theological positions of exclusions rather than the moral obligations that human dependency generates:

It is hard for this secular feminist to understand why, when religious feminists want to emphasize relationality, the value of caring labor, equal dignity of each individual, the importance of raising children and caring for those who cannot care for themselves, the emphasis is not on the units of dependency relations rather than the family as understood and constituted by patriarchy. So here there is a real divide. Predictably, I would urge the religious feminists to come over to our side, for in my perspective, it is far more consistent with all their other feminist positions and attitudes towards care (2007, 484).

This panel occurred well over a decade before this publication, but it is one of the rarely documented dialogues on care ethics and Christianity. Given the work of feminist theologians such as the Catholic feminists mentioned earlier, it is a pressing question whether the
criticisms of Kittay and other care ethicists are justified. Given the rise of care ethics literature, one might speculate that Christian feminists and religious feminists of all faiths might have more to say about comparative moral approaches.

**Care as A Lens of Analysis for Historical Religious Practices**

Care scholarship is concerned with more than the theoretical intersection between religion, spirituality, and care. Care ethics is rooted in human, embodied experiences which points to the value of phenomenological and ethnographic examinations of particular relational occurrences. Dutch feminist theologian and path-breaking care ethicist Annelies van Heijst (2008) offers one such case example. She sets up a dialogue between care ethical theory and historical religious practices of care, performed by a congregation of Catholic Sisters in the Netherlands between 1852 and 2002. The limited scope of this case study may, according to Van Heijst, still be revealing of broader practices performed by apostolic nuns, which had a very similar lifestyle throughout Western Europe, Scandinavia, the US, and Canada (2008, 2). The congregation studied was the ‘Sisters of “The Providence,”’ which served the lowest strata of society, founding and staffing ‘52 institutes for childcare and education, nursing care and social service’, and their works spread to Indonesia, Brazil and Tanzania as well (2008, 1). Looking at their practices now, in 2021, with knowledge of both post-colonialism and the widespread sexual abuse in Catholic institutions, could lead to a general rejection and discarding of such caring practices, and of the book. Still, we believe that this would be unjust to the nuanced work on care ethics and religious practice that Van Heijst has performed, as well as to the literal life-saving works of the Sisters, despite obvious and well-argued criticism. Van Heijst literally raised this criticism before evidence of such practices in the Netherlands came to light. Two years after her publications, the accusations of physical and sexual abuse by church officials, and the structural nature of its cover-up, finally gained public attention in the Netherlands. The darkest pages of this history were officially uncovered in a thorough investigation by an independent,
INTRODUCTION

high-profile committee\(^1\) starting in 2010, with devastating results regarding the Church’s record of misconduct. Understandably, the tide of public opinion has shifted regarding the general image of religious care and education to one of concern and suspicion. However, oversimplified visions were voiced as well. Van Heijst’s work can count as an early and thorough critical analysis and one of the pioneering works that published the voices of those entrusted to this care. This is why we believe it is justified to underscore the importance of her work.

Van Heijst’s study distinguishes itself in various respects. First, she analyses the religious practices of care as rooted in religion. She draws upon theology as a hermeneutical tool to understand the religious meaning expressed in these particular practices. She describes the theological concepts that underpinned the religious care visions as expressed in the normative writings of the congregation (Ch. 7) as well as in their daily practices (Ch. 8) and how they were remodelled over time (Ch. 9). Her analysis is far too detailed to do justice to here but shows an interesting tension between those concepts that put the Sisters on the track of a referential worthiness of children themselves as referring to the Divine Child (i.e. Jesus), and those that made them detach themselves from the natural world and any ‘affectionate bonding with human individuals’ and instead ‘strive for supernatural love’, that is the love of God through ascetic mortification (2008, 250). This tension reveals how theology might simultaneously propel and hinder a caring practice. These opposite and irreconcilable meanings are expressed by both care recipients and Sisters throughout Van Heijst’s book, as well as their consequences in practice. For instance, the Sisters themselves expressed how they were forbidden to create special bonds with the children in their care, which reflects the

\(^1\) The committee’s chair was former Minister of Education, President of the Dutch Parliament and Mayor of The Hague, Wim Deetman. The research committee consisted of a clinical psychiatrist, a former judge, professors in psychology, (religious) history, and philosophy of science. Further expertise was offered by a sound board group, which served as a reading committee, with the task to warrant the independence and quality of the conducted research.
criticism much expressed by the care recipients that the Sisters treated them in an emotionally detached way. Also, their own asceticism and bodily disregard often led to ambiguity regarding pain for themselves, but also for others. This raises questions regarding care for both themselves and the children in their care. Simultaneously, however, both some Sisters and care recipients express how, when nobody witnessed them, there were experiences of connection, being seen and heard, pleasure and playfulness, which were rare, and (therefore) very special.

Second, Van Heijst presents a historical example of care practice to care ethics, and by doing so, she contributes to the purpose of making care theory more practice-based (2008, 27). Departing from the analysis of the historic practices, Van Heijst offers a touchstone of Tronto’s theory and highlights elements that are downplayed there. One of the most relevant for the present volume is that Van Heijst’s case study unambiguously shows that the ethics of care up to that point had insufficiently recognized the importance of religion. She argues that Tronto’s phased model of care should particularly include the recognition that religion is often vital for what motivates people to care for others in the first place as well as to keep them involved in these caring practices. Tronto’s third phase that is the phase in which the actual carework is performed, people’s religious beliefs historically have incited them to build “an impressive praxis of care and education for the most vulnerable groups in society and for middle-class Catholics as well. [T]hey transformed social reality […] by practicing Christian neighbourly love and committing themselves to needy people and to God” (2008, 372). Literally, tens of thousands of religious people were involved in these works, also in parts of the Netherlands where, and particularly for social groups for whom such provisions were not established by the government.

Thirdly, Van Heijst applies Joan Tronto’s theory for examining this historical care practice. Tronto’s phased model of care is particularly adequate, as it helps to evaluate the historical practice on various levels, such as the political context, the institutional level (organizing, coordinating, and financing charitable care), and the level of
daily practice of caregiving and care receiving. Van Heijst reinterprets Tronto’s model as a standpoint epistemology, a theoretical approach developed in ethnic and women’s studies, by connecting the care phases with actual positions that people have (2008, 28-29). Prompted by the ethics of care, Van Heijst gives specific weight to the standpoint of recipients of this charity work, who are critical of the standards of good care that were applied (2008, 361-365). Nevertheless, their evaluations are varied. Some show appreciation for the care as it entailed an improvement of their previous condition. For them, this care was lifesaving in situations where their next of kin were dead, or incapable or unwilling to give care (2008, 361-362). The negative evaluations concern the aforementioned lack of personal attention (2008, 362), but also the common practice of splitting up brothers and sisters in various age and gender groups. The effect was that children growing up in the orphanages of the Poor Sisters often did not know of the existence of their siblings (2008, 362).

By including these multiple standpoints, Van Heijst also serves another goal, that is: filling existing gaps in remarkably one-sided literature. This onesidedness, for instance, exists in the neglect of the Catholic tradition in the Netherlands while focusing on Protestant or socialist care and welfare provisions; or a focus on the male Catholic tradition while neglecting the female religious who were the large majority; or to an uncritically negative or positive bias regarding these practices; or the representation of only one perspective (primarily that of the caregivers and especially their institutions). Another consequence of applying Tronto’s theory is that Van Heijst’s book includes an analysis of the social and (church-)political context in the nineteenth and twentieth century in the Netherlands. In this way, she elaborates care ethics in order to provide a hermeneutic, political-ethical tool for past religious, caring practices.

In sum, Van Heijst’s book offers a rich analysis of the complex relations between care, power, and faith in historical care practices. She also reveals the reality of care practices in the context of religion and spirituality: the evaluative dichotomies that we gravitate toward, such as care/not care, are wholly inadequate. Care is sometimes
shadowed by damage. Religion can motivate great efforts of care, and yet it leverages power and privilege that also can inflict harm. That tension is an undercurrent throughout this book.

**Comparative Spiritual Studies**

Interestingly enough, there have been some robust non-Western interchanges between scholars regarding care and spirituality. Perhaps the most mature of these has been the dialogue between care ethics and Confucianism. Chenyang Li (1994) offers a comparative study of care ethics and Confucian concept of *jen*, a term that combines both affection and virtue (1994, 72). Li concludes that Confucianism and care ethics share an alternative conception of human relations that eschews a contractarian approach in favor of moral ideals (1994, 71-75), a lack of formulaic rules (1994, 75-79), and a moral partiality that originates with familiar others and extends outward to less-familiar others (1994, 79-81). Li acknowledges that Confucianism lacks the gender analysis inherent in care ethics and that recent manifestations of Confucianism have exhibited sexism and misogyny, although this oppression is not apparent in the original accounts (1994, 81-85). In a 2002 response to Li, Lijun Yuan disputes the notion that Confucianism can be feminist. In particular, she cites sexist passages in *The Analects* and finds that the message of *jen* would have been directed toward men (2002, 113). Yuan concludes that *jen* fails to meet the test of feminism because it was never employed in “challenging traditional forms of domination in a hierarchy society” (2002, 125). In that same issue of *Hypatia*, Daniel Star also critiques Li by arguing that Confucianism is much more like a virtue ethic than the relational ethic of care (2002). Star is not making a value judgment, but, like Noddings’ criticisms of virtue-based character education, he points out the more individualistic character of Confucian morality. Li is given an opportunity to reply to the rebuttals of both Yuan and Star. He finds both critiques lacking and reiterates his position that care ethics has more in common with Confucianism than other Western forms of ethics. Beyond this dialogue in the pages of *Hypatia*, there have been other studies that explore the
relationship between care ethics and Confucianism (Herr 2013; Sander-Staudt 2015). Li returned to the pages of Hypatia in 2015 to review care ethics and Confucianism scholarly dialogue. Yuan goes on to develop a book-length comparative study of care ethics and Confucianism, where she reconciles care ethics with a reformed version of neo-Confucianism (2019). The study is wide-ranging and addresses relational ontology, methodology, reciprocity, and even offers a closing case study through an analysis of China’s population policy. Other spiritual traditions have received far less attention regarding their relation to care ethics than Confucianism.

Vrinda Dalmiya integrates an Indian epic associated with Hinduism, Mahābhārata to make a point about relational humility in Caring to Know: Comparative Care Ethics, Feminist Epistemology, and the Mahābhārata (2016). Dalmiya frames a complex epistemic conclusion by drawing from ancient stories:

The notion of care refracted through the conceptual lens of the Mahābhārata can… plug some of the lacunae in virtue epistemology that takes relational humility to be foundational. This interdependence of caring and knowing—of need fulfilment and of effectively grasping the world—makes relational humility that underlies both a truly hybrid virtue (2016, 28).

Dalmiya is not offering a spiritual or religious analysis. Still, she is drawing from texts with spiritual significance to argue that truth-seeking is linked to caring and being cared for. Similarly, the African concept of ubuntu, meaning “I am because you are”, describes an ethos of humanity toward others is more a cultural term than explicitly religious or spiritual. Yet, ubuntu and its relational ontology have had spiritual applications, as in the work of Desmond Tutu (Battle 2009). There have been many favorable comparative explorations of care and ubuntu (Chisale 2018; Gouws and Van Zyl 2015; Hall et al. 2013; Waghid and Smeyers 2012). Given its role as a moral, social spirit, ubuntu may provide an intriguing means for better understanding a communal ethos of care.

As care ethics grows in its international theoretical development and application, further interaction with religion and spirituality is
warranted, given that religion has a history of being a crucial social harbinger of moral thinking about care and caring. We hope that this collection is a step toward a richer dialogue.

Chapters in this Book

In what follows, we offer a brief summary of the chapters which make up this volume.

A significant theme of care ethics is how dominant systems of thought exclude and marginalize “the different voice” of care. In the first section, the authors explore how religions and spiritual traditions can determine who has the authority to speak in religious contexts and why. A care ethical study of religion raises questions about epistemic authority and which religious values are most compatible with care. Addressing the latter problem, in “Care Ethics and Forgiveness: Lessons and Errors from the Christian tradition,” philosopher Ruth Groenhout interrogates the theme of forgiveness in Christianity from the standpoint of care ethics. In this investigation, Groenhout highlights a contrast between religious and philosophical ethics. Whereas western philosophy has focused on adjudicating the morality of actions, which gives forgiveness a minimal role, religion often privileges forgiveness by focusing on building a moral community. Given the fundamental relationality of care, one might assume that forgiveness is a topic where some forms of religion and care ethics might resonate strongly. As Groenhout describes, “Just as forgiveness is crucial to care ethics, it is also crucial to a Christian ethics of love.”

Indeed, while traditional treatments of ethics focus on decision-making moments, forgiveness is a recognition of the temporal dimension inherent in a moral relationship. According to Groenhout, “Forgiveness allows the relationship to continue, allows the one harming to (sometimes) recognize and apologize without fearing harsh retribution, and allows the one harmed to let go of anger and pain in many cases.” However, Groenhout details how there have been abuses of forgiveness in religious formulations. She calls on care theorists to be vigilant regarding the feminist origins of care ethics, whereby power and privilege are named and held in check. Religion provides a case
example to motivate that vigilance. Groenhout views forgiveness as a subject that requires both personal and political elements of care to separate punishment and accountability issues. For Groenhout, “forgiveness remains the agent’s to choose, not another's to demand, that forgiveness is never allocated to the powerful to control in order to protect their power, and that forgiveness never is primarily structured as absolving the wrongdoer from accountability.”

The incompatibility of care ethics with religious dogma is addressed in the chapter “Against Moral Certainty and Authority: How Dogmatic Religious Ethics is Incompatible with Care Ethics” by Maurice Hamington. Hamington focuses on the authority of sacred texts. Religious leaders can diminish the ability to care when religion is taken too seriously: “the critique from the standpoint of care ethics is not with religion per se but with moral ideology and dogmatism whereby moral authority is not questioned.” Hamington employs the example of the events surrounding John Allen Chau’s death, a young and charismatic fundamentalist religious missionary who attempted to proselytize to a small isolated indigenous community, the Sentinelese. Chau believed he was doing good in the form of “God’s will” for the Sentinelese. Still, the question remains whether he actually cared about the Sentinelese and whether the fundamentalist religious communities that supported Chau cared about him. Hamington suggests that care ethics is anti-authoritarian in that authentic caring is responsive to particular individuals in particular circumstances. According to Hamington, the certainty and authority that come with deontological formulations of religious morality can interfere with the responsiveness to the totality and complexity of the other. Responsiveness is an essential element of effective care. Hamington argues that although many religions teach humility, the certainty and authority of some religious communities belie that humility. He claims that the openness to the other in caring responsiveness requires humility rather than certainty.

In a similar consideration of care ethics’ compatibility with certain religious conceptual traditions, the compatibility of care ethics with Jewish abstraction is the focus of philosopher Sarah Zager’s “The Pain
of Imagining Others: Caring for the Abstract and the Particular in Jewish Thought.” This chapter makes an important theoretical argument regarding feminist care ethics, and yet is also profoundly personal. In a careful textual analysis, Zager critiques the underlying religious assumptions in the work of Virginia Held and Nel Noddings regarding the eschewing of abstraction in favor of particularism. Zager opens up the imaginary of caring by addressing the care for abstract others as revealed in Jewish feminist care ethics. She claims, “Jewish versions of care ethics take on a distinctive shape and adopt distinctive versions of care ethics’ critique of abstraction.” To argue for more attention to caring for abstract others, Zager shares her own challenges with premature ovarian insufficiency, which resulted in her freezing her eggs as she was not ready to have children. She reflects on genuinely caring for her eggs. For Zager, these eggs are mere abstractions of fully formed humans: the people they may become. She wonders how her care for an abstraction fits into Held and Noddings’ care theory, which tend to emphasize care for particular others capable of caring reciprocity. For Zager, the significance of a frozen egg was, “less as a clump of biological material… than as an imagined person, someone who made a kind of ethical demand of me, but who was not yet a full-fledged, embodied person with particular features.” Zager thoughtfully problematizes the standard feminist care dichotomy between the particular and the universal and finds balance in recent Jewish care literature which “rejects abstract philosophical anthropologies, while retaining a strong emphasis on moral obligation, and on ritual practices structured by rules.”

Feminist philosopher Maureen Sander-Staudt likewise draws from her family history in the chapter “Theological Spelunking with Care Ethics: Caring Ethical Standards for Relational Maintenance across Religious Pluralities.” Considering the religious-relational trouble caused by her mother’s conversion from Catholicism to Lutheranism, Sander-Staudt raises questions about how care ethics can best reach across religious differences and discontent. Using Plato’s allegory of the cave to frame the epistemic hazards of such a study as one of “theological spelunking,” Sander-Staudt establishes care ethical
standards for religious teachings and practices, dialectically examining Nel Noddings’ claim that care and Christian ethics are “irreconcilable.” After finding cause to accept Noddings’ argument partially, she qualifies it but concurs that care ethics is incompatible with religious teachings and practices that inflict wanton relational damage. She uses the resulting care ethical standards to explore how a care ethical approach might differ from a liberal justice approach in responding to religious difference, plurality, and dissidence. She concludes “writ large” with a case study of an ethical response to the Fundamentalist Church of the Latter Day Saints (FDLS). FDLS communities practice extremist versions of Mormonism which are explicitly condemned by the larger Mormon Church and secular laws, but as such, pose challenges to the basic tenets of care ethics.

Looking more carefully at the very notion of spirituality, Italian philosopher Luigina Mortari interrogates the nature of spirituality regarding an ethic of care in “Spiritual Care: The Spiritual Side Of A Culture Of Care.” This sweeping analysis takes us on a journey that includes Ancient Greek philosophy, Continental Philosophy, ontology, epistemology, empirical research, and poet-philosopher Maria Zambrano’s work, among others. Mortari argues that there is an ontological call to care as an essential technique for living. Accordingly, Mortari finds the examined life a necessity: “To conceive the technique of living means having the knowledge and wisdom of care; in other words, knowing what good care is, and how to put it into practice.” Mortari leverages a Platonic notion of the soul to frame a spiritual pursuit of care as a quest for the good and not just an ethical determination of what is right. She states, “the practice of care teaches me that it is not only necessary to search for a concrete, immanent idea of good embodied in the daily life (about this, it is possible to speak of a materialistic spirituality as the generative matrix of care ethics), but also to cultivate a manner of thinking that is congruent with both the human limits of thinking and the essence of care.” Seldom do care theorists present care ethics in the broad-brush strokes that Mortari’s epic narrative offers. This chapter may not be a typical philosophical analysis of care, but it suggests
several provocative insights into the relationship between care and spirituality.

The second grouping of chapters in this volume looks at care ethics and religion in the context of embodiment, gender, and the family. This focus considers the roles of the body, femininity and masculinity, and family relations in religions and spiritual traditions, and how religious norms and institutions can inform sexuality in more or less caring ways. To begin, care ethicist Inge van Nistelrooij argues for a new turn in care ethics. After the ‘political turn’ of the 1990s, when the majority of care ethicists abandoned the focus on mothering practices in which the works of Gilligan, Noddings, and Ruddick were rooted, Van Nistelrooij argues for a renewed and distinct attention to the subject of maternity. She argues that the experience of maternity – i.e., pregnancy, labor, lactation – is of a particular kind that makes mothers (be they female, male, non-binary, trans- or intersex, or other) still vulnerable to oppression, exploitation, and violence. Then, taking two artworks by Louise Bourgeois as heuristic guides, Van Nistelrooij explores the works of Ruddick (1989), Rich (1986), and Keller (2003) to give a new impetus to thinking about the mother’s body in care, worship, and theology. Surprisingly, religion has not only been detrimental to women’s and mothers’ experiences, but religious representations and (remnants of) texts can also help reinvigorate the meaning of our coming into life through somebody else’s body and of the experience of giving life. Particularly, the elements of fluidity and becoming help explore maternity as politically and morally relevant today and avoid the pitfalls of the pioneering care ethics’ works on maternity. Ultimately, Van Nistelrooij concludes by suggesting a reformulation of Fisher and Tronto’s famous definition of care, one that accounts for maternity in a new way. By including processes of becoming, caring can be viewed as less anthropocentric and less agentic. As such, it can avoid essentializing, naturalizing, or containing maternity to one gender, the private setting, and can gain renewed moral and political relevance.

As the next chapter demonstrates, masculinity, religion, and spirituality are worth equal scrutiny from a care ethical point of view.
Because care ethics developed out of feminist analysis and was rooted in women’s traditionally under-valued experience, understandably, there has not been as much written about care and masculinity. This absence is changing as care ethics grows in popularity across a variety of disciplines. Martin Robb, who has written extensively about masculinity in the context of care, furthers this vital conversation in “‘With Prayer from Your Loving Father’: Men, Masculinity, Faith and Care.” The chapter begins on a personal note, with Robb sharing excerpts of letters from his great grandfather to his grandfather. He leverages these letters in the context of Christian Methodism to argue for a Christian masculinity compatible with care theory. In particular, Robb challenges the notion that Christian masculinity was handed down as a monolith. On the one hand, he acknowledges that one form of Christian manliness was reinforced as “neo-Spartan virility as exemplified by stoicism, hardness, and endurance” by Christian and quasi-Christian social institutions. However, that form of masculinity existed in tension with a narrative that Robb finds revealed in his great grandfather’s letters where “the emotional spirituality of Methodism offers him a language in which to openly express his love for his son” as in closing his letters with kisses. Robb concludes with a note about the significance of imagination for care. Although the tendency is to address care theory in the rational and analytic tradition of Western academic theory, he contends there is a need for an “imaginative superstructure to inform and motivate care” that religion can provide.

The third chapter in this section highlights some of the harms that can be wrought by well-meaning and caringly motivated but mis-guided applications of religious norms to sexual identities and practices. In his chapter “Theologically Motivated Conversion Therapy and Care Epistemology,” Steven Steyl explores how deficiencies in care ethical, epistemological dispositions misdirect some care-givers into choosing conversion therapies for themselves or their care recipients on the basis of religious belief. While motivations for conversion therapies are not inherently theological, Steyl focuses his analysis on therapies motivated by spiritual teachings that lead caregivers
to conclude that conversion therapy is morally good or permissible on theological grounds. After laying out harms associated with these therapies, he delineates “epistemic missteps” in the attentive, evaluative, and pragmatic phases of care. These missteps lead to harmful applications of psychotherapeutic conversion therapies designed to “sexually reorient individuals whose sexual orientation is deemed in some way undesirable.” Steyl argues that the harms of conversion therapy admit to “fecundity,” a phrase coined by Utilitarian philosopher Jeremy Bentham to indicate pains/pleasures that compound. To rectify the missteps of religiously based conversion therapies, Steyl develops a positive care ethical epistemology that emphasizes epistemic virtues and dispositions and denounces the corresponding subvices of inattention.

Family life and parenthood are standard themes of many religions. As the fourth contribution in this section demonstrates, the promise of the caring aspects of parent-child relations is not always religiously explicit, especially for fathers. In his chapter “To Shelter an Egyptian Firstborn: The Revelatory Potential of Care Ethics in Jewish Thought,” Jason Rubenstein considers a seeming gap on parenthood in Talmudic teaching, evident in Rabbinic alienation from their own children in favor of students. Rubenstein’s chapter is a self-defined “search for spiritual ancestors” and “attempt… to realize some of the liberatory potential feminism offers to men…defined by our caring work, and to Torah itself”. Rubenstein uses his experiences as a Jewish scholar and father to explore the value of feminism for the Torah and Jewish people, traditionally bifurcated into women who exclusively care for others and men who only study. Rubenstein notes that what is at stake “is not whether the rabbis performed childrearing work, but how they appraised the value of childrearing work.” Drawing inspiration from the poetry of Merle Felde, Talmudic stories such as that of Rabbi Akiva visiting his ailing student, and Nancy Hartsock’s Marxist feminist standpoint theory, Rubenstein extracts the liberational possibility of caring work in Rabbinic thought. Against masculinities rooted in hierarchical dualisms and abstractions, Rubenstein uses Rabbinic texts to highlight the Torah’s most prominent reflections on
INTRODUCTION

They include retellings of the story of Exodus, which recount God's care for vulnerable babies birthed in the fields by Israelite women enslaved in Egypt, and the efforts of these same Israelite mothers, in defiance of God, to save first born Egyptian sons doomed by God's final plague. Such stories “point the way to a more humane and more Divine future, to the recreation of holy time”, but also to the “irreducible ambivalence held by parents whose children are the beneficiaries of injustice.” Rubenstein affirms that the potential of such stories is to show that human caring and the memory of caring and being cared for might be understood as the foundation of the Torah, such that “the fundamental nature of the Torah, its alpha and omega, is a type of caring work.”

The final chapter in this section considers religious influences on the educational aspects of care ethics, especially as pertaining to sex education. In her chapter, “Care, the Sacred, and Sex Education in Slovakia,” feminist philosopher Adriana Jesenková discusses the Christian church’s exclusive grip on sex education in post-communist Slovakia. After the Fall of Communism (1989), a strict separation between the public and private sphere allowed the (particularly Roman-Catholic) Church to gain exclusive control over questions concerning sexual morality, to focus upon the sacredness of the family and the home, and to keep this sphere out of reach of human rights claims and sexual health issues. Misinformation, lack of information, and discriminatory attitudes have led to detrimental outcomes for the most vulnerable, particularly women and gender minorities. Looking from a care ethics perspective, Jesenková finds the concept of the sacred crucial for bridging the respective gaps between religious and ethics education and the public and the private sphere. Building upon the work of Tronto (2013) and Sevenhuijsen (1998), Jesenková argues for equal opportunities for all in a democratic society, for which proper sex education is vital to cultivate healthy sexuality and to develop young people as relational social beings. For this, it is important to reconceptualize the sacred as that which does not revolve around rigid religiosity but rather around care and identity formation as an inextricable part of building a democratic society of
equals that protects and develops the vulnerable. Jesenková turns to Noddings (2002) and Young (2010) for this. Noddings offers a view of the sacred home as a place of creatively and adequately responding to the needs of every member of that home, as well as where the ability to create such homes is cultivated. Young describes caring for bodies, home, and environment as a variable practice of identity formation in a critical reflection on value and (spiritual) meaning. This reconceptualization contests the home as sacred and helps overcome the dichotomy of private and public sphere. For if the sacred lies not in rigid religion but in a caring approach to all, sex education can no longer be considered as a privilege of religion but as a democratic right for all.

The third and final section of this volume contains chapters exploring care ethics, religion, and spiritual traditions in the context of justice. These chapters’ common theme is how justice can be best achieved through religiously infused versions of democratic community building and relational preservation as associated with an ethics of care. The first chapter of this section, “In the Desert with Hajar: An Islamic and Care-Based Approach to Disability Justice,” by Sarah Munawar, explores the care ethical, medical, and religious limitations that became evident after her father suffered a debilitating stroke and cardiac arrest. Munawar traces the de-colonial potential of a care-based and Islamic approach to disability justice that enables Muslims to interpret disability differently as a source of ongoing revelation. Rather than interpreting her family’s experiences as the tragic destruction of her father’s body or her and her mother’s requisite shift to invisible care-giving, Munawar explores the revelatory potential of these transformations embedded as they are in relational networks of secondary dependency through the story of the exile of the slave Hajar and her infant into the desert. Critical of standard Islamic medical discourses about care and disability within Islamic legal scholarship, as well as the multiple colonialisms that influence the treatment of disabled Muslims within medical-industrial complexes, Munawar finds in both “imperial attitudes” that locate the Muslim disabled as bodies without being and located outside of time. Munawar
uses the story of Hajar to challenge the ideas that disability is to be understood as divine punishment, misfortune, test, or noble pain that makes one more proximate to Allah, asking why it cannot lead instead to richer and more substantial networks of care based on doula. She posits that because a care-based epistemology of Islam is inherently relational, it can partner with feminist care ethics to reveal how multiple colonialisms interlock to disenfranchise disabled Muslims and Muslim caregivers.

Similarly, in “Mother Eberly’s Coin: Care Ethics, Democratic Politics, and North American Mennonite Women’s Movements,” religion scholar Jamie Pitts interrogates how religious movements and discourses can contribute to and expand the democratic work of care ethics. As he explains, what Pitts is proposing runs counter to standard framings of justice, which view religious discourse as antithetical to democracy. Pitts contends that caring religious discourse can have a democratizing effect on religious communities and their influence in society. In particular, Pitts addresses the historical experience of Mennonite women and the Anabaptist tradition. Pitts recognizes that not all religious care discourse supports democratic caring, but he wants to demonstrate a particular counterexample to resist a blanket stereotype of religiosity as undemocratic. Pitts offers a careful and balanced history of Mennonite women in Europe and the United States and how their commitment to social care is a driving force for the community. He characterizes this history as “women bringing to voice their experience as carers so that the full scope of their interests and values might be taken seriously within their communities.” Pitts finds that within their struggle, Mennonite women politicized their care work in such a way that democratized their religious communities. Ultimately, for Pitts, Mennonite women develop a religious rather than a secular form of democratic caring: “It is care ethics in a religious voice.”

In the third chapter of this section, “Reimagining Justice as Preservative Care for Sustained Peace,” author Robert Ruehl uses indigenous spiritual traditions to enhance care ethics’ ability to rethink a classic understanding of justice. Ruehl argues that a conception of
Justice rooted in desert, based on “getting what one deserves,” is limited because it overlooks whether rewards and burdens distributed by desert genuinely benefit the individual or their wider relations. Justice as it pertains to an excellent, thriving person, such as those accounts found in Plato and Cicero, make room for caring for particular relationships and should expand to include non-human relatives, specific places, and ecosystems because of how they can facilitate sustained peace. Indigenous philosophies enlarge care to impart justice with more than the mere avoidance of violence among humans, in part by reorienting the property and ownership relations of Western tradition. In Indigenous spiritual traditions, the earth and its resources do not belong to humans. Rather, humans belong to the places and things that nurture them. Humans have been given the gift of life within fragile but sustaining relationships, and a good human being not only shows gratitude but reciprocally cares for all aspects of their gifted, sustaining relationships. Such a conception of justice emphasizes the vital importance of “a positive peace that seeks to cultivate and sustain thriving relationships and lives for seven generations to come”.

Finally, addressing the need for spiritual and caring remedies to environmental degradation, Kimberley Parzuchowski turns to the urgent ecological question of the ‘fouling of our nest’ by humans in technologically advanced countries. Despite the abundant proof of endangered or destroyed ecosystems, the ecological changes that are required for our survival are not achieved. According to Parzuchowski, the failure is twofold: we fail to see the need, and we fail to care. To solve this failure of care, she argues, requires that we understand our ecological crisis not only as a moral but also as a spiritual crisis. Parzuchowski draws upon care ethical notions of dependency, particularly from Noddings (1984) and Kittay (1999). She argues for a reconceptualization of the western dominant and anthropocentric notion of moral subjectivity, as proposed by Native American theorist George Tinker (2004) and Martha Nussbaum (1990), among others. She points out that this anthropocentrism can also be identified in care ethics and Christian theology. So even though the ideas
of connectedness and entanglement are central to care ethics, Parzuchowski argues with Bonnie Mann (2002) that we risk getting caught up in self-referentiality because we have ceased to be wondered and revered by this. With the help of Martin Buber's theological view of relationships, she finds that some care ethicists have retained this idea. Joyful and communal rituals can rekindle our sense of wonder, cultivate a sense of connectedness to earth as earthlings, and contemplate experiences of the providence of nature. Parzuchowski offers a passionate plea, based on rich insights mixed with remarkable everyday examples and experiences, for a spiritually enriched care ethics that might help facilitate an effectively practiced ecological turn.

In totality, this volume represents new and exciting forays into the study of the rich interplay of care ethics, religions, and spiritual traditions. While the ideas here introduced represent cutting-edge interdisciplinary research areas, many of these chapters focus on mainstream world religions, especially Christianity, and thus do not represent the full potential scope of such an investigation. We hope that future projects and studies will be able to provide a yet broader and more enriched consideration of religions and spiritual traditions in the context of care ethics.

Acknowledgement

We express our appreciation to series editor Helen Kohlen for her helpful suggestions on the development of the chapters and to Madeleine Roelfsema for all her work in preparing the manuscript.

Works Cited


List of Figures

Section 2:

Inge van Nistelrooij

Fig. 1:
Louise Bourgeois, Ste Sébastienne (1998, ink on Xerox paper mounted on canvas)
Composition: 77 1/2 × 63 inches (197 × 160 cm)
Collection: Glenstone Museum, Potomac, Maryland
© The Easton Foundation/VAGA at Artists Rights Society (ARS), NY, c/o Pictoright Amsterdam 2021
Photo: Ron Amstutz

Fig. 2:
Composition: 48 × 32 1/2 inches (122 × 83 cm)
Collection: Glenstone Museum, Potomac, Maryland
© The Easton Foundation/VAGA at Artists Rights Society (ARS), NY, c/o Pictoright Amsterdam 2021
Photo: Ron Amstutz

Jason Rubenstein

Fig. 1:
Käthe Kollwitz, The Mothers (Die Mütter) (plate 6) from War (Krieg) (1923, woodcut from a portfolio of seven woodcuts and one woodcut cover)
Composition (irreg.): 13 1/2 × 15 3/4 inches (34.3 × 40 cm); sheet (irreg.): 18 9/16 × 26 1/8 inches (47.2 × 66.4 cm)
Collection: Museum of Modern Art, NY. Gift of the Arnhold Family in memory of Sigrid Edwards
© 2021 Artists Rights Society (ARS), NY
Section I: Theology, Authority, and Epistemology
Introduction: Does an Ethics of Care need the Concept of Forgiveness?

The concept of forgiveness has been controversial since a fairly early stage of Western philosophy. Any philosophical account of ethics that addresses the question of how those who experience abuse, attacks, or mistreatment from another can or should respond must consider the possibility of forgiveness, but the concept seems to immediately generate the potential for unfairness (why should the ones who were wronged now face ethical demands when they did nothing wrong themselves?), injustice (and why should those who did evil be set up as deserving of love and forgiveness rather than being held accountable or punished?), and a general lack of balance between committing wrongdoing and paying the appropriate price.

At the same time, forgiveness is a crucial part of a moral community. Finite, limited, dependent social beings need ways to address errors, wrong actions, and the choice to mess things up, and one of the vital aspects of addressing such issues is the possibility of forgiveness when wrong has been done. As Margaret Urban Walker argues, forgiveness is a crucial part of the moral reconstruction necessary for a process of preserving and restoring relationships (Walker 2006). It serves to preserve relationships, community, and connections, and it also allows those who have been wronged to move away from retribution to experience a relief from anger and resentment. And while
in some cases the harm that may potentially be forgiven is caused by those who are not in any concrete personal relationship with those who suffered, as Walker notes, forgiveness “should restore, or return to a functioning state, the conditions of moral relationship” (Walker, 162). But for it to do this, she goes on, it must restore relationships of reciprocal trust, maintain certain boundaries, and honor moral values. The basic point is crucial: forgiveness is important, and human social interdependence becomes almost impossible without it.

But an important part of relationality, such as forgiveness, comes with a potential for misuse and abuse. For an ethics of care which arose from the sense among many feminists that other philosophical theories erased or elided the experiences and practices of women, this recognition of abuse is no surprise. The argument for an ethics of care almost immediately faced deep concerns about the misuse and abuse of care itself, very often generated by the demand that women provide care without reciprocity, an assumption on the part of countless privileged male theorists that caring work was animalistic and lacking in rationality, all connected to the assumption that only practices that (very privileged) men engaged in had any moral weight (Friedman 1995; Larrabee 1993).

So an adequate account of forgiveness that recognizes its important place of moral prominence in an ethics of care while also recognizing the ways that it can be demanded, as care was, of the more vulnerable in society, while not recognized or supported when it is provided, is necessary. And one important part of this account should begin with a clear vision of how exactly that dynamic has occurred in the historic development of Christian thought about forgiveness and its relation to love. Just as forgiveness is crucial to care ethics, it is also crucial to a Christian ethics of love. And just as forgiveness can easily turn into an abusive demand of the vulnerable in an ethics of care, it can turn into an abusive demand that the vulnerable support, enable, even pay for the evil done by the powerful in a Christian ethic of love. Seeing where the concept goes wrong provides important considerations and limitations in the way that forgiveness is understood, developed, and incorporated into the theory overall.
It also structures the connection between care and forgiveness in ways that avoid turning care into a characteristic that increases the vulnerability of those who care the most and holds those who are abusive to account.

**Forgiveness and Relationality**

The place to begin is the necessity of some notion of forgiveness in any account of ethics that begins with emotional commitment to the other, whether that emotional commitment is identified as care, or love, or compassion. Ethical theories that focus exclusively on rational fairness between independent free agents do not find forgiveness an obvious necessity; almost by definition their account of agential interaction is a matter of contract, consent, and equal opportunity interactions, so if one or the other acts badly, the wronged agent simply needs to demand some adequate form of retribution to even the score, and interactions can resume in whatever way the agents prefer. Interestingly enough, many of the philosophical accounts of forgiveness rely on a Kantian ethical structure, which enables them to make forgiveness primarily a matter of individual choice, but also tends to build in assumptions about agents as predominantly equal, rational, and independent. As Kathryn Norlock notes, this atomism produces a problematic account of forgiveness in numerous ways. She writes, “In addition to assuming a view of the moral agent as individualistic and rationally self-interested, paradigm and Kantian accounts of forgiveness tend to demand a robust sort of integrity, self-respect, and autonomy, which precludes forgiving for reasons that fall short of what self-respect is taken to require” (Norlock 2018, 18). But for an ethical theory that begins with emotional commitment and focuses on relations between unequal, interdependent, social beings, the picture is significantly divergent.

Unequal beings, first of all, do not stand in relationships of equal freedom and independence. They are, instead, dependent on each other in numerous and weighty ways. Among other consequences of unequal relationships is that one or the other, often both, cannot walk away from a relationship even when it is not going well. If one
member of the relationship has enormous amounts of privilege and power, while the other is quite vulnerable and dependent, and if the powerful one chooses to act badly, the vulnerable one faces deep and problematic choices no matter how they react. If they walk away from the relationship, they may lose resources, protection, or needed assistance. If they remain in relationship, they face allowing the other to continue to act wrongly, and perhaps do worse. Some obvious examples of this scenario are family relationships of dependence in which one agent acts wrongly. The difficulty is particularly harsh when the more vulnerable one is seriously dependent (small children’s relationship to their parents, elderly and medically limited parents and their adult children, individuals with serious cognitive disabilities and the family members who provide their care and other similar cases.)

In all of these cases, if the vulnerable and dependent members lose the relationship they also lose necessary support and care, but if they remain, the wrong-doing may continue. While some social situations provide a level of outside relationships that might mitigate the power to abuse held by those in the more powerful position (other members of the community, social structures such as legal and social protective agencies, religious groups), even moving toward claiming this outside level of support can be dangerous and problematic for the vulnerable.

At the same time, wrong doing by the more dependent and needy members of social relationships is also complex. If those with more power and (as is often the case) more responsibility in the relationship have been wronged, they also face problematic choices. Walking away from vulnerable others who are in dependent relationships on one is not something to do lightly, and may make one hate one’s self more than allowing the wrong to continue. Moreover, breaking the relationship could do more harm to the vulnerable than is warranted, even when maintaining the relationship will result in the continuation of the harm. It is also the case that the vulnerable may be dependent, but may also provide absolutely vital aspects of care for the more powerful in the relationship, which can, again, generate deep problems in trying to maintain some reciprocal retribution of any kind.
Again, even moving to thinking about actual human relationships makes all of this deeply obvious and concerning. We can consider similar familial relationships (parents with young adolescents face some of these concerns on a regular basis) or move out into dependent relations of care that exist in so many other contexts (medical professionals and seriously ill patients; professors and very young, very vulnerable students) and in all of these cases, when the vulnerable do wrong, it puts the powerful (if they are caring individuals) into fairly difficult situations, and into cases where maintaining the relationship may be important and may also require deciding to not demand retribution or pay back that addresses the harm.

In deeply relational accounts of ethical connections, one of the necessary structures that must be in place to address the case of wrong-doing in the context of dependence and inequality, though it may seem ironic, is precisely forgiveness. When a child throws insults on values that are central to the parent’s sense of identity, or when a physician acts roughly toward a dependent patient, maintaining the relationship matters, but a real wrong has been done. Forgiveness allows the relationship to continue, allows the one doing the harm to (sometimes) recognize and apologize without fearing harsh retribution, and allows the one harmed to let go of anger and pain in many cases. There is even a sense of forgiveness that is essential to the health and happiness of the self. When one has done what one did not want to, among the appropriate responses on some occasions is the need to forgive one’s own self and move on.

Recognizing this does not entail that forgiveness cannot be misused and misunderstood. The next section of the paper turns to clear and deeply problematic examples of exactly that sort of problem with forgiveness. But before turning to those problems it is important to begin by seeing how and why forgiveness functions in dependent relational contexts, and to recognize that it is a practice that is vital to caring relations. As in so many areas of ethical life, the complexity in this case comes from the combination of these factors: forgiveness is vital for healthy relationships, and its importance is one of the factors that makes the misuse of forgiveness so damaging and harmful.
But also, an issue that will be addressed in the following section, forgiveness should not be understood as a matter primarily of individual morality. How it is structured socially makes enormous differences in the way it functions, ways it can be abused, and structures that protect both the importance and the proper structure of forgiveness in human communal life.

The Abuse of Forgiveness: Lessons from the Christian Tradition

Forgiveness is a central concept in Christianity, central to the teachings of the Christ of the Gospels and made integral to notions of divinity and the love of sinful human beings. As Esther McIntosh notes, “Forgiveness is the bedrock of the Christian tradition; it is at the centre of the Christian story” (McIntosh 2020, 269). In particular, the divine willingness to forgive is portrayed as the rationale for humans to forgive other humans, and the picture of Jesus on the cross praying for the forgiveness of those who were killing him is held up as the epitome of righteousness for all humans. This picture represents a very high standard of gentle response to viciousness and evil, and if the Christian community were itself a place where victims of such evil were cared for and protected that standard might be beautiful.

Christianity is clearly not the only religion that places forgiveness in a central place. Julia Kristeva goes so far as to attribute forgiveness to most religions as a necessary catharsis or purification of hatred and evil, and that it is this promise of forgiveness that “gives faith that forgives its greatest appeal” (Kristeva 2010, 193), though she also considers this part of the danger of religious tendencies toward fundamentalism. In the Christian tradition, which is the focus of this chapter, forgiveness is closely associated with absolute altruistic love, directed at the other with no thought or concern at all for one’s own benefit or needs. And given the identification of God with Love, and with precisely this type of altruistic love, the expectation that humans, bearing the image of God, will themselves love and forgive without demanding punishment or repayment becomes very strong. As Lewis Smedes states in his explanation of forgiveness, “God is the
original master forgiver” (Smedes 1996, 21), and beings who are expected to reflect the image of that God must themselves heal the wrongs of life, among other ways, by forgiveness.

Because of the importance of forgiveness to Christian theology and philosophical thinking, it has been the focus of some feminist philosophy of religion, most notably Pamela Sue Anderson, whose thought developed in thought-provoking ways over time. Anderson’s earlier work focused on the ways that forgiveness provides freedom from destructive emotions such as resentment, even when there is no acknowledgement of harm from the wrong-doer, as well as the ways in which forgiveness should not be understood as an easy or straightforward emotional response, but is instead a struggle that requires adequate time and space (Anderson 2001). In later work Anderson moves to weightier consideration of the tension between forgiveness and justice, particularly in cases where an abuser refuses to move toward responsibility or reparation, and eventually argues that in cases of ongoing abuse it may be necessary to withhold forgiveness in order to protect self-respect for the abused (Anderson 2011; 2016; see also Fiddes 2020.) The shift in Anderson’s thought was partially connected to recognition that on-going sexual abuse within the Christian tradition makes the traditional glorification of forgiveness under any circumstances problematic. And, unfortunately, there have been numerous cases of sexual abuse followed by the abuse of the concept of forgiveness, in the context of the Christian tradition.

Both the Catholic church and the Southern Baptist Convention (SBC) have in recent years been identified as locations where multiple and egregious sex abuse practices have gone on extensively. In both contexts, there has been a strong tendency to exclude those who were abused from the community, while protecting the abusers to a very high degree, and one of the crucial parts of that process was demanding forgiveness for the abuser from the abused, from the community as a whole, and demanding forgiveness without any concern for changing the abusive practices. As Kristin Kobes Du Mez notes in her historical study of masculinity in American Christianity:
Since 1998, around 380 perpetrators within the SBC had left a trail of more than 700 victims....Many victims had been urged to forgive their abusers, and it was victims, rather than predators, who frequently ended up shunned by their churches (Du Mez 2020, 291).

Similar events in the Catholic church had been making the news for years before these events, and like them, involved powerful protection of the abusers, shunning of the abused, and demands for forgiveness without any system of accountability or even remorse.

When those in power demand forgiveness from those who are vulnerable, who have suffered severe abuse, and when that demand arises without any care or protection of those from whom it is demanded, the misuse of forgiveness is at its peak. And unfortunately that has been done far too many times in communities who claim to be structured by love and care for the weak. It is precisely because forgiveness is important and powerful that it has been used in this way, usually in order to prevent any actual accountability for the abusers. The ends sought are not in the least supportive of or healthy for those who suffered the abuse. Instead, a faux version of forgiveness is evoked to prevent the abused from bringing any charges against the abusers, their public statement of forgiveness is demanded by the powerful rather than freely offered, and they frequently are the only members of the community who pay a price for the abuse, a horrifically vicious response to those already wounded. But the demand for forgiveness is heavily beneficial for the abusers, since it justifies, for many in the community, maintaining the abusers in their ranks of power, protecting them from any charges from outside the community, and providing them with extensive financial and emotional support so that they pay no price for what they have done.

This sort of abuse of forgiveness involves layers of inappropriate instantiation of the basic concept. We can begin with the most basic of misuses—the demand by the powerful, themselves either abusers or supporters of abusers, that the victims forgive. Within the Christian religious context this is a particularly awful misuse of power, because those who have the power and demand forgiveness are standing in roles of spiritual (righteous) leaders, so their demand (command)
is a particularly powerful one, and one that involves betrayal of the central commitments they ought to have (Scarsella and Krehbiel 2019). But more generally, any time those with huge amounts of power use that power to demand forgiveness from the vulnerable who already are suffering from the abuse for which they are being forced to ‘forgive’ the basic structure of forgiveness is destroyed.

This first, and obvious case of the use of forgiveness by the powerful to undercut the meaning of the harms and abuses caused makes clear two of the most basic ways that forgiveness should never function. Forgiveness should not be demanded by the powerful in order to protect themselves from accountability. In more general terms, this also identifies one central part of legitimate forgiveness, in that it identifies the problem of other agents demanding forgiveness rather than the agent who is truly capable of forgiveness being the one who decides how to act. Both the misuse of power to protect wrongdoers and the attempt for people to control how and when other agents dispense forgiveness are wrongful uses of the concept because both involve treating the one who forgives as simply an object to be used, not as a moral agent with the capacity and the right to determine how forgiveness will be used. And both of these are deeply wrong uses of the notion of forgiveness.

To forgive starts with the recognition (and being recognized by others) that one has the right to demand punishment, or even revenge. There really is no point to public avowals of forgiveness when those being asked to forgive have already been excised from any moral standing or power, other than to provide justification for the abusive power structures that led to the abuse in the first place. Particularly when the abuse is rampant, systematic, and focused on ethnic or racial groups in addition to gendered structures, the attempt to force forgiveness and deny the righteousness of anger and fighting the abuse and the abusers demonstrates a problematic perspective on the part of those endorsing forgiveness (Jaycox 2020; Pearl 2020). This is the rampant abuse of power to provide even more support for those who already have used their power to victimize the vulnerable; the meaningless public statements only serve to prevent any other victims from
expecting care or support. As Jean Hampton notes, “how society reacts to one’s victimization can be seen by one as an indication of how valuable society takes one to be, which in turn can be viewed as an indication of how valuable one really is” (Murphy and Hampton 1988, 141). When the powerful force victims to publicly make forgiveness statements without any concern for the suffering or abuse that has occurred, the message is clear: these lives mean nothing.

Further, as numerous analyses of forgiveness have noted, forgiveness does not preclude standard legal punishment being nonetheless applied (Murphy and Hampton 1988, 150; Pope and Geske 2019). So when it is used for this purpose, again, it seems clear that there is something deeply wrong with the situation. It is not actual forgiveness that is taking place; instead, the agent who suffered harm is being used to enable the abuser to continue to abuse others, while being diminished in value by that very use.

A third aspect of the improper use of forgiveness also occurs in these cases, specifically the denial of the need for some form of accountability on the part of the wrong doer. The demand for public statements of forgiveness functions specifically to protect the abuser from any accountability, again, a deeply problematic demand under any conditions, and certainly problematic when it is forced on the one who suffered harm. This harm, in particular, generates a deeply problematic damage to what Margaret Urban Walker calls the ‘important normative boundaries’ that are essential to any sort of healthy moral community (Walker 2006, p. 96). Practices of absolving the powerful from responsibility for the wrongs they do splinter the structures that make social cooperation and trust possible.

Three basic aspects of forgiveness thus can be easily identified: it should not be demanded by others, it should not be forced by the powerful on those who are vulnerable, and it should not be exercised specifically to ensure that those doing deeply harmful things are never held accountable. These are all central aspects of the proper existence of forgiveness.

Other ways in which the concept of forgiveness can go wrong are more a matter of degree than of absolutely destructive of the basic
concept. As several theorists note, the emotions felt by those who undergo harm or abuse include anger, resentment, the wish for revenge and the like (Aumann and Cogley 2019; Nussbaum 2016; Blustein, 2014; Norlock 2009; Murphy and Hampton 1988.) These emotions can make it very difficult for the one who suffered harm to even consider forgiveness, and depending on the degree of the harm suffered and how the agent holds themself to ethical standards, they can undercut the very possibility of forgiveness. When the harm is horrific, this seems appropriate in many cases, but if the harm is relatively minor and the victim’s response is far too vindictive, the inability to move toward forgiveness can take on a measure of negative evaluation of character. Likewise, when the harm was not completely intentional (though perhaps caused by negligence) the responding anger can be too strong and result in problems. Because forgiveness is an important part of interrelationality, and because harms that are relatively minor or unintentional often do require that the one who caused the harm be considered in many cases for forgiveness, agents who become obsessed with anger can fail at this aspect. But because forgiveness is not something that can be demanded by others, agents who fail to forgive under these circumstances may act within their rights even while acting in ways that reflect on their character problematically. Clearly this sort of issue is one that varies with degrees of harm, intentionality, and, importantly, perspectival recognition of how harms are weighed differently by the privileged and the vulnerable, in ways that often ignore true harms and weigh even minor accountability on the part of the powerful as unacceptable.

And, though it goes beyond the scope of this paper, forgiveness can generate any number of other issues, from when those harmed over-emphasize their claims to reconciliation in problematic ways, to when those who offer forgiveness use the public claims to forgiveness to attack others who might not be guilty of any serious harm. In this last category one can think of the many White people who feel so harmed by groups such as Black Lives Matter that they feel as though they have the right to demand that the BLM groups apologize, but, claiming the high road, they offer forgiveness without demanding
legal or public apologies…and are actually using the language of forgiveness to maintain deeply racist social structures. Joshua Lawson, for example, the managing editor of The Federalist, in a blog post describes the BLM movement as a “movement that removes the forgiveness, hope, and peace of the gospel and replaces those core values with continual protest, fear, and anger.” But, he goes on, he himself accepts the teaching of the Bible, when it “reminds us in Romans 12:19. ‘Dear friends, never take revenge. Leave that to the righteous anger of God’” (Lawson 2020). In his own mind, it is those protesting racial injustice who are doing evil, but he asserts his own unwillingness to demand punishment, asserting, instead, his moral purity. Attempting to fairly evaluate where agents fall in considerations of forgiveness takes on complexity in a world where the agent from whom forgiveness is demanded is in that position precisely because they are considered subordinate to a more privileged example of humanity.

And as the wrongs addressed by forgiveness are complex and seen from varying perspectives, it can also be the case that wrong-doer and forgiving victim may interpret the nature of forgiveness in very different ways, and victims can simply get their response wrong. As Jeffrie Murphy notes in Forgiveness and Mercy, it is not always clear that forgiveness is compatible with respect for the other who has committed the wrong. “Suppose you had wronged someone. How would you like it if that person assumed that you could not come to repentance on your own but required the aid of his ministry of forgiveness? Might you not feel patronized—condescended to? Forgiveness can be an act of weakness, but it can also be an act of arrogance. Seeing it this way, the wrongdoer might well resent the forgiveness. ‘Who do you think you are to forgive me?’ he might respond to such a well-meaning meddling” (31). Adequate analysis of the many complexities of forgiveness, repentance, the measure of wrong done, and even the question of self-forgiveness are far beyond the focus of a single paper.

As with any human social structure, there is no absolute way to ensure that all moves toward forgiveness are appropriate, that
forgiveness is always the right move forward, or that every claim that one has forgiven is a positive reflection. But what does need to be seen is that the potential for abuse of forgiveness is massive, and there are ways to set it up so that it is not so easily turned into structures abused by those who already have too much social power and want to prevent the more vulnerable from holding them accountable. But to make these structural situations possible it is vital to move beyond a sense that forgiveness is primarily (or, worse, entirely) an individual matter, and begin to recognize the structures that make it a largely functional social structure. This is the issue the rest of this essay will focus on, motivated by how a care-oriented account of ethics, emphasizing the interrelational nature of human life should take on certain central social accounts of forgiveness that identify ways it should not be used.

The Move from Individual Forgiveness to Social Structures that Construct Forgiveness Properly

Analyses of forgiveness sometimes err on the side of focusing too much on individuals and their relationships, while largely setting aside a focus on how the structures of forgiveness, whether narrative structures or actual policies, are formed and function in the broader community. Charles Griswold’s analysis, for example, explicates forgiveness as a two-person relationship (Griswold 2007, see also Konstan 2010). While there are certainly reasons in some cases for beginning with a two-person relationship, this also runs the risk of making decisions about forgiveness, as well as the whole structure of how it is understood more generally in a large community too focused on individuals, often without adequate concern about the complexity of various relationships of power and control in the social context.

Discussions of forgiveness that arise in political theory are important here as they bring to light the various ways that narratives of forgiveness need to incorporate a recognition of the social structures within which it functions as well as the ways that it can be misused by groups to prevent adequate responses to various abuses. In
particular the literature on how forgiveness needs to be understood in the context of Truth and Reconciliation commissions, as well as analyses of forgiveness that bring Hannah Arendt into the conversation, shift attention across the boundaries between social and individual moral thought (Peys 2020; Grey 2019). It is vital to be cognizant of the ways that humans are interrelational, empathetic, connected beings, as the ethics of care theorists have developed to a phenomenal degree. As Arendt writes, “even if I shun all company or am completely isolated while forming an opinion, I am not simply together only with myself in the solitude of philosophical thought; I remain in this world of universal interdependence (Arendt 1954, 242).” As members of the interdependent world, and as agents responsible for the actions we choose to take, we live with a need for forgiveness, and a need to structure that forgiveness into the social and political structures within which we live. Arendt’s analysis of the necessity and complicated nature of forgiveness in the political realm begins with a conception of action that always generates the predicament that an action, one done, cannot be undone, it is irreversible. She then goes on to bring in forgiveness:

The possible redemption from the predicament of irreversibility—of being unable to undo what one has done though one did not, and could not, have known what one was doing—is the faculty of forgiving... forgiving serves to undo the deeds of the past, whose ‘sins’ hang, like Damocles’ sword, over every new generation (Arendt 1958, 237).

She goes on to explain that forgiveness as a social practice is crucial to the very possibility of human freedom and breaks the deterministic causality that structures so much of the rest of the world.

But because forgiveness is essential for any human life, it becomes a vital aspect of care of the self, and should be built into social structures for all humans, not just those with power. And it is necessary to recognize how without appropriate social structures, ethical demands on individuals can go very wrong very quickly. We need to be talking across some of the standard philosophical silos to make sure that all of these concerns are addressed. And in the context of a caring account of forgiveness the need is particularly important.
Social accounts of what forgiveness is and the proper structure of forgiveness in human life need to recognize all of these dimensions. People are interconnected and dependent continually on the emotional and supportive, caring relationships in which they live, and forgiveness is important because it plays a crucial role in allowing those structures to exist. But that picture of forgiveness is improper if it does not recognize how important it is for individuals to care for themselves as well as others, especially when the duty to care is structured in deeply racialized, gendered and class-based ways (Pearl 2020). Imbalances in how care is provided make it essential that social accounts take unfair structural matters into account. And, even more than this, accounts of forgiveness need to be structured to address the abuse of power in the actual world, not ideals of mutual love that ignore how some who love are abused by the very authority figures they have been taught to respect and trust.

Given the earlier discussion of the abuse of forgiveness in contexts where it functions to prevent the vulnerable from holding those in power accountable, there are clearly a number of aspects of any concept of forgiveness that need to be clearly and deeply structured into the social understanding of what forgiveness is and when it can legitimately be enacted. And while a complete and absolute account is well beyond any relatively short essay, basic aspects of any decent account can be identified and noted.

The first, and most obvious, is a basic principle of who gets to demand forgiveness, and it must be understood to belong to the abused or the victim, not those in power. One reason for this is that there are wrongs that ought not to be forgiven, if they are sufficiently heinous. As Jeffrey Blustein points out, “If there are wrongs that are truly unforgivable, then refusing to forgive another for his wrongdoing is not always morally objectionable” (Blustein 2014, 129). More than this, forgiveness is not something that the harmed have a duty to offer their oppressors. Committing wrongdoing against someone else does not carry with it the right to demand that the one harmed also now owes one forgiveness. A faulty view of forgiveness that structures it in this way turns it into the demand that those wronged
accept even more burdens and duties as a result of being harmed, a particularly horrible way of structuring this particular moral concept. But while the wrongfulness of this approach can be seen relatively easily in the abstract, in actual practice it is much more complex and can easily shift into this mode even when those articulating the importance of forgiveness believe they are presenting it properly.

Consider, for example, the very simple case of two children. Child A has whacked Child B on the head with a wooden block, and has now been instructed by a parent to apologize. Once the apology has been offered, Child B is often informed that now it is their turn to forgive, because that is the right response to an apology. It seems as though this is simply a matter of parental teaching of basic moral responses, what Michael Slote describes as the ‘inductive training’ of children that is necessary to develop empathy (2007). But the inductive training that Slote describes encourages children to understand and feel the harm that their action has caused on another, in this case the pain that A caused to B. The demand that the bruised child forgive, practical as it may seem, adopts the opposite pose, one that Slote rejects as authoritarian, that instead of helping the development of empathy focuses on the use of power to try to force a child to obey certain rules. Slote notes that:

Induction contrasts with the ‘power-asserting’ attempt to discipline or train a child through sheer threats…and with attempts to inculcate moral thought, motivation, and behavior (merely) by citing, or admonishing with, explicit moral rules or precepts (2007, 15).

The command to forgive imposed on the child who has not caused harm has already begun the move toward turning forgiveness into a duty rather than a free decision on the part of the wronged. It is only a short step from this training to the demand by church leaders that victims of sexual abuse forgive, and both parties of the event will have been trained to expect this result. And the religious basis for this approach, coupled with its use in contemporary political reconciliation attempts, results in leaving the victims of abuse vulnerable to on-going abuse as noted earlier, a vulnerability that is ramped up
when forgiveness is moved into social and political contexts (Grey 2019).

What attention to better accounts of forgiveness in the social and political context can help with is the capacity to draw attention to better or worse ways to structure the basic core of forgiveness. Sam Grey returns to Arendt to restructure this particular aspect of forgiveness, and the conclusion is that forgiveness needs to have a focus on the past injustices of settler colonialism and racial injustice, coupled with contemporary attempts at reconciliation. Grey argues that an Arendtian approach to forgiveness calls our attention to the ‘precursors of forgiving’, the need for acknowledgement, reflection on, and social restructuring of the power dynamics of settler colonialist racial injustice (Grey 2019, 59). Also drawing on Arendt, Christopher Peys describes forgiveness as “a powerful act precisely because it cares for the worldly ‘web of human relationships’ that compromise the ‘world,’ the political space of freedom” (Peys 2020, 67). The worldly space of freedom explicitly makes it impossible to consider forgiveness a simple duty or what the wronged person owes. Moving forward in freedom requires the precursors of forgiving, the recognition of unjust structures and events, and the mutual move toward a juxtaposition of the freedom and equality that Arendt considers essential to the political realm.

If we begin with this social/political account of forgiveness, then as we approach individuals with recommendations or support for forgiveness, we must begin with the acknowledgement that as long as the harm emerged from and is built into oppressive and evil power relationships, and as long as those relationships continue to structure human lives, moves toward forgiveness require active change and protection of those harmed. Even between the two kids we started with, if one is bigger, stronger, and devoted to whacking things with blocks, then forgiveness isn’t appropriate until the structure changes, which may require putting the blocks out of reach until the whacking stops. Without this structure being built into forgiveness, it does not have an ethical presence in human relationships.
This brings us to the second feature that any adequate account of forgiveness needs to make clear both at the personal level and the social structural level: forgiveness must never be used by the powerful to control and increase the vulnerability of those who have been harmed. This tends to overlap with the first: when forgiveness is constructed as the moral duty of the abused, it becomes pervasive that those with power will use that power to command the vulnerable to forgive and so exhibit the correct level of performing what duty requires. Unjust power structures and inappropriate accounts of moral duty can reinforce each other in extremely problematic ways. But at the conceptual level the two issues can be recognized as slightly different in that the first is an inappropriate deposition of demands on the individual while the second involves a serious misuse of power.

Again, this crosses the boundaries of individual and social/cultural understandings. At the personal level, it is very typical for abusive partners to use their power in a relationship to demand forgiveness by those they abuse, and, again in conservative Christian contexts this demand is often supported by the community as a whole. At the social and cultural level, the language of forgiveness frequently emerges from authorities, either legal or religious or cultural authorities, who use their position as the arbiters of what is right to place enormous pressure on the more vulnerable to forgive. Writing about the media representations of Black families who lost loved ones when white supremacist Dylan Roof murdered worshipping members of Mother Emmanuel African Methodist Church, Andre Johnson and Earle Fisher note that the broader expectation in society consistently is that African Americans will forgive the perpetrators of racist violence, and that this expectation connects heavily with religious narratives of forgiveness (2019, 10). But they also bring to the surface narratives of unforgiveness that explicitly reject the pressure on African Americans to forgive as a denial of the basic humanity of Black Americans (14-15). Likewise Myisha Cherry notes that when those who forgive are held up as moral exemplars in spite of sometimes horrendous harm, the use of them as exemplars can be emotionally manipulative when it implies a duty to forgive. The actions of deeply
moral folk who forgive under harsh circumstances are worthy of respect, and in some cases should be examples we try to emulate, but their existence does not give those who currently suffer reasons to think that forgiveness is their duty as well (2017). When forgiveness functions structurally to deny the true evil of actions, and to demand and expect those who already pay the cost of racism to provide support for the racists who harm them, it has become immoral.

Finally, and again, not removed from the two concepts already identified, but instead frequently interconnected, is the concept that forgiveness should allow the perpetrator of the harm to walk away without accountability or restorative commitments. While numerous philosophical accounts of forgiveness begin with the necessity of remorse and apology from the perpetrator (for example, Griswold 2007; Murphy and Hampton 1988), the actual function of forgiveness in hierarchical communities frequently asserts the demand for forgiveness under conditions when the perpetrator has not expressed any remorse or recognition of blame. Even worse, there is evidence that the forgiveness, in some of the cases connected with the Catholic sex abuse scandals, functioned to generate a sense on the part of authorities within the church that the abuse did not need to be reported to secular authorities or punished (Gleeson and Zanghellini 2015.) It is vital to separate the notion of forgiveness from the question of which crimes and harms justify punishment, and when this line is blurred, again, forgiveness becomes a problematic structure. What is needed is a widespread structural commitment to separating issues of punishment and accountability from issues of whether the individuals who experienced harm have chosen to forgive or not. Unless these questions are widely seen as completely separable, forgiveness again becomes problematic.

Conclusion: Yes, Care Ethics needs Forgiveness, but it also needs to avoid the Harms the Concept can cause

Forgiveness is not an easy or simple choice, and while the three aspects identified here are not the final word on the topic, they begin to shape some of the limits on how the social account of forgiveness
must be structured. And from a care perspective, this is an important consideration because it is not enough for individuals to care and support caring relationships. A caring society needs to be structured to support and protect the provision of care and to limit and destructur-ure relationships that undercut or destroy care (Held 2006; Tronto 2013, Groenhout 2019). Because care work is so frequently required of the more vulnerable members of society, and is neither adequately respected or economically rewarded, if it is treated as the individual’s choice it becomes something the powerful can demand of those with less power, and the resulting structures are immoral.

Humans cannot live without care, and to adequately recognize this, humans also need to recognize that the social structures that support care are vital to human life. This is particularly clear in cases such as social and cultural definitions and examples of what forgiveness is and how it ought to function in the imperfect world in which we live. Humans do hurt each other, cause deep injury, and yet even when that has happened, maintaining caring relationships needs to find a way to continue. Forgiveness plays a crucial role in this continued existence even after abuse, and it cannot be discarded. But if it is not structured properly, and especially if it becomes merely an individual moral duty, it no longer moves toward maintaining caring, healthy relationships. Instead, it becomes a tool used by the powerful to force the abused to pay an even higher price for the evil that the powerful have already caused. The origins of an ethics of care in feminist theorizing brings this relationship between privilege and abuse of power to the forefront, and also makes it clear that it must be taken seriously. As Virginia Held argued, “The ethics of care must not, and in my view does not, lose sight of power as the very real capacity to oppose what morality, even if persuasive, recommends, nor of the power of the structures that keep oppression in place” (Held 2006, 150). For forgiveness to function properly in caring social communities, it needs to be structured in ways that diminish abusive power.

And as is clear in the religious cases of sexual abuse that took place in Christian churches which identified themselves with a God
who is Love, in cases such as these the abuse of forgiveness becomes horrifically damaging to the vulnerable whose need for love and compassion was part of what made them both vulnerable to abuse and then subjected them to the further violation of being forced to forgive and (frequently) then excluded from the community in which the abuse occurred. One of the persistent narratives that one hears from those who were abused is the way that the whole experience destroyed their faith, undermined their ability to love, and set them up for profoundly difficult psychological battles to simply function properly in life.

When the language of love is used to destroy the capacity to love, it is deeply evil. Care theory needs to take this lesson seriously. Care is central to human existence, but that does not mean that the language of care cannot be misused in ways that destroy the ability of the vulnerable to experience or respond to care. In bringing the language of forgiveness into an ethics of care, it is of highest importance that the structure of what is understood to be central to forgiveness makes it much more difficult to use in this way. And that requires that forgiveness remains the agent’s to choose, not another’s to demand, that forgiveness is never allocated to the powerful to control in order to protect their own power, and that forgiveness never is primarily structured as absolving the wrongdoer from accountability.

Works Cited


Against Moral Certainty and Authority: How Dogmatic Religious Ethics is Incompatible with Care Ethics

Maurice Hamington

“My name is John, I love you and Jesus loves you. [spoken from his kayak to the Sentinelese on the shore of North Sentinel Island].”
John Allen Chau (Conroy 2019)

“Go therefore and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit.”
Matthew 28:19 NSRV

This chapter begins with a tragic story. Like many human tragedies, there are numerous aspects and ways of interpreting the story. Still, I focus on the role of moral certainty and authority, and by contrast, the lack of epistemic responsiveness and humility, that serve to underwrite this tale. Although the attention here is to a particular event, the ultimate concern is how dogmatism hinders morality, and specifically care. I contend that care ethics has a subversive element in its resistance to authority and certainty that is incompatible with a strict ideological view in religious morality.

On November 16, 2018, 26-year-old evangelical Christian missionary John Allen Chau was killed when trying to engage and convert the Sentinelese, a small community of 50 to 100 indigenous people (Sasikumar 2019, 64) living on North Sentinel Island, part of the Andaman Islands in the Bay of Bengal, India (Conroy 2019). Described as “the most isolated tribe in the world” (Sasikumar 2019,
the Sentinelese have been protected by the Indian government with a three-mile boundary that includes a prohibition on photography. Accordingly, little is known about the Sentinelese language or culture. However, they are regarded as an ancient community descended from African migrants who traveled to the island roughly 50,000 years ago (Tharoor 2018, 4). Historically, the Sentinelese have been intentionally reclusive and violent toward outsiders, including, for example, attacking a film crew in 1974 with arrows (Pandya 2006, 174) and killing two poaching fishermen in 2006 (McDougall, 2006).¹

Chau’s death culminates a narrative of his life: a faithful believer who wanted to spread the good news of his religion. The published articles about Chau, who left behind an extensive biographical footprint on social media and in diary form, describe him as having two passions: Christian evangelizing and outdoor adventures. Chau was born in Alabama but raised in Vancouver, Washington. Growing up, he was extensively engaged in the Pentecostal church attending Christian schools, scouts, and missionary activities (Conroy 2019). Ultimately, Chau graduated from Oral Roberts University. By all accounts, he was smart, made friends easily, and had a passion for his religious beliefs.

Despite his young age, Chau had plenty of missionary and quasi-missionary experience through international travel (Conroy 2019). He took his mission to the Sentinelese very seriously. For example, Chau prepared by participating in a three-week missionary “boot camp” sponsored by All Nations Kansas City² that included

¹ Anthropologist Vishvajit Pandya questions the extent to which the Sentinelese image as violent and savage is a colonial misrepresentation. For example, they have been described as cannibals although this claim has never been proven (2006, 175).

² All Nations Kansas City is a chapter of All Nations International, an organization with a mission dedicated “to make disciples and train leaders to ignite church planting movements among the neglected peoples of the earth” (All Nations). Their website includes a list of “Priority People Groups” to target for evangelization as well as training resources such as “Senders University” which helps train for “taking the good news to the last remaining unengaged people groups on earth.”
missionaries role-playing as indigenous people who could not understand Chau and acted aggressively toward him. Chau was described as an excellent participant (Gettleman, Schultz, Venkataraman 2018). Chau also undertook linguistic and emergency medical training to ready himself for the trip (Gettleman, Schultz, Venkataraman 2018).

Chau visited the Andaman Islands several times between 2015 and 2018 but only made contact with the Sentinelese on his final trip. On 14 November 2018, he made his approach at night to avoid the coast guard and navy patrols. He hired some local fisherman to take him near the North Sentinel Island, where he used a kayak to paddle to shore on his own, taking gifts, including fish. The fishermen waited at a safe distance returning to the island at set times to bring Chau food. On 16 November, Chau was shot by arrows but escaped back to the boat for supplies. Perhaps foreshadowing his demise, he left the fisherman with a journal and went back to the island for a final time. On 17 November, a burial with the body matching the description of Chau was spotted from offshore (Sasikumar 2019, 57-58). Some of Chau’s final words recorded in his diary reveal an ambivalence toward dying yet a conviction to carry on: “I think I could be more useful alive, but to you, God, I give all the glory of whatever happens.” He also asked for forgiveness on behalf of “any of the people on this island who try to kill me” (Conroy 2018).

There is no question that Chau had a desire to do good and believed he was acting in accordance with religious moral authority, “God’s will.” However, is certainty and adhering to authority sufficient to constitute care ethical action? Does it demonstrate care? This chapter seeks to highlight the anti-authoritarian nature of care. To do so, Chau’s case is examined as an example of how religious normative assumptions about the good can diminish the humility and responsiveness necessary for the moral good of care.

**Moral Forces: Personal, Political, Religious**

There is nothing simple about considering the moral factors in Chau’s death. It is clear that his death is a tragedy, but as one digs into the
facts of the case, the moral analysis becomes cloudy. Four players are briefly outlined.

Given his demise, Chau is the central ethical figure. A typical response found in the media is that his trip was a foolish act by a reckless individual who took his mission to an extreme level. As one person on Twitter claimed, “John Allen Chau is not a martyr. Just a dumb American who thought the tribals needed ‘Jesus’ when the tribals already lived in harmony with God and nature for years without outside interference” (Conroy 2019). Indigenous advocacy groups agree, noting that the Sentinelese just want to be left alone and have legal protections to do just that (Survival 2018). The general conclusion of the popular sectarian analysis is that Chau unnecessarily put himself at significant risk in pursuing an illegal and immoral act. However, placing all the moral culpability on Chau's shoulders does not entirely honor the complexity of the circumstances. Keep in mind that the goal of this chapter is not to adjudicate who is to blame for Chau's death but rather how moral certainty can fund misguided care, which manifested itself in this case by missionary work. Further discussion of Chau's actions are addressed later.

There are several other actors in this tragedy, including the Sentinelese. Although the Sentinelese killed Chau, commentators implicitly offer them moral absolution analogous to when an animal kills a human. However, part of the process of respecting the Sentinelese is to remember their moral agency. They did indeed kill him, and in most circumstances, the party that committed the murder would be the central focus of any ethical interrogation of this tragedy. One could argue that their actions were a form of self-defense given the history of death and destruction wrought by unwanted missionaries. Perhaps Chau's persistence made violent action inevitable. These arguments have some merit, but it does not take much to imagine that the Sentinelese could have taken a less-lethal action to communicate their desire to avoid outsiders. One can respect a culture without falling into an absolute moral relativistic stance that exonerates all their actions. Indeed, the Sentinelese did not
demonstrate any care for Chau, but neither did they initiate or desire the encounter.³

The confrontation also had a broader social and political context, which brings us to another actor in this case: the colonial power of India. The autonomy and protection of the Sentinelese rely on the nation-state of India. Clearly, India cannot ensure complete isolation (as it failed in the case of Chau and others), nor is it immune to economic issues that threaten the privacy of the Sentinelese. As recently as 2018, relaxed some of the protection laws as a result of pressure from the tourist industry (Sasikumar 2019, 66). A few anthropologists argue that bucolic visions of cultural isolation are a fiction (Hill quoted in Gettleman 2018). John Bodley points out the paradox of isolation when he asks how can the outside world know what the Sentinelese need if there is no contact with them (Gettleman 2018). Even if they are the most isolated peoples in the world, the Sentinelese are still subject to decisions made by powerful others around them, so there is a geopolitical history and context to consider in this tragedy. The Indian government demonstrates a kind of care analogous to that witnessed in colonial circumstances with the one caveat that India is not actively endeavoring to extract any apparent resources from the Sentinelese. They have complete control over the fate of this indigenous community. Should the Indian government be doing more to ensure the well-being and flourishing of the Sentinelese?

Third, and most important for our consideration in the rest of this chapter, what is the role of dogmatic and authoritative religious morality in Chau’s death? At least in part, Chau was driven by an evangelical Christian faith that placed proselytizing as an ultimate good, so much so that martyrdom is an acceptable subtext. Do the religious organizations that trained and molded Chau’s commitment

³ The challenge of isolationism is an interesting one for a relational care ethics, given the vital importance of subjective need expression and care assessment as well as the ontological claim of relational embeddedness.
to spreading the faith care about the Sentinelese, or about John Chau for that matter? There are approximately a half-million Christian missionaries operating in the world today motivated by a conviction about the truth of their message and their faith.  

Religious Moral Certainty

“There are no more dangerous people on earth than those who believe they are executing the will of the Almighty. It is this conviction that drives on terrorists to murder the infidel.”


Certainty has an understandably positive connotation in Western thinking. It also has a positive psychological impact. We generally have a feeling of well-being when we are sure about our context, our future, and what will happen next. Humans save money, buy insurance, live indoors, and create routines, all as part of a quest for greater certainty in their lives. On the other hand, surprises and unexpected events can create disequilibrium, sometimes resulting in disconcerting anxiety. Religion can provide a clear and certain cosmological path by answering big questions of ontology and metaphysics through an authoritative position of invoking a deity or otherwise powerful authority. Accordingly, religion can bring calm to existential anxiety over life’s purpose and the terror of inevitable death. Religion can also offer moral certainty, answering the fundamental question of the right thing to do? The compatibility of powerful authority and certainty with authentic care is what is at question here.

All religions provide some degree of moral teaching. Religion also supplies one of the few contexts outside of education where ethics can be discussed on a regular basis. Such opportunities for moral discussion are ostensibly positive, providing needed engagement and

---

4 Saba Imitiaz reports that the number of Christian missionaries in the world reached 440,000 in 2000. She also notes that Christian missionary work is diverse and changing. Today, more Christian missionaries choose to lead with needed good works rather than religious conversion, although that remains part of the ultimate goal (2018).
experience in considering personal and social values. However, reli-
gion is also a realm in which authority, including moral authority, is
emphasized as manifested through sacred texts, dogma, and religious
leaders. Religious authority is often framed as ultimate and unques-
tioned. In endeavoring to achieve an open and honest rational moral
position, the infusion of a powerful authority interjects potential
harm. Appeals to authority, *argumentum ad verecundiam*, can some-
times be helpful if an appropriate authority is chosen (Woods &
Walton 1974, 135-136). For example, when discussing medical eth-
ics, a hospital's chief ethicist may bring a critical perspective. How-
ever, even when the authority is sound, if the arguments they use are
not, then a fallacy occurs because that person’s influence can sway
the discussion beyond rational argumentation. In this inquiry, we are
interested in the psychology and implications of *argumentum ad
verecundiam*. Appeals to powerful authority can limit debate and cre-
ate a potentially false sense of security if the authority is thought to
have the definitive moral position such as that of a deity or the rep-
resentative of a deity. This sense of security can be heightened if the
god is deemed omnipotent and omnibenevolent. This concern about
authority is not intended to universally discount moral expertise, but
rather to favor proportionalism whereby moral expertise is a partici-
pant in moral deliberation but not the end of such deliberation. This
chapter can be characterized as a search for moral proportionalism
whereby the moral agency is not diminished by the presence of
*a priori* claims to moral authority when deciding on ethical action,
particularly where care is involved. The expression of moral authority
in religion as dogma or unreflective belief diminishes moral agency
by leveraging ultimate authority (god) to preclude careful delibera-
tion regarding how to act.

Psychological factors can play an important role in moral knowl-
edge. One’s disposition toward an underlying deity, and thus a moral
authority, impacts how ethics is approached in practice. Philosophers
such as Wittgenstein recognized the role of psychology by describing
certainty as a mental state instead of a definite knowledge proposition
(1972, 308). However, even Wittgenstein acknowledges that the
distinction between human declarations of “I know” and “I am certain” are tenuous (1972, 8). Given the epistemic knowledge equation, x knows P, where x is a believer in religious faith and P is the moral teaching of any given religion, the variables and relations of the equation are problematized by the authority or credence that x gives P. If P provides moral insight that helps x deliberate and act in a responsive way to a given person or situation, then that moral teaching can be a helpful ethical tool. However, if x considers P absolutely authoritative and mandatory, thus ineligible for questioning, then the moral authority of the religion is stifling to moral autonomy, choice, and subsequent action. Such as, in this case, the imperative to spread god’s word and convert nonbelievers without similar self-openness to change. I contend that care ethics is anti-authoritarian in general (addressed later in this chapter). Religious ethics can be one example of an authoritarian morality that care, in its fullest sense, is often incompatible with.

The moral authority of religion is in many instances tied to the existence of a deity as well as a cosmology of retributive justice. Although world religions and spiritualities vary widely, generally, an authoritative god adds legitimacy to the morality of a religion. Similarly, the fear of punishment, as well as the positive rewards of moral adherence, can be a factor in the ethical decision-making of a religious believer. The existential proof of god or retributive cosmology is spurious, but nonetheless, they are widely held beliefs. For example, 72% of Americans believe in the reality of heaven, and 59% of Americans believe in hell, according to the 2014 Pew Religious Landscape survey (Murphy 2015).

Part of the difference between religious and care ethics is nested in the entanglements of ontology, epistemology, and ethics. This article is not intended to confront the existence of a deity (the question of theism), nor the right of a religion to take a moral position on a subject, but rather the concern here is how seriously moral authority is taken. In other words, the critique from the standpoint of care ethics is not with religion per se but with moral ideology and dogmatism whereby moral authority is not questioned. Although dogmatism is not inherent
to theology, religious beliefs and teachings are often presented to followers as sacrosanct. Therefore, questioning teaching is blasphemy or a sacrilege resulting in the questioner being labeled “infidel” and possibly even shunned or excommunicated.

**Pervasive Reliance on Moral Authority Creates A Form of Banality**

“If we simply defer to a higher, more powerful authority—be it a boss, a sergeant, a senator, a teacher, a parent, a judge, etc.—when navigating morally precarious situations, then we are irresponsibly relieving ourselves of doing the difficult work of moral deliberation”

Phil Zuckerman (2019, 54).

That which is banal is unoriginal and ordinary. Hannah Arendt contends that a lack of critical thinking and engagement can result in unintentional evil. In her analysis of Adolf Eichmann, the architect of the Final Solution, she describes, “I was struck by a manifest shallowness in the doer that made it impossible to trace the uncontestable evil of his deeds to any deeper level of roots or motives” (Arendt 1978, 4). Arendt made it clear that he was not unintelligent but simply unthinking: “it was not stupidity but thoughtlessness” (Arendt 1964). When humans do not question authority, then an unthinking banality abounds.

Chau was nothing like Eichmann. Eichmann was part of an organization that killed millions, and Chau tragically died without harming anyone that we know of. Although Eichmann lacked any “firm ideological convictions or of specific evil motives” (Arendt 1964), Chau was convinced that he could do good. What they did share was an unreflective approach to morality. Eichmann followed the Nazi’s racist and homophobic propaganda like a bureaucrat who simply had a job to do. Chau did not question that his Christian faith made evangelization a moral good. Using Arendt’s approach, a major difference between Chau and Eichmann has to do with convictions. According to Arendt, Eichmann exhibited no moral convictions, but it was clear that Chau held a “good will” toward others according to prevalent norms of evangelical moral standards. No one can accuse
Chau of behaving in self-interest or with an aim to do harm. Although his ethical framework had other important elements, Immanuel Kant indicated, “There is nothing it is possible to think of anywhere in the world, or indeed anything at all outside it, that can be held to be good without limitation, excepting only a good will” (Kant 2002, 9). It is hard to argue that Chau did not exhibit a goodwill—from his narrow perspective, he was endeavoring to do good—but is good intent a sufficient condition of care? As is addressed later in this chapter, care requires responsiveness—engagement, attentiveness, engrossment—with the other that is not exhibited in the Chau’s relationship with the Sentinelese. However, as earlier stated, this analysis is not intended as an unmitigated moral adjudication of Chau. Although Chau must be responsible for his actions, he did not originate the normative moral narrative for the religious institution he was a part of and for which his goodwill was based upon. He did, however, fail to care. Chau abdicated moral reflection in the banality of his actions.

The statements by religious leaders in the aftermath of Chau’s death demonstrate a kind of banality in their tolerance of his actions. The institutions that knew and supported Chau praised him but did not offer any self-criticism of the religious dogma that motivated him. The tragedy was not a source of moral reflection or deliberative pause by these organizations but rather a bump in the road as the dogma presses on. For example, Richard Albert Mohler Jr., the president of the Southern Baptist Theological Seminary in Louisville, Kentucky stated, “I don’t question his motivation, I question his methods” (Gettleman, Schultz, Venkataraman 2018). In this manner, Mohler supports the ethics of evangelizing. A statement by the President of Oral Roberts University, William M. Wilson also reflects a lack of introspection regarding religious dogma and its impact on ethics:

I am convinced that John believed God called him to reach the most isolated people groups in the world. His heart was bursting with love for them. This overwhelming passion led him outside the normal boundaries and pushed him to do what others could not and would not do. He prepared himself mentally, physically, and spiritually for years to pursue this
passion. There was no perfect way to do this but I am convinced John did not want to hurt anyone. I am also sure he never dreamed his martyrdom would create a global media storm nor did he want to be famous. He was simply willing to commit his whole life if necessary so these precious people could know the love of Jesus Christ. Our prayers continue for John’s family and friends during this time of loss (Oral Roberts University).

Wilson’s notion of preparation did not go so far as to question whether evangelization is morally appropriate. Similarly, All Nations, the evangelical organization that helped Chau train for his mission to the Sentinelese, was careful to praise Chau and avoid self-critical analysis while eschewing any official connection between the organization and his endeavor. According to Mary Ho, International Executive Director, “As we grieve our friend [Chau], we also know that he would want us to pray for those who may have been responsible for his death, the Sentinelese. Throughout church history, the privilege of sharing the gospel has often involved great cost. We pray that John’s sacrificial efforts will bear eternal fruit!” (Ho, 2018).5 The good of spreading the Christian message is not subject to interrogation. There is a hint that maybe his death will do some good, perhaps lead the Sentinelese to reconsider, or maybe Chau’s death inspires other missionaries to go forth. The belief in the moral good of evangelization is left unscathed by these statements.

Chau’s death is a tragedy born of a particular Christian narrative held with a high degree of certainty that spreading the Good News is a good above all others. This notion is so pervasive as to achieve banality among specific populations. When philosophy valorizes the moral certainty of a “good will” without consideration of grounded relationships and context, it lacks the resources to directly challenge such a narrative that a missionary’s actions are good as long as they mean well. As the next section explores, care ethics is radically

5 When asked, individual missionaries were not so solid in defense of missionary morality. In a New York Times article that briefly interviewed a dozen missionaries, the reactions ran from criticizing this kind of missionary work to defending the effort as part of a greater calling (Moore 2018).
different than a rule-based deontological approach to morality in that it cannot ignore the need for responsive engagement. In a care framework, the notion of a good will is expanded to entail more than good intentions and includes responsive engagement with the other.

The Crucial Role of Responsiveness in Care

“Caring is largely reactive and responsive”

Nel Noddings (2013, 19)

Care ethics has been characterized in several ways by prominent scholars such as Nel Noddings, Joan Tronto, Virginia Held, and others. I favor a threefold understanding of care as a moral ideal marked by inquiry, connection, and action. This framework is not inconsistent with the previous configurations of care, but it does offer a particular set of emphases. Care begins with knowledge. Understanding the other—the one cared for—is crucial for the efficacy of care. Care is thus knowledge work, a kind of active inquiry that involves listening and attending with a goal of apprehending the context and the unique particularities of those cared for (Dalmiya 2016). Without inquiry, care can be superficial or misguided. Entangled in inquiry is a connection to the target of care. This connection can be framed as “empathy” (Slote 2007, 4) or “affective displacement” (Noddings 2013, 16). Employing either term, the other is not just an object of a transaction—an abstract customer or stereotype—but a relational reality for concern. In this case, people are not just subjects to be converted without reciprocal openness to the mutuality of ideas and perspectives. Family and friends can more easily achieve affective displacement through proximal knowledge but it is challenging to connect with or care for the distant and relatively unknown other. Finally, there must be action, broadly construed. Care ethics is more than dispositional (although disposition is part of the connection). There must be tangible action or practices (Held 2006, 39) on behalf of the other. If we take the interplay of inquiry, connection, and action seriously as the basis for a caring morality, then relational openness and responsiveness are valorized. To care is to respond
within relationship to the other in a way that promotes growth, flourishing, and well-being.

The depth of responsiveness is both the challenge and effort of care as well as a prime determinant of its efficacy. To be truly cared for, one must be listened to and understood. Different theorists have come at the issue of responsiveness differently. Noddings described care as engaging “engrossment”: “all caring involves engrossment. The engrossment need not be intense nor need it be pervasive in the life of the one-caring, but it must occur” (2013, 17). Fiona Robinson addresses the central role of listening in care (2011). Klaartje Klaver and Andries Baart emphasize the role of attentiveness and presence (2011). Although employing different language and emphases, each of these approaches values a depth of understanding that takes time and effort to achieve in order to respond well to the needs of the other. Responsiveness is a crucial aspect of care ethics. Luigina Mortari, drawing upon Noddings, claims, “responsiveness implies an active and watchful presence supported by an ethical attitude that consists of the readiness to expend oneself and make oneself available” (2016, 457). In this manner, it is not morally sufficient to be recognized as a caregiver, a doctor, nurse, etc.. One must also respond to the other as an individual who has needs that they must define. As Joan Tronto claims, we must be careful not to characterize “all care as good care” (2013, 24). Failure to have a depth of personal response can result in what Neil O’Hara describes as “callous carers,” or those “who show little or no consideration or particular concern for others put in their care” (2018, 35). The value placed on responsiveness is what differentiates care from traditional moral approaches regarding authority.

As a field, ethics is part of value theory. Values and commitments create a moral constellation. For example, a moral commitment to the Ten Commandments is to create an ethical universe where moral authority is vested in those rules. Valuing responsiveness in service of the growth and flourishing of the other is to place a kind of moral authority in a relationality that is not hard-wired to specific moral claims or formulae. Caring responsiveness recognizes the messiness of the human condition resulting in a normative decision or action that
emerges from the relationship and context. Thus, care is a fluid and dynamic morality requiring the difficult work of engaging particularity. One might describe the care approach as having an “emergent normativity.” If one takes caring postures (Mortari 2016, 457-460), then the commitment is to care, but one cannot be certain how that care will take shape until they engage in inquiry and connection with the other. The care mandate emerges from the situation. There is no \textit{a priori} rule of action. No dogma or ideology, just a generalized openness and commitment to care for the other, is required to help them grow and flourish.

A care ethical epistemology and normativity differ from that evident in the law-giving Abrahamic tradition. A care approach is not simply an alternative to rules or formulae but rather views such approaches as tools or guides. A truncated example might be drawn from property rights. The Ten Commandments indicate that thou shalt not steal, and modern-day capitalistic societies put a great deal of emphasis on the significance of property rights. Indeed, consistency of ownership in accordance with rules can create social and personal stability and stability that is important for human flourishing. In other words, there is much to support rules surrounding property rights; however care does not begin with rules, but rather it starts with the needs of one another to grow and flourish. Rules and duties can be stated with certainty, but the human condition requires a humble openness to understanding the other and responding accordingly. For example, stealing food or giving up property for the benefit of others through taxation might be a caring approach depending upon the circumstances.

One might ask whether care ethics just replaces one ideology, care, for another, such as religious moral dogma. Care does provide a moral ideal but it comes in the form of a tension rather than a mandate. Care theory offers a moral ideal of care—a state of relational being to strive for and improve toward without the expectation or possibility of achieving perfection. There is no perfect state of caring. One can always learn more or do more. Accordingly, the ideal of caring resonates with Jacques Derrida’s notion of \textit{aporia} or an unattainable
ideal for which the tension with reality motivates the striving for, but never achieves perfection (1995, 29).

Care is a relational and responsive ethic, and thus, a care provider must be humble before the other in a manner that cannot rely on rules or intentions alone. The Chau tragedy leaves one wondering where was care in this scenario and specifically whether Chau or the Sentinelese were cared for. Chau is not an interchangeable agent who can simply be stereotyped and made to fit a moral formula, and neither are the Sentinelese. The details of this tragedy reveal the manifestation of moral confidence and its pitfalls. Chau was confident he could do good for the Sentinelese, as were the evangelical organizations like All Nations. Chau’s commitment to his mission was such that he was persistent even when the dangers became more apparent to him.

Although the case of John Allen Chau is somewhat sensationalistic and received a great deal of media attention, the underlying role of religious certainty in moral deliberation and action shadows many ethical issues, including religious certitude about abortion, gay rights, and the equality of women. By contrast, care ethics is knowledge work that requires engagement with the particulars of context, including listening to and responding to the one cared-for.

**Conclusion: Care As Humble Yet Subversive**

“Humility is opposite a number of vices, including arrogance, vanity, conceit, egotism, grandiosity, pretentiousness, snobbishness, impertinence (presumption), haughtiness, self-righteousness, domination, selfish ambition, and self-complacency.”

Roberts and Woods (2003, 257).

In this chapter, I have endeavored to interrogate the tragic circumstances of John Allen Chau’s death to make a point about valuing care. The chapter reviewed the specifics of the case and the entanglement of moral forces involved in the horrific outcome. In particular, the role of moral certainty and the banality of over-reliance on a moral authority for ethical answers was discussed. Care theory offers
an alternative to such dependence on moral authority as it values an authentic response to the need of others. In this conclusion, I reinforce the argument in the chapter with a focus on humble moral subversion.

There is a paradox in the use of the term “faith” when it comes to religion. Faith usually implies a lack of factual certainty. Synonyms for faith include trust, belief, confidence, conviction, reliance, dependence, and optimism. These words express varying degrees of certainty which reflect the range of faith positions taken by religious and spiritual believers. Nevertheless, when combined with a zeal for religious moral authority, faith can appear as a hyper-certainty manifesting in dogmatism, fundamentalism, and assertive evangelization.

The certainty of religion is a special case of ideology because of the role of mediation. Certainty of a deity’s will is a fraught concept which also includes an interlocuter. That mediator can take the form of a text or a religious leader or some combination of them. These figures or artifacts are often imbued with heightened moral authority. Religious certainty can thus empower the mediator. Religious texts and leaders speak for their deity. Religious leaders as mediators of religious authority and teachings bring the fallibility of humanity to their positions. In a 1966 peer-reviewed article, Paul C. Empie asked, “Can organized religion be unethical? His answer was “yes” when it endeavors to seek “self preservation, prestige or power” (73). Religious institutions have historically played a conserving role in maintaining the morality of their time by using the moral authority of religious narratives supporting positions that would be considered unethical today such as slavery, anti-miscegenation and keeping electoral franchise from women. Despite this history, religious moral teaching is often granted an authoritative and reliabilist position that is timeless and above reproach. The certainty of this imposed

---

6 Here I am using ideology in a pejorative sense as the valorization of ideas over people.

7 These religious mediators have historically been predominantly male thus reifying masculinity.
morality can reduce the choices and creativity needed for human beings to respond to one another’s needs. Whether it is the young person struggling to find support for a non-conforming sexual identity or a woman who has decided to have an abortion, care should not be fettered by external dogmatic positions of right and wrong. To paraphrase Noddings and apply her sentiment regarding education to the context of religion, the believer is infinitely more important than their religion.\(^8\) Religion should not be a barrier to human connection and understanding, but rather it should enhance human growth and flourishing if it is to be considered a good. Although care theorists are often reluctant to make normative claims, perhaps it is time for care scholars to more forcefully denounce the dis-connective and thus uncaring practices of the world’s religions. As Tronto, applying feminist sensibilities indicates, care always exists in a political context (1993, 137-141) and institutional religion is steeped in political practices. Given the complexity and ambiguity of responding to the other, humility, not certainty, is the moral character needed to help humanity care for one another.

Humility is generally not as acclaimed for its central role in morality as it should be. Some philosophers even regard humility as a detriment.\(^9\) Dennis Whitcomb, Heather Battaly, Jason Baehr, and Daniel Howard-Snyder describe two important elements of intellectual humility as appropriate, attentiveness and owning one’s own intellectual limitations (2017, 516-517). Both characteristics are significant for this project. The hubris of certainty can mitigate attentiveness to the other who requires care and result in an inflated confidence in one’s knowledge of the circumstances. As indicated earlier, care is

\(^8\) In a beautiful passage describing relationality as the centerpiece of education rather than the mere transmission of disciplinary knowledge Noddings states, “the student is infinitely more important than the subject matter” (2013, 20 and 176). Certainly, the role of organized religion is not simply to achieve as many adherents to a particular ideology as possible. Those adherents are human beings who need an open care not fettered by religious stipulations.

\(^9\) In particular, Hume, Nietzsche, and Spinoza consider humility a detriment to agency. See Snow 1995, 211.
knowledge work and in the process of inquiry into the context and needs of the other, humility is crucial. Both epistemic and ethical humility is called for to obtain the responsiveness required in care. To be sure of what another person needs in advance of listening and learning from them is to diminish the efficacy of care and potentially to do harm. Such epistemic hubris can be a form of injustice (Fricker 2017, 53) demonstrating a lack of respect for the other as well as failing to utilize knowledge gained from the particular individual to maximize care. This hubris is demonstrated, for example, when a doctor is confident of the illness and treatment before listening to the patient. Humble responsiveness represents an authentic position of desiring to help someone flourish.

However, humility also has a political dimension, particularly in the context of a feminist ethic of care. Significantly, care theory arose out of a feminist context because feminism is sensitive to power structures. The Sentinelese are a people with a history who are impacted by colonialism. Thus humility also demands that oppressive colonial history is remembered and owned rather than ignored. Serene Khader describes rampant “unconscious unjustified paternalism” (UUP) which she describes as “a type of paternalism in which one party unjustifiably substitutes her judgment for another’s because of difficulty distinguishing her desires for the other from the other’s good” (Khader 2010, 742). Khader is particularly concerned that Western feminists rely too heavily on stereotypes of oppression for non-Western peoples. Even though care-giving and development work share many characteristics, Khader suggests that despite widespread UUP, the particularism of care theorists such as Eva Kittay, Sara Ruddick, and Carol Gilligan provides tools for resisting colonial paternalism. For example, a care ethic is framed as requiring attending to the other in an encounter rather than in the abstract (Khader 2010, 755). Humility can provide the reflexive space to openly and honestly learn how to best care for the other.

Although the colonialism of settler nation-states is usually the focus of post-colonial studies, religious institutions are also colonial powers. Often political colonialism and religious complement one
another. One might think of proselytizing as another practice of colonialism which might be described as a “conscious unjustified paternalism.” A humble, more responsive approach to the Sentinelese might be to listen and learn to see what could be done for them, which may have been to leave them alone. This is not to suggest a passive or unengaged position but instead an active effort to let the Sentinelese know that there are people there to help them should they need it. Nevertheless, if they want and need to be left alone, that will be the action taken out of care and respect.

Subversion is not typically associated with humility. However, care is subversive of moral authority because it must begin in the relational responsiveness to the other and their context. A law, a rule, or a divine command cannot limit moral deliberation and engagement for those who truly care. Humility comes first, which subverts authoritative and certain approaches to ethics. In describing the ethics of care in a medical context, German philosopher Giovanni Maio describes how an ethic of care subverts the authority of medical institutions and their practices:

Precisely because care ethics assumes that there are no unambiguous solutions, it attributes more value to doubt; the attitude of tentative hesitation has no trace here of the negative connotations that are necessarily attached to it in the constant bustle of large medical institutions. This confers on care ethics nothing short of a subversive power in relation to action as well. This subversive power can be extremely restorative because it can give rise to the insight that good medicine means not simply doing things but also allowing these things space to thrive (2018, 60).

Note how Maio emphasizes the humble approach of doubt and tenuousness. Over-reliance on moral authority chokes off the “space to thrive” necessary for care to blossom.

One of the conclusions of this analysis is to diminish one’s certainty about any ideology in the face of fellow human beings in need. It is an odd claim to say that people should take their religion less seriously. However, that is the case here, albeit in a particular way regarding moral certainty. Of course, those who hold various religious
and spiritual traditions can and do care for others in rich and wonderful ways. However, people who banally turn their critical moral thinking over to an authority, any authority, do so at the potential peril of themselves and those they encounter. To align with a more caring approach, the world’s religions should take a more honest and humble approach to their own teachings.\textsuperscript{10} Such an approach may seem like a contradiction to certain forms of religious beliefs, but if care is to be enacted this tension will have to be resolved. One cannot care and run roughshod over someone else’s culture and context. Ethics, and particularly the relational effort needed for care, is hard work. Abdication of deliberative responsibility to an authority is a fraught shortcut that has the potential to mitigate care and do harm.

\textbf{Works Cited}


\textsuperscript{10} At times, the official teachings of the Roman Catholic Church appear to offer humility on matters of morality. For example, the Second Vatican Council document, \textit{Gaudium et Spes}, declares, “Conscience is the most secret core and sanctuary of a man” (Paul VI, 1965) which implied for some interpreters that a member of the church might under certain circumstances disagree with church teaching and yet remain in good standing. This statement appears to offer a healthy sense of proportionality in regard to Catholic moral authority. However, many other official documents more conservatively declare the unquestioned primacy of Catholic teaching. A position of infallible moral certainty breeds potential harm in the disregard for responsive care as addressed in this chapter.


The Pain of Imagining Others:
Caring for the Abstract
and the Particular in Jewish Thought

Sarah Zager

In the past three decades, care ethics has become an increasingly diverse strand of ethical thinking; however, many of these articulations of care ethics deploy a critique of the “abstraction” that care ethicists find at the basis of other ethical theories.¹ This critique is designed to target two kinds of abstraction: First, care ethicists claim that many ethical theories rely on a faulty philosophical anthropology which assumes that the self can and should be “abstracted” away from the particular familial, social, cultural, and economic circumstances under which it has grown and developed. Second, they argue that contemporary ethical theories—especially, but not exclusively, deontological ones—rely on “abstract” formulations of moral rules. Often, care ethicists link these two kinds of abstraction together, suggesting that replacing this overly abstract philosophical anthropology can better account for the ways that women develop ethical knowledge through their relationships with particular others. In turn, they also hope that recognizing these new sites of ethical knowledge will lead ethical theorists to eschew “abstract” moral rules. According to these theorists, rejecting these two forms of abstraction—an abstract philosophical anthropology and abstract ethical theoretical

¹ Often, “liberalism” is the implicit target of care ethics. More work would need to be done to think through how these charges would apply to ethical theories that are explicitly anti-liberal or that are not always accompanied by liberal political theories.
formulations—helps make care ethics a distinctly feminist project, designed to highlight the voices of the women, especially women of color, who continue to do a disproportionate share of care work in western societies.\(^2\)

In this essay, I suggest that care ethics’ rejection of abstraction creates significant problems which undermine the pursuit of its feminist desiderata. The particularized philosophical anthropology that care ethicists promote highlights the experiences of cisgendered, straight women who bear biological children while eliding key elements of the experiences of many parents (both women and others), especially those facing infertility and pregnancy loss. In doing so, it lifts up some women’s voices over others and fails to fully account for important forms of “care work” that these parents perform. Drawing from my own experiences with infertility at a young age, I argue below that experiences of infertility often require substantial “care work,” but that this “care work” is for another that remains abstract in some relevant sense.

In order to make this argument, I begin by investigating the structure of care ethicists’ arguments for the importance of replacing “abstract” moral concepts with an emphasis on “particularity.” I show that this notion of particularity is not only distinctly embodied, but also described in terms of heredity. This embodied heredity concept of particularity is not in itself harmful, but many classical care ethicists use a physical, genetic connection between parent and child as the (or at least a) main indicator of an embodied, “particular” caring relation. In addition, the arguments care ethicists make for embodied

\(^2\) Despite a wide range of advances, women still do a disproportionate amount of household work, including childcare, with one study showing that American women do on average four hours of household labor per day, compared to men’s 2.5 hours. (Wezerek and Ghodsee 2020)

Notably, despite care ethics’ claims that to highlight the voices of women of color, almost all of the leading voices in care ethics are white. While Virginia Held, a leading care ethicist whose work I consider in detail below, is optimistic about care ethics’ ability to change the economic forces that lead to a devaluing of care work, especially done by women and women of color, the work remains cut out for us.
particularity are infused with theological language that is deeply connected to anti-Jewish modes of rhetoric which reject Judaism as a “disembodied” set of rules which teaches its adherents to disregard the physical world, and the ethical connections it creates, in favor of a “blind” allegiance to religious rules. Taken together, the emphasis on genetic relationships as a mark of “particularity” and the troubled history of these arguments suggest that care ethics’ rejection of abstraction needs to be revised. In the final sections of the essay, I outline one form that such a revision might take, drawing first on my own experiences and then on Jewish texts which imagine a form of anticipation that is distinctly disembodied, but that still requires very particular, physical actions in response to it.

**Care Ethics’ Critique of Abstraction**

As noted above, “care ethics” is an increasingly diverse traditional of ethical thinking, and providing an exhaustive history and analysis of its progression lies beyond the scope of this essay. Here, I focus my analysis here will focus on two key works in the history of care ethics as representative examples: Nel Noddings’s *Caring: A Relational Approach to Ethics and Moral Education* (first published in 1984), and Virginia Held’s *The Ethics of Care: Personal, Political, Global* (2005). Noddings’s work was one of the foundational texts in care ethics and represents one of the first works translating some of the key claims of Carol Gilligan’s *In a Different Voice* (1982) into explicitly philosophical terms. Held’s *Ethics of Care* serves in part as a summary of where care ethics has been in the intervening 21 years; it seeks to put care ethics on the map as an ethical theory in its own right with something to say to a broad audience in both philosophical ethics and political theory. In what follows, I outline Noddings’s and Held’s critiques of abstraction, considering their rejection of both abstract

---

3 The psychology community has raised significant questions about Gilligan’s methodology; even after these questions were raised, the philosophical literature in care ethics rarely qualified its use of Gilligan’s different “voices.” For a summary of this controversy see Graham (2012).
philosophical anthropologies and of “abstract” moral rules and principles.⁴

Both Noddings and Held begin by claiming that existing ethical theories have proceeded with a mistaken philosophical anthropology. Held argues that most standard ethical theories “have posited an abstract, fully rational ‘agent as such’ from which to construct morality, while missing the moral issues that arise between interconnected persons in the contexts of family, friendship, and social groups,” and that therefore, “one of the central goals of the ethics of care is to “[call] into question the universalistic and abstract rules of the dominant theories” (Held 2006, 13, 11).

This critique of abstraction is often motivated by (and sometimes also results in)⁵ a rejection of moral rules, which are often assumed to be inherently “abstract.” For example, Noddings writes that caring is simply incompatible with rule-following: “To care is to act not by fixed rule but by affection and regard…. Rule-bound responses in the name of caring lead us to suspect that the claimant wants most to the credited with caring” (Noddings 2013, 44). Building on this assumption, Held argues that the ethics of care prompts us to “see more hope for moral development in reforming practices than in reasoning from abstract rules” (Noddings 2013, 19). Though these claims are clearly rhetorically linked in both Noddings and Held, there is no obvious conceptual reason that they must be linked. We might argue, to borrow terminology from Seyla Benhabib, that a “situated self” nonetheless ought to be subject to ethical rules or principles, even if we at the same time argue that her position in certain kinds of social relationships might change the way that those rules or principles apply to her in some circumstances (Benhabib 2013). Similarly, we might reject deontological moral theories, while retaining a roughly independent, individualistic, and “abstract” picture of the self; many

⁴ As I will show below, Noddings uses “principle” to refer to moral rules or prohibition. This stands in contrast to standard distinction between rules and principles in legal theory, where rules are more specific regulations deployed in the service of broader legal desiderata or “principles.”

⁵ As I will show below, the logical ordering of these two claims varies.
neo-Aristotelian virtue theorists take this approach when they focusing on giving conceptual accounts of “the virtues”. Having recognized that rejecting one kind of abstraction need not lead us to reject another, in what follows, I will draw on recent work in Jewish feminist thought and care ethics to argue that rules or moral “obligations” need not be “abstract” in this pejorative sense; rules and obligations can and do demand specific, embodied actions that are geared towards caring for particular others.

For both thinkers, there is something distinctly “feminine” about this rejection of moral rules. Held writes:

Women’s experience has typically included cultivating special relationships with family and friends, rather than primarily dealing impartially with strangers, and providing large amounts of caring labor for children and often for ill or elderly family members. Affectionate sensitivity and responsiveness to need may seem to provide better moral guidance for what should be done in these contexts than do abstract rules or rational calculations of individual utilities (Held 2006, 24).

Similarly, Noddings argues that treating ethics as a system of rules is fundamentally opposed to the “feminine” approach to ethics. She writes, “This approach through law and principle is not, I suggest, the approach of the mother. It is the approach of the detached one, of the father, The view expressed here is a feminine view… It is feminine in the deep classical sense-rooted in receptivity, relatedness, and responsiveness. It represents an alternative to present views, one that begins with the moral attitude of longing for goodness and not with moral reasoning” (Noddings 2013, 23). Recent work in both psychology and gender studies has critiqued this kind of gender essentialism extensively. Without rehearsing these critiques here, it is sufficient to note that, for Noddings and Held, a rejection of “abstract moral

6 Think for example of Alasdair MacIntyre's emphasis on Homeric concepts of virtue in McIntyre 1981. Noddings criticizes virtue ethics precisely for its focus on individual actors’ moral development. See Noddings 96-7.

7 Heyes (1997) summarizes the versions of these critiques which deal specifically with Gilligan and makes an effort to respond to them. As she notes, this work is built on broader work on gender, which challenges the stability of the categories of men
rules,” is assumed to create space for a distinctly feminine moral “voice” to emerge.

In order to pursue this feminist ethical agenda, Noddings and Held offer an alternative philosophical anthropology. A standard version of this argument proceeds as follows. While classical philosophers tended to assume that people were best understood as “independent” and “individualized” beings whose family connections were only incidental, care ethics focuses on the fact that all people require some form of particular care in their lives, always in childhood, and very often at other points in life as well.8 In her version of this argument, Held compares her relational connection philosophical anthropology to the purportedly individualized one used in both Kantian and utilitarian moral theories.

Deontological and consequentialist moral theories of which Kantian moral theory and utilitarianism are the leading examples concentrate their attention on the rational decisions of agents assumed to be independent, autonomous individuals. Virtue theory also focuses on individual persons and their dispositions. The ethics of care, in contrast, conceptualizes persons as deeply affected by, and involved in, relations to others; to many care ethicists, persons are at least partly consisted by their social ties (Held 2006, 46).

Noddings goes in further, rejecting the idea that the ethics of care should produce a stable philosophical anthropology at all. While she acknowledges that “there is, I think, a logic of the caring relation,” she also claims that care ethics “does not evolve inevitably out of the ‘logic of the concept’ nor out of a catalog of what is known about persons caring.” The problem with these, she argues, is that “Both require a move to abstraction that tends to destroy the uniqueness of the caring itself” (Noddings 2013, 52). Noddings’s choice of words is important here—the “move to abstraction” does not just undermine

and women. For the one highly influential version of the argument against gender essentialisms, see Chapter 1 of Butler 2006.

8 For another strong version of this story, see Benhabib 2013.
our ability to recognize or learn from relationships of care, it also undermines our practice of them.

Though they tend to reject “universal” language as being “abstract,” both Noddings and Held both point out that care is in some sense “universal.” Noddings writes that care ethics avoids relativism because it “contains at its heart a component that is universal: Maintenance of the caring relation” (Noddings 2013, 101). Held spells this out more directly when she argues that care ethics is based on “the truly universal experience of care,” because “every human being has been cared for as a child or would not be alive. Understanding the values involved in care, and how its standards reject violence and domination, are possible with the ethics of care” (Held 2006, 3). Even though it is distinctly universal (in the sense that everyone has it), this experience is nonetheless particular: there is an individual person who cares for me, and there is an individual person for whom I care. Focusing on this person, Noddings and Held argue, centers the voices of women who provide this kind of individualized care, and may even help bring about social realities that are more likely to facilitate and value caring relationships.

This observation about the universality of experiences of care anticipates some of the kinds of philosophical moves I want to make later in this essay—by claiming that “care” is a universal experience, while also recognizing that it is in some sense also deeply particularized, Held and Noddings open the door to an ethical theory which makes space for some notions of universality and alongside a strong emphasis on the particularities of lived relationships. Given what they take to be the strong link between the “universal” and the “abstract,” this suggests that it might also be possible for the abstract and the particular to exist side by side and to interact.

The Care Ethical Critique of Abstract Philosophical Anthropology

Here, I argue that the philosophical anthropology of Noddings and Held is deeply limited and fails to make some important experiences

---

9 I will trouble this connection to some degree below.
of care, including experiences of parental care, sources of ethical knowledge. To see why this is, we need to get a better sense of what Noddings and Held take to be the markers of the kind of “particularity” that they want care ethics to prioritize. In what follows, I show that both Noddings and Held replace the “abstraction” found in traditional ethical theory with a version of “particularity” that is both embodied and genetic; in fact, it is precisely this embodied, genetic connection that makes “particularity” ethically significant.

For both Noddings and Held, the paradigmatic “particular” relationship is the one between biological mother and child; often, the first moment of a new biological mother holding her child is used as the key vignette which illustrates what constitutes a “particular” relationship. For example, in response to David Vellman’s claim that Kant’s writing about reverence is designed “to rule out persons as proper objects of reverence insofar as they are inhabitants of the empirical world,” Held writes that “the ethics of care, in contrast would have no trouble, I think, describing the feelings of parents toward a newborn child, in all her empirical embodiment, as reverence. The feeling of a parent of a newborn may have, that this child is the center of the universe and that there is nothing more important in all the world, is not only a temporary emotional distortion that will soon be modified” (Held 2006, 92). Not only does Held want us to be able to describe this feeling as a form of “reverence,” she also takes this “reverence” to issue in an ethical conclusion; in fact, for both Noddings and Held, this feeling of a parent first holding their child becomes a kind of metonymy for the ethical content of the ethics of care. Held continues, “What a parent may value in her child may well not be what makes this child like every other, but the very particularity of the child and of the relationship that exist between them, such that she is the mother of this child and this particular person is her child” (Held 2006, 93).

For both Noddings and Held, this sense of “mine-ness” is defined biologically. This becomes evident when each of the two authors discuss reproductive ethics, including surrogacy and abortion. In her discussion of abortion, Noddings writes that, under most
circumstances, it makes sense to treat a fetus as an “information speck” which does not have the same moral status as a human life. However, she argues that ethical situation changes significantly, when that “information speck” becomes “mine.” Importantly, for our purposes, this happens when the mother contemplates the traits the child might inherit from its biological parents. She writes:

But suppose the information speck is mine, and I am aware of it. This child-to-be is the product of love between a man deeply cared for and me. Will the child have his eyes or mine? His stature or mine? Our joint love of mathematics or his love of mechanics or my love of language? This is not just an information speck; it is endowed with prior love and current knowledge. It is sacred, but I—humbly, not presumptuously—confer sacredness upon it. I cannot, will not destroy it. It is joined to loved others through formal chains of caring. It is linked to the inner circle in a clearly defined way. I might wish that I were not pregnant, but I cannot destroy this known and potentially loved person-to-be (Noddings 2013, 103).

The mother-fetus relationship Noddings describes here has a social, cognitive, and emotional component which is partially separable from biological heredity—Held argues that part of what makes this ethical being significant is the “love between a man deeply cared for and me,” and she explicitly rejects such a claim of ethical significance in a case where no such emotional connection to the man in question exists (even if he is biologically the father of the child) (Noddings 2013, 104). But, when this relationship is present, its significance is interpreted through the woman’s musing about heritable traits—we know that this is a “sacred” being and not an “information speck” because we can wonder whether the child will have “his eyes or mine.” This, Noddings argues, means that, even though the child is not yet a particular, embodied other in its own right, “there is already relation albeit indirect and formal” between parent and child

---

10 This approach also assumes that whether a pregnancy is “wanted” is marked by a specific kind of relationship to a male romantic partner. This is, of course, not the case for all pregnancies in which the gestational parent “assents” to the “known and potentially loved person-to-be.”
(Noddings 2013, 103). In one sense, Noddings anticipates the philosophical direction I want to go by acknowledging that a relationship of care can be “indirect and formal,” both adjectives usually used pejoratively in care ethics. But, Noddings does not allow the recognition of the possibility of “indirect” “formal,” and, we might add, “abstract,” relationships of care to inform the broader philosophical anthropology that she advocates in the rest of the book. Almost in the same breadth as she acknowledges these forms of abstract care, Noddings retreats to a notion of “natural care” which seems to rely more heavily on the heritability that she focuses on earlier in the paragraph. Just following the passage quoted above, she explains the hypothetical mother’s decision to keep the pregnancy as “an ethical one borne of natural caring” (Held 2006, 103).

Held makes a very similar set of claims in her discussion of surrogacy, which she prefers to call “contract pregnancy” (Held 2006, 120). Citing Mary Lyndon Shanley’s work on this issue, Held argues that in pregnancy, “mother and fetus are strongly interrelated, and a birth mother will never stop being the woman who gave life to a particular child, whether or not the child is raised by others” (Held 2006, 40). While this is in some sense vacuously true—a person who gives birth to someone will always be the one to have done so—Held means for this fact to produce an ethical judgment: because “a birth mother will never stop being the woman who gave life to a particular child” the embodied connection between a birth mother and “a particular child,” is especially ethically significant. Implicitly, Noddings seems to suggest that the adoptive parents’ relationship with their child is more mutable, even though the same logic might easily apply to the acts of parental care that the adoptive parent carries out: the person who raised the child will always remain that person in much the same way as the person physically gave birth to a child always will be. What is truly distinctive about the relationship between birth mother and the child, then, is its immutability, but its grounding in biology. Noddings grounds her ethical claim not in actual acts of care that a parent performs, but in the biology that she takes to be representative of it. In the end, though, lived experiences
of care have receded into the background here. This is not an ethics of care so much as an ethics of heritability.

The Theological Background of Care Ethics’ Rejection of Abstraction

Noddings’s affirmation of embodied particularity makes frequent use of religious terminology, images, and concepts, and draws significantly on anti-Jewish tropes. Her reliance on this conceptual vocabulary helps us recognize some of the dangers in the kinds of critiques of abstraction we see in both her work and Held’s. At several points in the book, Noddings returns to the biblical story of the binding of Isaac in Genesis 22, using it to contrast what she calls the ethical approach of the “father” (Abraham) and “the mother.” She writes that while Abraham is willing to sacrifice his son at God’s command, “for the mother, for us, this is horrendous. Our relation to our children is not governed first by the ethical but by natural caring. We love not because we are required to love but because our natural relatedness gives natural birth to love” (Noddings 2013, 61). For Noddings, recognizing the ethical significance of this “natural relatedness” produces a theological conclusion. She writes,

Abraham’s obedience fled for protection under the skirts of an unseeable God. Under the gaze of an abstract and untouchable God, he would destroy this touchable child whose real eyes were turned upon him in trust, and love, and fear. I suspect no woman could have written either Genesis or Fear and Trembling, but perhaps I should speak for myself on that. The one-caring, male or female, does not seek security in abstractions cast either as principles or entities (Noddings 2013, 61).

There is an implicit incarnational theology in Noddings’s language here. The paradigmatic mother’s “natural relatedness” leads her to demand a God that is not “abstract and untouchable,” but instead “touchable” and “particular.” Noddings also implicitly associates the this “abstract and untouchable” God with a God who issues “commands” or laws. An abstract God, Noddings implies, is one who will issue abstract moral rules. In this way, Noddings suggests that someone focused on “natural caring” must not have the kind of abstract theological approach which she associates with Abraham,
and, in addition, must not endorse the idea that any God, incarnational or otherwise, could issue moral rules or commands. But, as we will see below, sources in Jewish thought challenge these links between “natural caring” and a rejection of deontic divine commands, instead arguing for both a strong sense of obligation and attention to embodied acts of care.

Noddings’s analysis here seems to assume that both Genesis and *Fear and Trembling* view Abraham’s decision to sacrifice Isaac positively. However, this is far from clear—many interpreters have read Genesis’ as an effort to reject child sacrifice. In addition, the history of Jewish interpretation of this story has also included several efforts to dramatize Sarah’s reaction to the episode, including one which explains her death in the following chapter of Genesis as a direct result of hearing that Abraham tried to sacrifice Isaac. This suggests that having a robust divine command theology (as the rabbis do) is nonetheless compatible with recognizing Sarah’s role in the story.

This rhetoric has a long history; these very critiques were frequently leveled against Jews and Judaism. Strikingly, Nodding’s critique of Abraham closely tracks Hegel’s critique of Abraham as articulated in his early theological writings. Hegel identifies many of the same flaws in Abraham as Noddings names in the name of “woman.” Hegel claims that, by sacrificing his son, Abraham “snaps the bonds of communal life and love,” because he is a “wholly self-subsistent, independent man.” This leads Hegel to offer a broad critique of Judaism in general. In “The Moral Teachings of Jesus,” Hegel claims that Judaism forces its adherents to prioritize the universal over the particular in a way that is deeply damaging: “For the particular—impulses, inclinations, pathological love, sensuous experience, or

---

11 For a discussion of this see Levenson 1993. There is also significant debate in Kierkegaard’s reception about whether the “theological suspension of the ethical” is lifted up as a laudable ethical approach, or whether it represents only a temporary stage in a larger dialectic. For more on the relationship between the Kierkegaardian reading of the story and modern Jewish thought see Koller 2020.

12 See Pikei d’Rabbi Eliezer 32.

13 Ibid., 185.
whatever else it is called—the universal is necessarily and always something alien and objective” (Hegel 1975, 211–12). Noddings, too argues that the “universal,” whether a purportedly “universal” God or a supposedly “universal” moral rule represents an unwelcome intrusion into “natural” and particular relationships of care.

Hegel then argues that Christianity offers an alternative to the isolation of Judaism’s forefather. For Hegel, Jesus provides us with an example of an ethics which prioritizes ethical connections between people, especially family members: “Against such commands Jesus set virtue, i.e., a loving disposition, which makes the content of the command superfluous and destroys its form as a command because that form implies an opposition between a commander and something resisting the command” (Hegel 1975, 211–12). For Hegel, this Christian ethical approach allows us feel a kind of joy that Judaism’s emphasis on “commands” which required “a bare service of the Lord, a direct slavery, an obedience without joy, without pleasure or love” makes impossible (Hegel 1975, 206). The ethical “voice” of Nodding’s “woman” is not as distinctive as she claims: against the backdrop of Hegel’s claims, we can see that the ethical “voice” of Noddings’s “woman” bears a striking similarity to that of a nineteenth-century man.

This theological context also allows us to reread Noddings’s claim that no woman could have devised an “abstract” God who could not be touched, but who issues moral commands. This claim has a somewhat shocking conclusion: Noddings is claiming that a woman cannot be a Jew, because the Jewish God is, at least on this account, not ever going to be made flesh in the way that the Christian God is.14

14 This is not to say that Jewish feminists have not critiqued Jewish conceptions of God as rooted in patriarchy; but, they have not tended to identify God’s abstraction as a mark of patriarchy’s influence. In fact, in one of the most influential works of Jewish feminist theology, Judith Plaskow’s Standing Again at Sinai, God’s abstraction is not mentioned at all. Despite this, however, some critics, including Cynthia Ozick, did argue that Plaskow’s feminist theology amounted to a return to the idolatrous forms of religiosity that Judaism had long rejected, and that such a conception of God “slanders and sullies monotheism” with its anthropomorphism. Thinkers like
Noddings also contrasts the abstract commands of an abstract God to a more natural form of “faith” which she thinks ought to structure moral relationships. She writes that care ethics “does not attempt to reduce the need for human judgment with a series of ‘Thou shalt’ and ‘Thou shalt nots.’ Rather, it recognizes and calls forth human judgment across a wide range of fact and feeling, and it allows for situations and conditions in which judgement (in the impersonal, logical sense) may properly be put aside in favor of faith and commitment” (Noddings 2013, 45). This too draws on an anti-Jewish trope, in which an overemphasis on divine command (and on general rule-following) is taken to be a sign of a lack of “faith.”

We can see this more clearly when Noddings turns directly to discussing care ethics’ implications for religious practice. Noddings’s explicit treatment of religion is grounded in her general claim that institutions cannot be ethical—at least not in the sense described in the ethics of care—because institutions rely on rules to structure the relationships within them. Noddings claims that “frequent insistence on obedience to rules and adherence to ritual contributes to the erosion of genuine caring” (Noddings 2013, 13). More forcefully, she asks her reader to contemplate whether women ought to seek entrance to previously male-dominated institutions, using religious institutions as one of her key examples. She writes:

Similar decisions will have to be made as we consider penetrating other male institutions. Should we, for example, demand the right to don ceremonial robes and scatter ritual blessings on our peers, or should we gently and firmly insist that our brothers yield to the real and special blessings of human tenderness and caring? Should we maintain—by joining in full measure—institutions that separate the saved from the pagan, the believer from the infidel, the circumcised from the uncircumcised, man from woman, as though the first set were privileged of God and the second scorned? (Noddings 2013, 132).

Ozick (and many other Jewish women) belie the notion that women cannot be strong advocates for an abstract conception of God. See Ozick 1983; Plaskow 1991.

This tradition has a long history, rooted in Paul’s letters. See for example Galatians 3:10.
Though it is not clear that she intends to refer to Jews (rather than Catholics, or perhaps even all forms of organized religion), Noddings echoes many classic dichotomies used in anti-Jewish rhetoric. First, she opposes “ritual blessings” and “ceremonial robes” with “human tenderness and caring,” making it seem that we have to choose between the two, or that “ritual blessings” cannot, themselves be an act of care.

The assumed opposition between “ceremony” and “ritual” and ethics also has a long history, and, crucially for our purposes, it has played a significant role in the history of ethical theory, especially in the German philosophical tradition. In Religion within the Boundaries of Mere Reason, Kant opposes a “statutory religion” and “moral religion,” arguing that “Christianity has the great advantage over Judaism of being represented as coming from the mouth of the first teacher not as a statutory but as a moral religion” (Kant 1998, 6:167). Just as Noddings argues that institutions cannot be ethical because of their reliance on rules, Kant claims Judaism’s reliance on rules undermines its claim to being a “moral religion.” In addition, by invoking the distinction between the “circumcised” and the “uncircumcised,” Noddings also invokes a long history of anti-Jewish rhetoric which accused Jews of prioritizing the ethical needs of members of their own group over and against those of others. Noddings levels this critique at all religions, including Christianity. At the same time, though, her reasoning does this by arguing that her reader should work hard to avoid becoming someone who is too focused on “ceremony,” “ritual” and “circumcision”; she is asking her readers to avoid becoming too Jewish. Understanding this theological background allows us to reread the emphasis on “embodied,” “natural” caring relationships in both Noddings and Held. The apparent choice between an “embodied” and “abstract” ethics has a long history, rooted in the apparent choice between an “embodied” and “abstract” religion.

16 Debates about this played a central role in debates about whether to grant Jews citizenship. See for example Kirwan 1956.
This theologically-laden dichotomy also influences the way that Noddings construes the paradigmatic relationship of “natural care,” the relationship between a woman and her newborn biological child. Noddings imagines that the paradigmatic interaction between mother and child sparks theological reflection. Noddings begins by noting that “For many women, motherhood is the single greatest source of strength for the maintenance of the ethical idea. The young woman who has just given birth to a child may, if she has a religious faith, turn in wonder and gratitude toward the God she thanks for the safe delivery of her child. But she may equally well lie awake all night thinking on this strange God” (Noddings 2013, 143). In what she takes to be a paradigmatic moment of care, Noddings imagines that the woman becomes preoccupied by questions of divine embodiment, imagining that the mother would ask herself: “What then, of God or gods? Why, she wonder would an all-knowing and all-good God create a world in which his creatures must eat each other to survive? Why, oh, why, would he withhold his physical presence from them? Why would he demand that they—much the needier and weaker—love Him?” (Noddings 2013, 143). We can identify two rhetorical peaks in this imagined reverie, each making a significant theological claim. The first, marked by a “why, oh, why,” is a question about why God would “withhold” God’s physical presence or incarnation; this reprises Noddings’s earlier concern that the ethics of care could not endorse an “abstract” or “disembodied” God. Second, Noddings rehearses a question about divine command which has preoccupied her throughout: earlier in the book, Noddings argues that the ethics of care is not a form of “agapism” because, in the ethics of care, “There is no command to love nor, indeed, any God to make the commandment” (Noddings 2013, 48). In order to understand its theological history, we need to further spell out why Noddings finds

---

17 It is not obvious that all forms of “agapism” place this much emphasis on the divine command to love, as opposed to the love demonstrated by God and Christ, or other sources of love. In fact, the philosopher C.S Pierse describes a form of “agapism” in which the “law of love” functions similarly to a natural law, rather than a divine decree.
the idea of a God who demands our love so troubling. In this passage, she suggests that there is something strange about demanding that a being that is much weaker and more vulnerable love God, but a similar dynamic plays out in many of the caring relationships that she describes. The cared-for person is, at least in some relevant respect, more vulnerable than the person caring for them, yet it is ethically significant for the weaker party to love the person caring for them. In fact, she argues, this kind of “responsiveness” is required for a relationship to really qualify as a relationship of care (Noddings 2013, 94).

Noddings’s rejection of a God who demands or commands love is also rooted in her claim that care that is offered in response to a rule or a sense of obligation is not genuine care, because it cannot be a product of the kind of spontaneous love or joy that she takes to be the hallmark of genuine, natural care. Kant too, rejects the possibility that “love” can be commanded, for much the same reason as Noddings. Kant makes two claims about the moral status of love: first, he argues that because love is an emotion rather than an action-guiding maxim, it cannot be the subject of a moral duty (Kant 1996, 6:401). Second, Kant argues that love helps the actor develop the kinds of inclination that will allow her to think and act morally; in this way, love is a necessary precondition for moral action, even if it

---

18 Noddings writes “Our logic may be summarized. A caring relation requires the engrossment and motivational displacement of the one-caring, and it requires the recognition and spontaneous response of the cared-for. When caring is not felt in the cared-for, but its absence is felt, the cared-for may still, by an act of ethical heroism, respond and thus contribute to the caring relation. This possibility, as we shall see, gives weight to our hope that one can learn to care and learn to be cared for.”

19 In addition to the problems described here, this definition ends up excluding the care performed by paid caregivers as a form of genuine care. This threatens to devalue the very work, often done by women of color, that care ethics claims to center. This is another way in which the rejection of rule-based, institutionally structured care, which, as I show here, is rooted in part in care ethicist’s rejection of abstraction, undermines the aims of care ethics’ feminist project. Notably, Mara Benjamin is able to give a robust account of this kind of care, perhaps because she does not place the same emphasis on “natural” care and the rejection of rules and institutions.
itself is not the subject of a formal moral duty (Kant 1996, 6:402). Recognizing these problems, Kant reinterprets the command to “love your neighbor as yourself” so that it “does not mean that you ought immediately (first) to love him and (afterwards) by means of this love do good to him. It means, rather do good to your fellow human beings, and your beneficence will produce love of them in you (as an attitude of the inclination to (beneficence in general)” (Kant 1996, 6:402). Here, Kant understands love in a similar way to Noddings—for both thinkers, love is best understood as something cultivated through doing good actions—caring—for others. However, Kant understands this as a version of the “saying” or “command,” and even an expression of acting in accordance with one's duty. In contrast, Noddings rejects this deontological language entirely. Noddings seems to ignore the approach that Kant considers here—in which duty and care (and the love that care can produce) are intricately related.

In the following section, though, I will argue that Jewish care ethicists have pursued this possibility, even as they offer trenchant critiques of abstraction in Jewish thought. This suggests that we may be able to separate the philosophical anthropological version of the critique of abstraction from the version which rejects deontology as overly abstract. As we will see in the following section, recent work in Jewish care ethics rejects abstract philosophical anthropologies, while retaining a strong emphasis on obligation and on ritual practices structured by rules.

**Jewish Critiques of Abstraction**

In recent years, there have been significant efforts to use care ethics as a tool for Jewish thought and theology, including one other chapter in this volume. However, these efforts have only rarely taken notice of care ethicists' use of use of anti-Jewish language and of incarnational theology, if at all. Nonetheless, I will show here that Jewish versions of care ethics take on a distinctive shape and adopt distinctive versions of care ethics' critique of abstraction; these differences may be explained, at least in part, by the implicit influence
of this theological background. I wish to highlight two such differences here; the first is readily apparent in Mara Benjamin’s recent influential book *The Obligated Self: Maternal Subjectivity and Jewish Thought*; the second is partially argued by Benjamin, and I will expand it here. First, Jewish articulations of care ethics tend to be less hostile to notions of moral obligation and moral rules—while, as we saw above, contemporary care ethicists tend to view these deontic rules as problematically “abstract” or “universal,” Jewish versions of care ethics tend to take halakhic rules as their model, and view moral rules as essentially particularized. Second, these versions of care ethics focus less on the notion of a “natural,” or “genetic” connection between people as the mark of “particularity.”

The first difference should not surprise us—as Benjamin notes in the opening line of her book, “To be a Jew, according to the classical textual tradition, is to be obligated” (Benjamin 2018, 3). Given Judaism’s heavy emphasis on deontological concepts like ḥiyuv (obligation) and mitzvah (commandment), it makes sense then, that Jewish care ethicists have been less willing to jettison deontological moral concepts like obligations and rules. The second, though, might seem ironic—Jewish culture and religion retains a significant emphasis on the importance of concepts of Jewish peoplehood, which is often conceived as a kind of “family group,” which often places significant emphasis on endogamy, and whose central marker of communal belonging is a physical, embodied ritual. While some modern Jewish thinkers sought to distance themselves from this genetic notion of “peoplehood,” others embraced it. The Weimar Jewish thinker Franz Rosenzweig famously describes Judaism as a “blood-community” (Rosenzweig 1971, 299). In this sense, the version of embodied, natural connection, that Noddings and Held prioritize could be seen to help make sense of a stream of Jewish religious thought which often makes Jewish ethicists and theologians nervous, perhaps even articulating it in a feminist key. However, Jewish care ethicists have by and large not pursued this opportunity.

Part of this reluctance may be explained by contingent features of the experiences of some Jewish care ethicists. Benjamin’s book
recounts two distinct experiences of “maternal subjectivity,” one with her biological daughter, and one with her partner’s biological daughter, whom she had to legally adopt because of the legal restrictions on queer families at the time. Thus, Benjamin’s own personal experience may prime her to reject Nodding’s and Held’s emphasis on “natural” relationships of care. Comparing her two experiences of entering parenthood leads Benjamin to remark that “the difference between becoming a mother through legal-bureaucratic means and becoming a mother by virtue of giving birth raised, for me, an unexpected question: why didn’t I have to take on the responsibility of being a mother to my biological daughter voluntarily, publicly, of my own accord, as I had with my nonbiological daughter?” (Benjamin 2018, xix). Like Held and Noddings, Benjamin considers the relationship between embodied relationships of care and those that begin as the result of a voluntary act of assent—Noddings argues that her “natural” form of care only becomes “sacred” when the mother voluntarily assents to it and “makes it sacred.” However, this similarity masks a more significant difference: given their strong emphasis on “natural care,” though, the need for a kind of “assent” or agreement to get the relationship off the ground can feel like a retrojection, something added to the theory in order to arrive at the pro-choice conclusion that best fits with the progressive politics Held and Noddings otherwise tend to endorse. For them, “natural care” is the default, and we have to do substantial analytic work in order to see how some form of agency or assent might still be ethically dispositive. Benjamin’s question reverses this assumption, by asking why there is not some formalized form of assent that is built into the structure of all caring relationships, even ones that seem entirely “natural.” By asking this question, Benjamin implicitly asks whether “natural care” might not be primary at all; it is just one of the ways in which a person can become an “obligated self” who is engaged in a relationship of parental care.20

---

20 Benjamin generally uses the term “maternal” to avoid “whitewashing a reality that still bears a strongly gendered aspect” because “even though men increasingly serve as primary caregivers for their children, for many or perhaps most people,
Benjamin arrives at this conclusion through a comparison with different ways that Jews enter the Jewish community. She writes:

for born Jews, the covenant to which they are part precedes any single individual’s life span or voluntary assent; Jews start out in some sense ‘always already obligated’ to the covenant... By contrast, converts to Judaism undergo a formal process, including examination, assent, and ritual action; but once they enter into the covenant, their membership can be abrogated no more than the born Jew. In both cases—becoming part of the Jewish people and becoming a mother—two distinct models are available: entrance into the relationship is accomplished either biologically, without need (or even possibility) of assent, or as an act of intention, with the accompanying demonstration through ritual act (Benjamin 2018, xiv).

While Benjamin identifies two models here, we can add others. For those born with foreskins, the process of entering the Jewish people looks different from the process for those born without them; despite recent efforts to come up with more egalitarian ways to celebrate the birth of babies assigned female at birth, significant differences remain, making the paths to entering the covenant, and to marking this process through ritual, even more diverse than the two options Benjamin discusses here.

There is a similar diversity in the ways that people enter the obligations of parenthood—someone conceiving a pregnancy with an egg donor might go through a version of both processes that Benjamin describes here: they will sign paperwork accepting the relevant cells, and consenting to the medical procedures necessary to implant them. And, if the process is successful, they will also physically give birth to the baby. There are many other forms of parenthood, and they too, deserve to be recognized as sites of care ethical knowledge. In order to do this, though, we will have to take on board the key assumption behind Benjamin’s question and recognize that the kind of “natural care” epitomized by the moment a biological mother first holds her baby, and taken as primary by both Noddings and Held, is not the child-rearing remains differentiated along gendered lines, and caring for children is coded female” (Benjamin 2018, xvii).
only way that relationships of care, even relationships of parental care, come into being.

To do this, we will need to reject some of Noddings and Held’s other key assumptions. The diverse models of parenthood that Benjamin affirms here, as well as the other forms that she does not name specifically, are made possible by forms of “institution,” “rules,” “law,” and “ritual,” that Noddings’s and Held’s analysis tends to reject as antithetical to caring. Benjamin is only able to adopt her daughter through a (highly imperfect) legal system which allows for parenthood to be entered into through contract; its attendant rituals allow Benjamin, her partner, and her child to mark the relevant transition. In Benjamin’s case, it would be better to replace the need for adoption by a same-sex partner with a fuller legal recognition of those partnerships, but even if this were the case, parenthood through these means would still be enacted through some combination of institutions, laws, and rituals. This fact does not undermine the more general point that adoption can be a meaningful form of parenthood, which is entered into through a ritualized legal process, rather than biologically; adoption, then, can produce relationships of care from which care ethicists ought to learn. In all of these cases, ritual, intuition, rules, and law, play a role that could not be replaced by a merely “natural” process of filiation, but these forces did not undermine the particular relationship of care between parents and children.

As we saw above, one of the main intuitions driving classical care ethics’ worries about institutions, rules, and law is that these social practices privilege the universal and the abstract over the particular. However, Benjamin is able to find strong, particularized forms of care even in relationships that are marked by these forces. As Benjamin notes, both of her children, and not just her biological one, placed her under some form of “obligation,” which was highly particularized. She writes:

To be an obligated self was to be subject to the law of an other: the law of the Baby. The law could not be fulfilled in abstract, but only in active,
embodied, material actions: soothing, feeding, cleaning, comforting, distracting, smiling, and wiping. It became the law of the crying toddler who sought out not just any, but specifically our (or my), comfort; the law of her seeking out our, or my face for approval or interest. The Law of the Baby was not the Law of Any Baby but rather the Law of This Baby. This Baby had to be woken up throughout the night to eat because she was born small. This Baby responded with great interest to one particular plush toy. This Baby’s imperative was to hold her at a certain angle so she would fall asleep for a nap. The next day, the next week, This Baby no longer responded to that position or that toy (Benjamin 2018, 8).

In this way, Benjamin is able to retain the sense that there is something about “This Baby,” which stakes a claim on me, without saying that these relationships of particularized care are based on the “Law of My Baby” where the sense of mine-ness is dependent on a “natural” relationship between the biological mother and the child. Far from rejecting the notion of rules or laws as incompatible with the particular needs of an individual child, Benjamin finds law to be a useful metaphor for describing these demands.

Benjamin’s emphasis on the particularized experience of caring for “This Baby” leads her to retain many of the same assumptions about the problems with “abstract” moral reasoning. She critiques many of the canonical figures in modern Jewish thought as relying too heavily on a version of an abstract “other” with “no specific social location or set of needs,” arguing that this led them to privilege a purportedly universal “dyadic” relationship between the ethical actor and a faceless “Other” (Benjamin 2018, 13). Instead, she argues that we should adopt a more particularistic approach:

By nature, a parent’s obligation is to a particular child or set of children, each of whom has specific needs and desires. Some children’s needs and desires are common to all children: the need to be fed, clothed, carried, and comforted. These needs place a set of demands on all caregivers, parent or otherwise. But children vary enormously in temperament, ability, and interests. A parent’s experience of obligation toward his or her child thus cannot be conceived only in terms of a universal set of demands that can be formulated only in abstract terms. In the maternal context, obligation already contains within it the particularities of one’s
child and the specific circumstances in which both parent and child live (Benjamin 2018, 14).

Implicit in Benjamin’s argument though, is a critique of, or at least a departure from, those care ethicists who reject language of obligation (Held does this strongly, Noddings rejects “principles,” but retains language of “obligation”). For Benjamin, there is some way in which the general notion of “obligation” is already somehow particularized in the context of a relationship of parental care.

In what follows, I want to think this notion through more carefully, in order to suggest that the best way to do so is to rethink care ethics’ relationship to abstractions. In many ways, what Benjamin is describing here is an abstract notion of “obligation,” which gives a basic structure for a relationship between a person and an action; but, in the context of parental care, this abstract notion already contains within it certain kinds of particularized content (i.e. addressing the specific needs of this child in front of me). Recognizing the relationship between the “Law of This Baby” and the general structure of “obligation” more generally is what allows Benjamin to identify disparate (and perhaps even seemingly opposite) actions as examples of “an obligated self” responding to “The Law of the Baby.” An “obligated self” might sing boisterously with one child and then sit quietly holding another, but both of these would be acts of parental care carried out by obligated selves acting under the Law of This or That Baby. Employing the abstract notion of obligation makes this kind of identification possible. Abstraction, then, is not the enemy here, it is the tool by which we can name the relation we want to describe, even if what it looks like to live that might look different, and be marked out by different institutional structures, rituals, and rules, in

21 This may be because Held seeks to put care ethics in more direct dialogue with contemporary debates in ethical theory. In order to argue that care ethics makes a distinct contribution to ethical theory, she needs to distinguish it from all forms of deontology.

22 We might wonder whether all obligations function this way: at some point fulfilling an obligation requires some very specific, embodied action, which implicates specific embodied others.
each case. In order to see this, I present another example of how abstraction can enter into care ethical relationships and thinking, this time drawn from my own experience.

Caring for An Abstract Other
At the age of 27, I was diagnosed with “premature ovarian insufficiency,” meaning that I had very low ovarian reserve for someone my age. The exact cause of my condition is still unknown, though it may have been the result of a complicated appendectomy I underwent three years earlier. At that time, when I presented in ER in Jerusalem with lower abdominal pain, it was assumed that I had an ovarian cyst, and I spent two and a half days on what was essentially a maternity ward before it was finally decided to give up on the plan for me to “wait out” the cyst and instead to perform a CT scan of my abdomen, revealing an appendix that was multiple times the normal size. If the ensuing infection really is responsible, my reproductive health issues are a perverse result of the well-documented tendency to assume that women’s pain is less severe and is more often than not caused by gynecological issues.23 I did not have a gynecological issue to start with, but I do now.

When I received the diagnosis, I was in graduate school, and nowhere near ready to begin considering having children. The kinds of “dependency work” that care ethicists tend to highlight (caring for young children, the disabled, and the elderly) played only an incidental role in my life. My parents had had bouts of illness, but at the time, they were living well and healthily thousands of miles away. Later on though, I began to understand that there were other forms of significant dependency work that were key parts of my life, even in the parts of my 20s that were characterized by a growing sense of independence, and the exploration that comes with it. As I argue here, one of the significant problems facing care ethics is the relatively narrow range of caring relationships it tends to highlight; part of this problem arises from the fact that it (and the general American

23 For a review of the literature on this see Samulowitz et al. 2018.
culture milieu out of which it grows) tends to associate some life stages with either “caring” or “being cared for,” in ways that obscure the care that can occur in other life stages or between two people in the same life stage. Anecdotally, it seems to me that many young adults, especially the large number who live far away from family, have substantial relationships of care with one another.

Within a few weeks of the initial diagnosis, I began treatment to freeze my eggs. This process is arduous under normal circumstances—it requires multiple daily injections, almost daily ultrasound and bloodwork to monitor progress, and a quasi-surgical procedure at the end to “retrieve” the egg for freezing. In my case, this process was even more drawn out than usual—my body responded to the drugs only sluggishly, and a process that usually takes around 7 days took me over 14.

Up to this point, my scholarly work had tended to focus on “dead white men,” often of the powdered-wig eighteenth-century persuasion. As an undergraduate, Kant’s theory of a universally shared human dignity drew me in to the study of philosophy. As I began to more directly contemplate and physically encounter the realities of my body’s capacity to produce a particular other, for whom I hoped, at some point in the future, to care, I began to turn to the care ethicists, hoping that they would provide me with some tools to think through my experience.

On the one hand, there was a sense in which I began to identify with these theorists more than I could have done before. My day was now structured around the physical demands of this little cell, which was encapsulated in a little follicle, whose measurements we followed each morning via ultrasound. That little cell needed one carefully timed injection in the morning and another at night. When its follicle grew bigger, it needed yet another to keep it in place until the doctor’s tools were ready to retrieve it. I had to bend the rhythms of my life in order to sync up with the demands of this microscopic entity, and, more importantly, with the possibilities for future care that that entity represented to me. In that exhausting, destabilizing time, I found some comfort in the idea that care could
be a source of ethical knowledge and reflection. The process was taking me away from my philosophical work, but the care ethicists suggested that there was something I could learn through this process, too.

However, the form of care I engaged in in those months differed in key respects from the kinds of care that care ethicists like Noddings and Held describe—as I show above, their account of care is focused on a kind of particularity that they think is only actualized in relationships between two fully particularized human beings. And, as I show above, their accounts used the first moment that an (assumedly biological) mother holds her child in her arms was often the central example used to advance their arguments.

On the one hand, this emphasis made total sense—I was, after all, injecting myself multiple times a day in order to preserve the possibility (and, to be honest, the numbers were not in my favor) of having that kind of moment, of being able to have a child that was “mine” in that sense. The care ethicist’s emphasis on this moment, and even on the need to have a “particular” relationship with a “particular” other, exemplified by the relationship between a biological mother and her biological child, seemed to erase the kind of care in which I was already engaged. I was already caring for this pesky little cell and the growing follicle that encapsulated it. That cell is obviously different from a particular child; the Law of the Cell was different than the Law of Any Given Baby. The Law of the Baby is built on a responsiveness to a particular other, but the Law of the Cell lacked the specificity, the particular features that meant that it would need a give plush toy, to be held at a particular angle.

The cell was, in some sense, not even really there—it was only a biological potential that had to be coaxed into enough “maturity” for it to survive its stay in the freezer. Its significance was less as a clump of biological material (though it surely is that, and I dutifully pay $600 each year for its safe storage), than as an imagined person, someone who made a kind of ethical demand of me, but who was not yet a full-fledged, embodied person with particular features. In this way, the other I cared for was closer to the Levinasian abstract other
that Benjamin rejects than the particular one she finds in the care ethicists and uses to critique canonical figures in the modern Jewish thought tradition. This other demanded my care in specific, embodied ways, but it remained abstract.

Benjamin begins her book by comparing the embodied form of obligation characteristically undertaken by Jewish men, through the mitzvah of wearing teffilin, and the ways that pregnancy physically marks women’s bodies. “As with teffilin,” Benjamin writes, “this boundedness is marked on the body: carved on muscles taut from the weight of carrying children; etched on the face in lines of sleeplessness, worry, and delight; engraved in the visceral response to the cry and needs of one’s child” (Benjamin 2018, xiv). Benjamin’s comparison highlights the ways that both of these experiences—of physically binding oneself to the God of Israel by wrapping a leather strap around the arm, of physically becoming bound to a child by hours of carrying, worrying, and delight—inscribe one’s obligations on the body of the obligated person. The egg-freezing also made a similar set of physicalized inscriptions: a rotating set of injection sites around my abdomen, some with bruises from less-than perfect self-administered injections, a perpetual bruising in the creases of both arms from daily blood draws. And, like lines of sleeplessness, worry, and delight that Benjamin describes, the sense of expectation, hope, disappointment, fear, and frustration also have left their marks on me, whether or not representative lines are “engraved” on my face for all to see. These inscriptions were made by the experience of caring for a being who remained in some sense abstract; they were marks of my response to the Law of the Cell.

As we saw above, Noddings and Held argue that adopting an abstract philosophical anthropology, or an emphasis on moral obligation automatically undermines relationships of care. By describing

24 There is substantial discussion of the “stigma” of infertility and of its “invisibility.” Some of this is indeed due to implicit social norms which makes discussing these issues difficult, but it may also be that the kinds of “inscriptions” that infertility (and, often, though not always pregnancy loss) leaves behind are ones that are not as outwardly visible. But they are there.
the Law of the Baby, Benjamin responds to this by recovering a form of particularity in obligation. My experience suggests that we can disentangle these elements further. This abstract other commanded me to care for it in specific, embodied ways; my response to the Law of the Cell made demands were nonetheless inscribed, felt, and enacted on and through my particular body. Abstract others can and do make moral demands on us, and these demands can be responded to through specific physical actions.

My care for this abstract other may or may not directly result in an opportunity to engage in more traditional care work, in which I, like the mothers that Noddings and Held describe, hold my child to my breast and contemplate the essentially embodied nature of the connection between us. As many doctors told me throughout the egg-freezing process, “the only way to find out is to try.” As I entered the second, third, and fourth rounds of this process, though, I began to understand that this “result” was, in some sense, not the central part of my experience, nor the source of its ethical significance. If, as seems likely at the moment, I have at least one child through an egg donor, that child will be mine only in some more complicated sense of the term. The musings that Noddings uses to describe the kind of cognitive acceptable of the relationality between mothers and child—“Will the child have my eyes? My love of philosophy? Or her father’s penchant for numbers?”—will not be quite coherent, because, if the child has “my eyes,” it will be a fluke (or more likely, a product of the fact that my partner and I share Ashkenazi Jewish ancestry and some associated physical features). Our sense of “relationality” will be differently constructed and will be facilitated as much by “institutions” (medical clinics, cell-banks, legal consent forms), as it will be by “natural care.” This need not mean, however, that it is not a form of “care work” which shapes my subjectivity, and, with God’s help, the subjectivity of my as-yet-abstract, hoped-for child.

This kind of care for abstract others is not unique to experience of infertility. Though I cannot speak from my own experience, it seems possible that women experiencing pregnancy loss may also have some sense of having “cared for” the lost pregnancy in ways that shape
their own subjectivity and that produce meaningful ethical insights. At a minimum, these experiences should push us to remember that the moment of first encounter between biological mother and child that Noddings and Held prioritize is not only a site of the kind of “joy” that Noddings takes to be a marker of care but also sometimes the site of tremendous pain and sorrow. These kinds of narratives rarely appear in care ethical theorizing, and we need to find ways to bring them into care ethical discourse.

Taken together, these experiences suggest that Noddings and Held’s decision to make a physical, embodied, and even genetic connection to a child (or other dependent other) the paradigmatic example of care work ends up obscuring how important experiences of care work. While Held and Noddings take “particularity” (which, as we saw above, is typified by a physical, biological, connection) as the marker of care relationships, this need not be the case. In turn, this suggests that we need to reevaluate this notion of particularity, as well as the rejection of “abstraction” of which it is both a part and a result.

In doing this, we should also interrogate the assumed connection between “universality” and “abstraction.” Feminist philosophers often reject the kind of “universal” ethical reason that they find typified in both Kant and in classical Utilitarianism. Used this way, “universal” seems to mean “applying in the same way to everyone”—the potential problem with this kind of “universal” claim is that it assumes the kind of equality it seeks to create; it assumes that everyone will be best served by the same kind of ethical norm or outcome. However, this critique of universality often comes hand in hand with the critique of abstraction, and the two terms are often assumed to be almost synonymous. Held writes that care ethics seeks to correct “abstract and universal claims of more familiar moral theories” (Held 2006, 10), and “calls into question the universalistic and abstract rules of the dominant theories” (Held 2006, 11), noting that both Kantian and utilitarian ethical theories “rely on simple, abstract, universal rules” (Held 2006, 63). Similarly, Noddings suggests that care ethics is a corrective to views which place too much emphasis on “universal principles,” or “universal love,” both of which she takes to be
insufficiently attentive to the “particular.” My own experience of caring for abstract others, however, suggests that the universal and the abstract are not quite the same thing, and that, by the same token, “abstract” and “particular” are not antithetical to one another. The other I cared for in those months of treatment was not “particular” in the sense that Noddings and Held describe, or even in some less “genetically” oriented version in which is marked only by a kind of embodiment and the specific needs that it comes with, but which does not require some “natural’ connection to a biological parent, but I cared for it through a specific set of embodied actions. At the same time though, it did not have the kinds of particular features that Benjamin highlights in her analysis; it remains imagined, conceptualized with these specific features left blank or quite fuzzy around the edges. It is an abstract other with particular needs; making it in some sense “abstract,” but not “universal”. 25

Some philosophers have argued that this “fuzziness” is characteristic of “transformative experiences,” which have a unique epistemic structure, including and especially childbearing In her path-breaking article “What You Can’t Expect When You’re Expecting,” the epistemologist L.A. Paul argues that the experience of having a child fundamentally changes one’s epistemology, and thereby, one’s evaluation of the experience itself; this makes it impossible to objectively evaluate the experience in advance (Paul 2015). (She too focuses on the experience of having biological children.) As someone experiencing infertility, I find myself stuck (at least for the moment, though hopefully not in perpetuity) on one side of the epistemic barrier that Paul describes. I can, as Paul notes, only imagine what lies on the other side of the barrier—this process of imagination requires a form of abstraction. Not only do I have to imagine what it would be like to go through the experience of bringing the other I am currently

25 The idea that rules can contain both generalized notions and particularities has a long history in Jewish thought. Maimonides distinguishes between these two levels of analysis for halakhic rules in Maimonides 1974, III 26.
imagining into an independently embodied form of particularity, which may or may not be marked by a genetic connection between the two of us, I also have to imagine a version of myself who does not yet exist in an embodied sense—I have to imagine what I will be like once have I have had the transformative experience that Paul describes. Here, however, I want to suggest that, for some people, the experience of performing this kind of abstract thinking, and engaging in the forms of embodied care which this abstract other can demand, is itself a significant experience of care, to which care ethicists ought to devote their attention. This experience of living with and caring for abstractions is a kind of transformative experience of the kind that Paul describes. My relationship to childbearing, and to what it means to do “care work,” has changed significantly after each round of treatment, whether “successful” or otherwise.

My arguments thus far suggests that we need to reevaluate the rejection of abstraction and abstract thought that has been pervasive in care ethics. Abstract thinking plays an important role in the kinds of care work performed by parents confronting infertility and pregnancy loss—these experiences have been treated only rarely in the care ethics literature, if at all. Thus, centering them expands the kinds of care that care ethics can learn from and also allows a wider range of people to be considered as “caring” subjects.

Though, as I showed above, she tends to strongly reject “abstract” patterns of thought or conceptions of relationships, Noddings makes a nod in this direction when she suggests that we can care for ideas. Noddings writes that “The engrossment of caring may be directed to objects and ideas, and to engage in this kind of caring, we need to be free to pursue where we are led by the objects and ideas” (Noddings 2013, 174). Noddings argues that when someone has this kind of “engrossment” with an idea, her subjectivity becomes blurred, in a way that mirrors Buber’s I/Thou interactions (to which Noddings refers frequently throughout). These kinds of relationships, she writes “Involves a dual orientation towards objects that are confronted in consciousness: I am subject, but then I am object. I relax my subjectivity. Again, we see the similarity between this sort of activity and
caring for human beings” (Noddings 2013, 176). Here, Noddings’s argument implies that that we can relax the requirement that care relationships be based on a “natural” connection with an embodied other, though she does not use this argument to temper her earlier claims about abstraction and particularity. By the time Held writes her restatement of care ethics, this openness to caring for “objects and ideas” has all but disappeared. To some extent then, reclaiming a place for abstraction in care ethical thought is actually a return to some aspects of care ethics’ beginnings; however, such a return needs to be accompanied by a new awareness of the role of anti-Jewish categories and ideas, and the exclusion of some experiences of care, in care ethics’ earlier forms.

Abstract Expectation and Care in Jewish Thought
Above, we saw how Noddings and Held rely on an assumed dichotomy between a disembodied and embodied ethics, which in turn, is rooted in a dichotomy between a disembodied and embodied religion. Here, I suggest that Jewish texts can provide some useful resources for thinking beyond this dichotomy, to begin to develop an ethics which has room for both the kinds of embodied relationships of care for particular others that Noddings and Held highlight, while not excluding other forms of care which are based on some form of abstraction, or which are only made possible by the kinds of intuitional, legal, and ritual forces that Noddings and Held criticize. This is not to suggest that Jewish thought is the only possible source of such resources, but rather that it might be one place to find them. I hope scholars with other expertise will also contribute to this discussion using other texts, ideas, and experiences.

A rabbinic text discussing amulets thought to prevent miscarriage provides us with one useful set of images for thinking through this form of abstract care. In general, rabbinic law prohibits carrying objects between private and public spaces on the sabbath, though objects that are “worn” rather than carried are permitted. Thus, the Talmud includes a detailed discussion about what kinds of objects can be “carried out” on Shabbat. The rabbis consider whether a woman
may go out with a “preservation stone,” a kind of amulet thought to prevent miscarriage:

Our Rabbis taught ‘One may go out with a preservation stone on the sabbath, according to Rabbi Meir.’ They said ‘even with a counterweight to the preservation stone [that has the same weight].’ And not only someone who has previously miscarried, but also in case she does miscarry; and not only someone who is pregnant, but also in case she becomes pregnant and miscarries. Rabbi Simlai said in the name of Abaye, ‘This applies only in a case where one finds a stone that is already the same weight [and not in a case where one cuts the stone to be the same weight].’ Abaye asked, ‘And what about a counterweight of a counterweight?’ Let this dilemma stand unresolved (B. Shabbat 66b).

Abstraction enters into this text in two distinct stages: the rabbis begin by imagining an embodied act of care for an embodied fetus—there is a pregnant woman who needs to prevent the loss of this specific fetus by carrying this specific stone. Almost immediately, though, the rabbis consider whether the stone could be replaced by another stone, which shares some physical properties with it, but is not in fact the preservation stone, but instead merely a stand-in, a kind of representation. Then, they consider whether a representation of a representation of the stone might suffice.

The rabbis also consider whether a woman might be allowed to carry the preservation stone not in response to some embodied need or reality—i.e. an already conceived fetus, or a history of past miscarriage which might necessitate additional precautions—but also a situation where the woman might carry the stone for a hoped-for, but not yet realized, pregnancy. The rabbis permit what would otherwise be a serious violation of biblical and rabbinic law in order to allow this woman to care for a pregnancy which is not yet an embodied reality, but an imagined, hoped-for presence.

26 I have offered a similar analysis of this text in my essay “Water Wears Away Stone,” *Nashim: A Journal of Jewish Women’s and Gender Studies*. Fall 2020. Translations from rabbinic texts are my own; translations of biblical verses are from the NJPS.
This is a surprising move, given the other ways in which the rabbis tend to restrict women’s bodies and sometimes refuse to trust women’s own testimony about them. However, this kind of embodied care for an as-yet abstract, hoped-for reality is actually quite familiar to the rabbis. Rabbinic imagination of the future redemption of the Jewish people requires just this kind of embodied care—it requires physical, ritual actions—but the reality itself remains only imagined and abstract; the messiah can only be imagined and expected, not yet pointed to as an embodied reality. Some modern Jewish thinkers suggested that this kind of expectation is a permanent state; Yeshayahu Leibowitz famously said that the Messiah is someone who “Will come,” and that “any messiah who actually comes is a false messiah” (Yeshayahu Leibowitz on the Coming of the Messiah n.d.). Other medieval and modern Jewish thinkers took this as an invitation to imagine what the future redemption would look like in great detail, and even to imagine that some embodied actions in the world meaningfully concretize it, but they nonetheless recognize that these concretizations aim at an as-yet unrealized vision of the future. These concretizations too, are described as mitzvot, responses to a command or a law. On this view, law demands concrete action, in the service of an abstractly construed, and as-yet unrealized, redemptive possibility.

In both the Bible and rabbinic literature, this expectation of redemption is described using infertility and eventual pregnancy. Throughout the Bible, a “barren” woman is used as a metaphor for the unredeemed Jewish people. To imagine Israel’s redemption, then, the Biblical text imagines that this “barren” woman has children. In Psalms, God is described as “[setting] the childless woman among her household as a happy mother of children” (113:9). Isaiah’s prophecy depicts the redeemed Israel rejoicing as a woman who is newly able to bear a child: “Shout, O barren one, You who bore no child! Shout

27 See for example debates about evidence of virginity in B. Bava Metzia 31b.
28 In general, I use the “person-first” language of “[people] experiencing infertility,” but for biblical verses I retain the more traditional “barren woman” because this matches the grammar of the Hebrew text and is more contiguous with the text’s reception.
aloud for joy, You who did not travail! For the children of the wife forlorn Shall outnumber those of the espoused—said the LORD” (Isaiah 54:1). The expectation of redemption, then, analogized to the expectation of a woman trying (and often failing) to conceive—redemption is achieved when conception again becomes possible.

The rabbis then read these texts alongside earlier Biblical narratives of women experiencing infertility, including Sarah, Leah, and Hannah. Though these women were once described as “barren” and “without children,” God “remembers” them and they give birth to healthy children. The rabbis view the infertility of the Jewish people as a whole (i.e. their lack of redemption), as the last step in this story.

‘[Setting] the childless woman among her household as a happy mother of children’ (Psalms 113:9). There are seven childless women: Sarah, Rebecca, Rachel, and Leah, as well as Manoach’s wife, Hannah, and Zion. Or, another interpretation: ‘[setting] the childless woman,’ refers to Sarah, our mother, ‘Now Sarai was barren,’ (Genesis 11:30). ‘A happy mother of children,’ refers to ‘That Sarah would suckle children’ (Genesis 21:7). Or, another interpretation: ‘[Setting] the childless woman,’ refers to Rebecca, ‘Isaac pleaded with the \textit{LORD} on behalf of his wife, because she was barren’ (Genesis 25:21), ‘A happy mother of children,’ refers to ‘and the \textit{LORD} responded to his plea, and his wife Rebekah conceived’ (Genesis 25:21). Or, another interpretation: ‘[setting] the childless woman,’ refers to Leah, ‘The \textit{LORD} saw that Leah was unloved and he opened her womb’ (Genesis 29:31), from here we learn that Leah was without children. ‘A happy mother of children,’ refers to ‘for I have borne him six sons’ (Genesis 30:20). Or, another interpretation: ‘[setting] the childless woman,’ refers to Rachel, ‘Isaac pleaded with the \textit{LORD} on behalf of his wife, because she was barren’ (Genesis 25:21), ‘A happy mother of children,’ refers to ‘The sons of Rachel: Joseph and Benjamin’ (Genesis 35:24). Or, another interpretation: “[setting] the childless woman,” refers to Manoach’s Wife, ‘An angel of the \textit{LORD} appeared to the woman and said to her, “You are barren and have borne no children”’ (Judges 13:3). ‘A happy mother of children,’ refers to ‘you shall conceive and bear a son’ (Judges 13:3). Or, another interpretation: ‘[setting] the childless woman,’ refers to Hannah, ‘Peninah had children, but Hannah was childless,’ (I Samuel 1:2). ‘A happy mother of children,’ refers to ‘[Hannah] conceived and bore three sons and two daughters’ (I Samuel 2:21). Or, another interpretation: ‘[setting] the childless woman,’ refers
to Zion, as it says ‘Shout, O barren one, You who bore no child!’ (Isaiah 54:1). ‘A happy mother of children,’ refers to ‘Who bore these for me When I was bereaved and barren’ (Isaiah 49:21), (Pesikta d’Rav Kahanah 20:1).

In the rabbis’ imagination, these stories of infertility all have happy endings; in each one, God intervenes and the women give birth; their abstract others become particularized. In this way, the rabbis express their hope that the redemption too will be swift and immediate. At the same time, though the rabbis also know that this is not quite how the stories go: Sarah’s newly born son is nearly sacrificed; Rebecca’s twins grow up to hate one another; Leah remains the scorned wife, whose only solace is in her children, but who, by naming the last child Judah implicitly declares defeat in her search for love;29 Manoach’s wife bears a son who is thwarted by his lover; Hannah gives birth to Samuel who presides over the Israelites’ ongoing political woes. Living under Roman rule, the rabbis’ own path to redemption will be equally complex. The messiah—when it comes—comes through “birth pangs.”30 In eliding all of this pain in the midrash, the rabbis invite us to find beauty, and even redemptive potential, in the abstract expectation of the mother who tries to conceive. What happens as the children grow, and become increasingly differentiated into adulthood, is less crucial than what happens when these women discover they can conceive and safely bear children.

When this kind of redemption does come about, though, it is figured as a kind of surrogacy, or at least some kind of deviation from a “natural” pattern of filiation. In Isaiah’s telling, when God describes Zion’s eventual redemption, the “barren” Zion finds herself reunited with “the children you thought you had lost.” This is what leads the personified Zion to ask, in the verse the Rabbis use as emblematic of

29 I first heard this interpretation of Leah naming her sons from Shai Held. Unlike after the birth of her other children, after Judah’s birth, Leah does not suggest that the child is born in order for God to fulfill her prayer to her husband to love her.

30 Elsewhere, the rabbis suggest that these will be so violent that it might not be worth living to see the messiah. See B. Sanhedrin 98a.
a completed redemption “Who bore these for me when I was bereaved and barren?” Even though Zion’s children are “restored,” the experience of this restoration is shaped by the experience of having expected and hoped for them, and even having thought all hope was lost. Contextualized this way, the rabbinic hope for redemption is analogized to the kind of care experienced by the woman experiencing infertility and pregnancy loss, caring for some “abstract” other who has not come into the world.

Like the kind of care that leads the woman to carry the preservation stone, this hope is sometimes quite distant from embodied, lived reality. Both of these acts of care are experienced and expressed through specific, embodied actions of care and devotion. The rabbis imagine that human beings can participate in the process of redemption in a variety of ways, including ritual performance of the mitzvot\(^{31}\) and caring for the sick, the widow, the orphan, and the poor. All of these are embodied actions carried out at specific times and addressed to specific needs, but all of them are also understood to be expressions of hope and, I want to suggest, care, for an as-yet-abstract reality.

Works Cited


\(^{31}\) In his contribution to this volume, Jason Rubenstein suggests that the rabbis may imagine the mitzvot themselves as a form of care for God.
Theological Spelunking with Care Ethics: Caring Ethical Standards for Relational Maintenance across Religious Pluralities

Maureen Sander-Staudt

My mother often recounts why she married early and how the day was saved by the courage of her uncle. She planned for a Christmas wedding but wed in September because things had become unbearable in her family home. Raised as a staunch Irish Catholic, she converted to my father’s Protestant religion. Despite both being branches of Christianity, my grandparents steadfastly subscribed to Catholic doctrine that held all converts from Catholicism as apostates, automatically excommunicated and condemned to eternal damnation. Similar consequences faced Catholics associating with apostates. My grandparents lamented her conversion out of fear for her mortal soul and their own. They ambivalently attended her wedding, but refused to walk her down the aisle. Just as my mother braced to walk alone, her uncle offered his arm, whispering “If you were my daughter, I would walk you down the aisle”. Over the next few years my mother’s relationship with her parents mended. This was made possible in large part by my great uncle’s example. In 1962 Pope XXIII established the pontifical council “Secretariat for Promoting Christian Unity”. Two years later this council issued the “Unitatis Redintegratio” (Restoration of Unity), an ecumenical decree allowing Catholic converts to other Christian faiths to no longer be excommunicated as apostates. Dialogue was also opened with those of non-Christian faiths. The decree remains controversial to this day (Apostasy | Catholic Answers).

Introduction

For many in the world today care relations are inseparably entwined with religion (Harper, 2012). Religious rituals and beliefs often bolster care relations, but are sometimes simultaneously damaging, especially when conflicting. Both internal and external religious
differences are ubiquitous sources of relational tensions. Although religious belief is on the decline in the U.S., religion structures the lives and relations of many, and globally, more often women than men (Pew Research Center 2016; 2019). This is even though most major world religions have patriarchal histories exclusive and oppressive to women and others. For such reasons foundational care ethicist Nel Noddings (1984) posits an inherent antagonism between care ethics and Christian ethics, and her analysis raises general questions about the theoretical positioning of an ethics of care to religious teachings and practices that seemingly run contrary to caring ideals. How can care ethics reach within and across religious pluralisms to maintain relations? In this chapter I distill Noddings’s analysis of Christianity to provide more general standards for assessing religious beliefs and practices, and ask how we might better care across religious relational tensions and pluralities.

Philosophically, a care ethicist might characterize the exploration of the care ethical potential of various religions as “theological spelunking”, i.e. an open-minded, but critically perilous exploration of certain religious approaches to care, in reference to Plato’s famous allegory of the cave. In this allegory prisoners (representing the human condition) mistakenly take the shadows on the walls of their cave to be the source and stuff of truth. One escapee is able to perceive the true nature of the world beyond the cave and returns to share this knowledge. Rather than being welcomed, the escapee is violently rebuffed. This allegory classically distinguishes the need to sort belief/faith from knowledge, and acknowledges the relational pains associated with doing so. As such, it has nuanced applications to religion, philosophy, and care ethics.¹ Three aspects of Plato’s allegory readily apply to a care ethical assessment of religious approaches to care. Like Plato’s metaphorical cave where truths are obscured by shadows fixed under conditions of captivity, religions often (but not

¹ The use of Plato’s allegory of the cave as analytical framework does not assume philosophy to be the singular or infallible source of truth, and recognizes points of departure between this characterization of enlightenment and an ethics of care.
universally) are 1) informed by power and its lack, in that they have
developed within and through sex and gender hierarchies and other
systems of social domination; 2) sources of epistemic and metaphysi-
cal claims that stem from esoteric origins, as well as privileged per-
spectives afforded by relational power dynamics that are 3) resistant
to change and its agents. This resistance to change stems in part
because change can be psychologically, physically, and relationally
painful.

Crossing religious worldviews and cultural milieus is also difficult
without first-hand knowledge, meaning that evaluating care standards
across pluralities requires epistemic displacements and loving moral
apprenticeships of the sort described by María Lugones (1987). As
Lugones points out, love reveals pluralities that are incompatible with
fusion or erasure of difference. These are perspectival explorations of
the other that yield subjective knowledge. While contemplation
of caring standards rooted in religion is already a kind of “theological
spelunking” of unknown and unfathomable metaphysical depths,
consideration of traditions outside of one’s own “web of relations” is
even more precarious. These features provide vital context for con-
sidering how religions structure their own approaches to care, behoov-
ing care ethicists to develop epistemic, normative, and pragmatic
standards for assessing the compatibility of care ethics with various
religious teachings and practices, in manners consistent with caring
ideals, that can reach across religious divides.

To this end I first review Nel Noddings’ claim that care ethics and
Christian ethics are incompatible (1984; 1989), analyzing the New
Testament story of Mary and Martha as further evidence that Chris-
tianity seemingly has some incongruities with care ethics, while
acknowledging more generous readings. I then distill general care
ethical standards for assessing religious approaches to care implicit in
Noddings’ analysis and qualify her rebuke of Christian ethics with
five areas of potential compatibility. I finally use these adjusted reflec-
tions to scrutinize religion “writ large”, considering the case of the
Fundamentalist Church of Jesus Christ and the Latter Day Saints
(FDLS) to explore how religious abuses of care can be more caringly
responded to and remedied by care ethicists, across pluralistic relational webs. The FDLS have come under legal scrutiny in the U.S. because their invoked right to religious freedom conflicts with wider state and federal laws outlawing polygamy and child marriage. My claim is not that this case is “writ large” because it is paradigmatic of Christianity or religion more generally, but that the extreme religious beliefs of the FDLS clearly violate Noddings’ qualified caring norms, yet highlight the need for sensitivity within care ethics to religious differences, as well as the constitutive nature of religious belief to many embedded care relations, and the difficulties issuing from singularly using justice approaches to resolve religiously infused relational tensions.

Nel Noddings’ Care Ethical Critique of Christianity

“In wanted to preach a great sermon about colored women sittin’ on high, but there wasn’t no pulpit for me.”

Zora Neale Hurston, *Their Eyes Were Watching God*

In most ages women have lacked epistemic privilege in religion. The silence of women in most religions is compounded by overlapping social factors, such as race, class, familial and sexual positioning, and education. The ethics of care initially sought to assert feminine power in psychology and moral theory in the work of Carol Gilligan, by affirming the idea that women and the work of care yield “a different voice” (Gilligan 1982). It raises the general question of how those marginalized in and by ethics (and religion) can have their different voices more readily heard. Care ethics today admits to an intersectionality of embedded relations, but remains dubious of dominantly masculine understandings of religious concepts such as “God”, “spirit”, “sacred/profane”, “piety”, “sin”, etc.

Nel Noddings, the other key founder of the ethics of care, pursued this line of thought in her ongoing critiques of teachings associated with Christianity. Her views are not infallible, but initiate thinking about the amenability of care ethics and Christianity, and various aspects of religions more generally. At first glance, Christianity seems,
like many religions, to be compatible with care ethics in its commitment to care as a spiritual ideal. Historically, Jesus Christ exhibited nurturing traits, taught both women and men, and preached love and forgiveness for all humankind. Yet contrary to the feminist commitments of care ethics, the divine absolute in Christianity is typically conceptualized as a Father-Son, in trinity with a genderless Holy Spirit. Femininity is largely filtered through the image of the Virgin Mary, who Catholics revere as a saint but not Goddess, and Protestants as the comparatively insignificant human mother of Jesus. Even in liberal denominations where women serve as ordained ministers, Christianity gives primacy to male spiritual authority. Caution is needed not to overly simplify understandings of sex and gender roles in the many nuanced branches of Christianity. But a care ethical treatment of Christian theology starts by acknowledging with Noddings that it to varying degrees perpetuates male supremacy in its understandings of God and the good human life, and often remains committed to abstract spiritual principles over relations with particular others.

In *Caring*, Nel Noddings cites “irreconcilable differences” between Christian and care ethics (1984, 29). Her defense of this position emerges from her analysis of how care ethics differs from Lawrence Kohlberg’s stage six of moral development, characterized by transcendence to universal moral principles. This distinction is exemplified in Søren Kierkegaard’s interpretation of the story of Abraham and Isaac, whereby Abraham’s willingness to sacrifice Isaac is justified as supra-ethical, because Abraham’s paternal bond to Isaac is superseded by a higher and absolute duty to God (43). In contrast, Noddings characterizes Abraham’s obedience as “horrendous” because “the one caring, male or female, does not seek security in abstractions cast either as principles or as entities”, but “remains responsible here and now for this cared-for”, embodied as a “touchable child” (43). Caring moral obligations are rooted in natural caring, which grounds ethical caring. Nor does Noddings accept this story as a didactic device to teach the moral impermissibility of human sacrifice. Such a lesson uses Abraham and Isaac “fearfully and painfully” (44), possibly destroying care relationships without even consulting Isaac’s mother, Sarah.
In *Women and Evil*, Noddings expands her claim that care and Christian Ethics are incompatible by analyzing evil from the perspective of women’s experiences (1989). She rejects Augustine’s theodicy which reconciles God’s goodness with the infliction of pain and the neglect of suffering (19-20). Noddings finds evil in these tendencies, as well as God’s aloofness (19-20). She traces two dynamics underlying the incompatibility of Christian ethics with an ethics of care. The first of these characterizes embodiment as evil, especially women’s sexual embodiment. Many churches see embodiment and connection with particular others as impediments to clerical devotion, and Noddings censures the paradox noted by Judith Hauptman—that “man’s welfare seems to be the primary mission of women in biblical and Talmudic accounts” (42). Quoting Susan Brownmiller, she denounces the spiritual reversal of nature where woman is born of Adam because: “with this unusual reordering of biological birth, the submission of woman to man was given firm theological basis” (84). Such ideas distort associations between sexuality, violence, femininity, and power, spurring historical witch hunts and damaging relations. Noddings rejects the dual poles of Christianity—tough masculinity and forgiving and merciful femininity—in favor of an approach that “seeks to prevent a second blow without striking back in violence” (50-1). Instead of substituting male deities with female, Noddings encourages critical religious education (40). The story of Genesis should be placed in its historical context of struggle to defeat Goddess worship, and one might add, the plurality of polytheism (56).

The second dynamic creating incompatibility between care and Christian ethics for Noddings is the Christian ideal of the “angel in the household”, which contains, commodifies, and coerces women’s care labor. Within Genesis she finds motherhood to be little venerated or featured. This ideal limits women’s virtues to the domestic sphere, while the Virgin Mary resists them to contradictory standards of virginity and motherhood. Women are commodified by men wanting wives to be “virgin property” and mothers to be “asexual service machines” (84-5). In response to the question of whether it is evil for women to find happiness in coercive care work, Noddings answers
that such work is not itself evil, but that women (and men) who coerce others to care thereby engage in evil. Women should not be confined to domestic tasks, nor should they alone perform them (112). Noddings’ argument can be extrapolated as the normative standard that although care work is essential, no one, male or female, should be coerced or confined to care work, especially when such work constitutes a disenfranchised class.

For Noddings, real evil, moral evil, occurs when some agent causes or fails to alleviate pain when able to do so (99). Offering another important standard for care ethics, she rejects feminist attempts to overcome evil by making people helpless in new ways or further separating them (113). Whereas liberal feminism seeks equality for women by transitioning them from domestic work into the paid workforce, for Noddings this only re-mystifies work as legitimate only when paid. Her point is bolstered in that while U.S. women have been widely integrated into the paid workforce, it has been at the cost of a wage gap especially pronounced for mothers, and of dependency upon unreliable, expensive, and sometimes exploitative care services. But Noddings finds no relief in Christian religious traditions that ratify evil by distracting people from each other and leading them to believe that salvation rests in relation only to God (200-1). She rejects attempts to reconcile feminism and faith that proceed by arguing that Christian patriarchal practices have departed from an original (divine) ideal of sex equality, or that they are open to reform. For her, both approaches lack transformative power (223). Instead, Noddings concludes that an ethics of care should be open to founding new religions that avoid ontological and supernatural claims about God, understanding “God” rather as referring to psychological human realities (Ibid).

---

2 The Covid-19 pandemic has heightened tensions for U.S. women between paid work and care responsibilities, with women disproportionately being fired, leaving the paid workforce, or taking pay cuts to meet caring needs of children, aging parents, and the ill (Adely 2020; Scharff 2020; Smith 2020).
Ultimately, Noddings does not believe that people must be liberated from religion, but encourages care ethicists to be skeptical of the ability for patriarchal religions to change in any substantial or timely fashion, and to be dubious of ontological spiritual claims (2003, 241). Speaking to women and others who feel ambiguous about religion, she advises that each must find their own way. Different people desire different things, and some take refuge in formal religious settings, while others prefer nature. Noddings finds that moments of solitude are “essential” for progress to be made in any spiritual and philosophical journey (241). Yet ironically, the social and political dynamics of care again impinge, as moments of solitude are precisely what care responsibilities and religious activities can mutually thwart, as is further evinced by the biblical story of Jesus’s visit to Mary and Martha.

The Story of Mary and Martha

“Heavenly Father, we are tired.”

Noddings’ pessimism about the compatibility of care and Christian ethics is bolstered to some degree by the New Testament story of Mary and Martha as recounted in Luke 10:38, and some of its contemporary interpretations. In these passages Jesus and his disciples visit Mary and Martha, the sisters of Lazarus, after Martha opens her home to them. Whereas Mary sits at the feet of Jesus learning from him, Martha makes hospitable preparations, as was socially expected of women. Frustrated, Martha asks Jesus to admonish Mary for not helping. Jesus responds: “Martha, Martha, you are worried and upset about many things, but few things are needed—or indeed only one. Mary has chosen what is better, and it will not be taken away from her” (Luke 10:38-42, NIV).

This story is often heralded as evidence that Jesus rejected the expectation that women should be responsible for care work to the exception of intellectual and spiritual activities, and that he ministered openly to women. On the one hand, this story recognizes women’s unique burdens of care, and follows Noddings’ recommendation for the need of spiritual pause (if not solitude). But on the other hand
it does not resolve the question of who does the work of care, and how it is to be balanced with other activities. As Joan Tronto argues, for care to be more just we need to “devote ourselves to practicing it in more democratic ways”, and this includes religious domains (2015, 33). While the story of Mary and Martha takes the step of excusing women from care work long enough for religious study, it retains sex and gender hierarchies. Mary and Martha presumably will complete this work later because caring need is persistent and perpetual, and traditionally performed by women. Jesus retains male privilege in being the teacher and arbitrator of the moment, with Mary at his feet. Like the Christian ideal of a “virgin mother”, this story poses a dilemma—care providers like Martha must complete care work AND be able to set it aside for religious study. But the story of Mary and Martha side-steps this tension by adopting the perspective of those who have “privileged irresponsibility”, the ability to avoid being personally responsible for care work as a result of being well positioned in regard to class, sex/gender, race, and/or occupation, or in this case, as spiritual teacher (Tronto 1994, 120). Jesus and his disciples can continue religious study without considering how and when Martha’s care will be completed (and in a pinch can assume a miraculous ability to feed multitudes). The story of Mary and Martha demonstrates how women are pitted against one another in double binds, and how turning to other activities is impractical without comprehensive social change as called for by Tronto.

Some modern day treatments of this story on Christian websites support this analysis. For example, on “Encouragement Café”, a Christian web community with over 1.6K shares, contributor Lara Sadowski relates to the story of Mary and Martha because “she longs for a clean, organized home full of happy family and guests, but can never achieve it, nor find time for religious study”. This creates guilt that she is “disappointing Jesus”. She instructs readers that “Jesus did

3 Noddings account of her own family’s choice to forgo church attendance reflects this tension, in that she confides that they instead completed light chores, as many families do.
not intend for us to beat ourselves up if our kitchen is not picked up or our laundry is left unfolded. He just longs to spend time with us.” She encourages women to find 5 minutes a day for religious pursuits and then work to increase this time. This advice reflects Jesus’ response to Martha. Rather than questioning these norms and attempting to change them, Sadowski offers this prayer:

Heavenly Father, we are tired. We have husbands, kids, parents, siblings, carpool lines and dirty laundry. So many times we are so hard on ourselves because we can’t seem to juggle all of these balls at once. Please help us to seek You first above all things because we know You will always direct our paths. Thank You for never giving up on us!

In addition to implicit heteronormativity, Sadowski does not seek to redistribute care labor through sacred or secular channels, but implies that women are spiritually flawed unless giving precedence to a male God over care work.

Understood this way, the story of Mary and Martha supports Nodding’s thesis that Christian ethics is not fully compatible with care ethics. Joan Tronto shares such concerns by observing that differences in religious beliefs and other social factors encourage “unsympathetic disregard” for others (2013). This psychological mechanism makes it possible to praise oneself for one’s own caring while decrying the care of others. Such judgments create empathy gaps toward those who are less well off by casting their plight as due to choices rather than the lack thereof (102). While the story of Mary and Martha teaches that women should not be judged for foregoing care for spiritual pursuits, it is silent on how to combat such empathy gaps, and the social tendencies of people to judge women more harshly than men for domestic neglect.

But it may be rightly objected that this analysis cherry picks the least generous interpretations of the Christian religious tradition. One could give other examples more compatible to care ethics, such as the Benedictine spiritual tradition wherein each task is a way to honor God (ut in omnibus Deus glorificetur, “That in all things God may be glorified”), so that spiritual tasks are not of higher value than
domestic. Likewise, some women have been able to create Christian communities that balance spiritual life and care, as in the Beguinage communities in Amsterdam and Belgium, founded in the 13th centuries. These “cities of women” allowed single women and widows to pursue spiritual life and economic self-sufficiency through paid care work without binding vows, and to find protection in times of war and violence. Indeed, not all Christians accept sex/gender and other social hierarchies that characterize modern day care labor. Jesus was remarkable for teaching women at all, and for rating women’s religious education as of higher importance than their participation in hospitality traditions unequally serving men. His willingness to challenge patriarchal traditions demonstrates the appropriateness of progressive religious change on behalf of care providers. Such considerations require care ethicists to qualify Noddings’ view that the differences between Care and Christian ethics are “irreconcilable” in favor of a more nuanced view that finds the baby in the proverbial bathwater.

Qualifying Noddings’ care ethical standards for religious epistemology and practice

“There is no religion without love, and people may talk as much as they like about their religion, but if it does not teach them to be good and kind to man and beast, it is all a sham.”

Anna Sewell

Noddings’ overall analysis implies at least six care ethical standards for assessing religious belief and practice:

1) Relational duties to particular others should take precedence over abstract principles and Gods.

---

4 The ethics of care was originally characterized as an unprincipled ethic adverse to general rules and standards. However, this view altered to allow for standards that are contextually applied and sensitive to the particularities of unique relations, that are distinct from the standards of justice (Benhabib 1987; Held 1993, 33-35)
2) Religious epistemology should include the subjective views of women and others involved in care, or who are otherwise disenfranchised.

3) Embodiment and sexuality should not be associated with evil. The imposition of pain and the failure to alleviate pain count as evils.

4) Religious beliefs and practices should not damage or dissolve care relations without serious cause.

5) Care practices should be widely distributed and non-coercive.

6) Claims about divinity should be understood as psychological and natural human realities, not spiritual or supernatural ontologies.

These standards offer a promising base for care ethical religious assessment. But to affirm the complete incompatibility of Christian and care ethics is hasty. Christianity is at least an ethic about care, if not an ethic of care. In moving toward a general theory of women and religion, Arvind Sharma notes the difference between considering women and religion and considering religion and women. Similarly, there is a difference between developing a care ethical theory of Christianity, and a Christian theory of care ethics (2000). Even so, there is some overlap and the needed variables for comparative analysis are complex.

Accordingly, there are at least five reasons to qualify Noddings position that Christian ethics is incompatible with care ethics. The first takes issue with Noddings’ assessment of the incompatibility of care and Christian ethics along the singular factor of sexual identity. It cannot be doubted that those who identify and are identified as women are expected to perform care work, but the practical demographics of care are complicated (Duffy 2011). Feminist lawyer Kimberlé Crenshaw introduced the concept of intersectionality to denounce discrimination against Black women stemming from the U.S. justice system’s failing to track intertwining oppressions along diverging lines of race, sex, class, religion, and other factors (1991). Care ethics today recognizes intersectional lines of power and oppression and accordingly should not dismiss Christian ethics simply because of sex-based hierarchies. Christian theology has and continues
to be used as a tool against racism, poverty, and brutality against people of color, and given that these are also care ethical concerns, care ethics can converge at least with some religious ethics in resisting racism and sexism. A desire to identify and purge racist and sexist elements of Christian ethics, while retaining other aspects that combat these social dynamics, is most compatible with ethics of care.

The complicated intersections of care, religion, and race are discussed by Black feminist Brittney Cooper in her book, *Eloquent Rage* (2018). Reflecting on how Christian standards of virginity and abstinence created intolerable sexual repression in her life, Cooper calls for a “Grown Woman’s Theology” that offers practical guides for living. Cooper’s own development was catalyzed by her churchgoing Grandmother, who told her that despite being unmarried it was time to start having “real good” sex, including not only pleasure, but quality sex education and birth control. Echoing Noddings’ insistence that each woman must find her own way, she describes her grandmother’s philosophy as a pragmatic blend of feminism and Christianity honed by life experience in the rural south (140, 134). At the same time, she recognizes that many Black women and men find solace and strength in their Christian heritages.

The additional analytical factors of race, gender identity, age, and regional differences evident in Cooper’s analysis of religion do not bely Noddings’ argument, but complement and complicate it. Given that both agree that the faithful should not be forced or coerced into abandoning religion, and that Christianity is unlikely to fade away, it makes sense to avail Christianity of care ethical feminist resources (and vice versa). Cooper agrees that Black women have the right to dissent from theologies that no longer serve them. She expands Noddings’ analysis in seeing a need for Black women to free themselves from strictures of conservative Christian theology that discriminates against LGBTQA+, excludes women as preachers and pastors, and bolsters racism (139). Similar to Noddings’ “skeptical theology”, Cooper characterizes theology as a push and pull debate, and an ongoing argument with God (139). She elevates the voices of Black women, stating that “Black girls have unique visions of freedom, [that]… are
God-given” (143). For her, God is nothing if not freedom, so Cooper makes freedom her “theological compass”, which includes being free from religious neglect, caring coercion, and racism (143).

Cooper notes that religion serves as a buffer for Black men and women united in struggles against racism, highlighting different stakes in Noddings’ rejection of Christianity for Black and White care-givers. She encourages Black women to seek sacred texts “alongside the bible” (emphasis added)—such as “their grandmother’s words, Sojourner Truth, Alice Walker, Zora Neal Hurston, Audre Lorde, Patricia Hill Collins, Anna Julia Cooper, and Beyoncé” (142). In this way, Cooper’s analysis is similar to Noddings in encouraging women to nurture their own theological voices, but does not imply the same conclusion that the differences between Christian and care ethics are irreconcilable. Both can seek to lift the voices of the marginalized and provide care to self and others in ways that are not coercive or unequal, but Cooper makes more room for a feminist care ethic within Christianity.

Thus, the second reason to qualify Noddings’ assessment is that it underestimates the rich global history of Christian feminism. Religion, including Christianity, can be a source of power and vision when it is brought together with feminist insights. As Rosemary Radford Ruether notes, women’s access to ordination has been secured in many Christian denominations, and since the 1960s a rich literature of Christian feminist theological critique and reconstruction has developed (1999, 219-220). She recounts an immense diversity of feminist strains in Christianity throughout history and across the world, representing numerous Christian feminist figures and reform movements.

Noddings is likely to see this objection as an instance of the argument that Christian and care ethics are compatible because of an original harmony of ends, possibly responding that care ethicists might as well start a new religion. Creating a unique care ethical religion certainly is a viable possibility to be fostered, but feminists like Cooper and Ruether might rebut that it is worthwhile to look for the baby in the bathwater before rejecting an established religious
tradition that is of value to many, including feminists. Ruether observes that although some past American feminists moved with Elizabeth Cady Stanton to jettison Christianity for humanism, there were other groups of feminists who used the Christian bible to affirm that the subordination of women thwarts the will of God. Christianity might fruitfully be reconsidered in light of a broad spectrum of nurturing care relations. For instance, Avind Sharma notes that “there may be more solid grounds for imaging God as a mother than as a father” (2000, 174), whereas Ruether calls for male metaphors for God to be supplemented not only with female, but also familial and transhuman symbols (1983), and novelist Alice Walker posits the ability to commune with the divine through purple flowers in the field (1982).

The deep potential for metaphysical understandings of the divine is the third reason to qualify Noddings’ assessment of Christianity. Given the deep mystical potential for reconceptualizing divinity in light of caring relations, care ethical Christian feminists may also disagree with Noddings’ insistence that care ethics reinterpret theological claims as about psychological and not supernatural realities. For theists this is a capitulation to atheism, or at least agnosticism in care ethics. And although Noddings encourages healthy skeptical spirituality without dogmatic certainty, this does not mean that care ethics must be closed to religious mystical, supernatural, or other-worldly ontological possibilities, at very least for pragmatic reasons (224-225). Noddings asserts that a feminist theology should be engrained in the consequences of human life, with a feminist pragmatist theology being best for an intellectual reconciliation of feminism, pragmatism, and faith. (2003, 217). Maurice Hamington similarly defends a feminist prophetic pragmatism making it possible to be a “friendly critic of religion, open to the commitment to care that may issue from religious practice, while at the same time critical of its various patriarchal structures” (2009, 87).

5 Hamington points out that a prophet in ancient times was “not a fortune-teller, but a radical social critic”.

---

5 Hamington points out that a prophet in ancient times was “not a fortune-teller, but a radical social critic”.

---
is not groundless—it favors an ontology of natural caring over ontological spiritual claims because this is where care needs are met and assessed. But care ethics can also remain open to the reality of metaphysical supernatural claims, and how they can pragmatically serve care ends.

Supernatural claims pragmatically serve to complete care in many ways. One might consider the case of Linda Santo who supports her disabled daughter, Audrey, with money from pilgrims who view Audrey as a Saint and performer of miracles (James 2012, 112). Additionally, the promise of heavenly reward and punishments, tempered by mercy and grace, bolster caring behaviors often more effectively than mere human remonstration. Noddings’ observation that religion is born out of human longing for relationship, a longing for God, communion and connection, can also ground ontological claims about the nature and existence of “God” (2003, 219). Interestingly, Noddings does not further explore how care ethics might contribute to the longing for relationship with a personal God (transcendent or immanent), or consider how religions like Christianity are appealing to many not least because they promise continued relationship with deceased loved ones. In offering belief and hope for an all loving, watchful God, and for lives beyond the present, religions like Christianity offer comfort in response to one of the harshest of human conditions—imminent death and separation from those whom we love and care-for. Care ethicists friendly to supernatural claims of Christianity might then adapt the American pragmatist philosophy of William James, who argued that the “will to believe” in spiritual realities is at least sometimes justified for pragmatic reasons over their ultimate scientific realities (1896). Despite their uncertainty, religious beliefs in an afterlife can provide comfort and sustain one’s ability to care for self and others after the trauma of death. Thus, care ethics encourages skeptical openness to spiritual and supernatural beliefs, especially their misuse, and is rooted in natural realities of care. But it can also be open to expanding spiritual care beyond the natural world of the senses, and to the idea that care relations could possibly extend beyond the physical world of finite bodies and singular, shared lifetimes.
A fourth reason, then, to qualify Noddings assessment of the incompatibility of Christianity and care ethics, is that Christianity is replete with caring themes that serve to motivate and complete care. In Christianity God is generally understood as Father and Son, and so is centrally conceptualized as caregiver and care-receiver, albeit masculine. In many world religions, including Christianity, caring for others features as a/the primary religious duty. The life and ministry of Jesus is centered around care for the needy and Christian doctrines help develop and fulfill these goals more justly. As Ruth Groenhout argues, Christian Agapeic theory can help care givers to “just say no” to endless demands for care (Groenhout 2003). Religion can also redistribute individual care work via fellowship activities, which sometimes have more presence and precedence than secular. Lonnae O’Neal Parker observes that even though the “marble floor” prosperity theology of some Black churches undercut their financial commitments to education and poverty, other churches provide vital community services (2005, 209; 211). Similarly, Tronto includes places of worship as important contributors to networks of democratic care provision (2015, 33).

The final reason to qualify the incompatibility of Christian and care ethics is that Noddings does not give enough attention to the dilemmas posed for care ethics by the vital importance of religion to many people. For many, care relations are inherently structured by religious belief and practice, and religious identity is so integral to their sense of self that it cannot be discarded without damage. Religious concepts intertwine with the earliest memories of many people, informing their caring ethical ideals. This is not to say that religious teachings are to be upheld simply because of their popularity. Mary Daly roundly criticized Christianity and rightly declared it irrelevant to uphold religious teachings because “many people, including women, are satisfied with it in theory and in practice” (1968, 176). Rather, the claim is that care ethicists cannot avoid having to meet

---

6 This problem has been similarly evoked against the association between women and care.
these beliefs and identities with care, because disrespecting and challenging religious beliefs, or looking to change or eradicate them without diplomacy and consenting negotiation, can damage relations as well.

Cooper’s analysis provides guidance on how to respond in a mature caring fashion to others who have different religious points of view. Cooper notes that many Black women are still deeply religious, and while she doesn’t insist that they give up church and Jesus, she recognizes that this creates relational quandaries. When discussing with other Black women the need to approach the bible differently, she observes that their first reactions are often: “But what will my mother say?”. Cooper’s response is a maturely caring one that strives to balance the needs of self and others—she encourages them to engage in caring dialogue, navigating their own needs as grown women even when diverging from their desire to please the women who raised them (145). The desire to maintain relationships across religious difference renders care ethics receptive to reconciling with Christian ethics for the sake of relational maintenance, at least to a degree, by opening space for shared thinking, consciousness raising, and dialogue about which components of a religious tradition are most in tension with care ethics and why.

In summary then, Noddings’ analysis of the tensions between Christian and care ethics yields standards for assessing religious and spiritual traditions, but does not support the view that they are utterly incompatible, because of the intersectional nature of power dynamics, the possibility of feminist and care ethical Christian sub-schools, the pragmatic usefulness of openness to supernatural possibilities, the contributions Christianity can make to the provision of care, and the desire for relational maintenance. How to respond to oppressive religious practices is a question that evokes different responses from justice and care perspectives. I thus conclude by considering a case instructive for demonstrating the relevance of theological spelunking with care ethics in a more practical sense, the case of Fundamentalist Church of Jesus Christ and the Latter-Day Saints (FDLS). Interactions between this church and the larger political state
illustrate challenges for a care ethical treatment of religion and illuminate differences between care and justice responses to it.

Care Ethics and the Fundamentalist Church of Jesus Christ and the Latter-Day Saints

“If you think your religion gives you the right to rape children, then your religion needs to be burned to the ground.”

Flora Jessup

“I have very tender feelings for the FDLS people. They have so much good in them. I pray they will find the strength to re-examine what they have been told to believe.”

Elissa Wall

A clear case of religion as a Platonic cave “writ large” is that of the Fundamentalist Church of Jesus Christ and the Latter Day Saints (FDLS). The FDLS certainly is not representative of every Christian church and is considered a cult by the mainstream Mormon church. The value of studying the FDLS from the perspective of care ethics is not only that it demonstrates the extremes to which religion can contain, commodify, and coerce women to care, but also that it illuminates differences between justice and care responses to such abuse. More importantly, the case of the FDLS calls for caring response. The goal is not to besmirch Christianity as a whole, but to show that even in extreme cases of religious dogma and practice, an ethics of care recommends a relational approach that reaches across the spectrum of religious pluralities to minimize harm and maintain relations. As I shall argue, although there are legitimate concerns for how girls and women in the FDLS are coerced to care, and how boys and men are made complicit in patriarchy or expelled, at the same time, FDLS communities exemplify the potential to use religious belief and practice to better meet needs for care.

The FDLS community spans Canada, U.S.A, and Mexico, with an estimated 6000-8000 members in the U.S. This group has become well known for its tradition of polygyny, and for the 2007 and 2011 convictions of leader, Warren Jeffs, on charges of being an accomplice
to rape, and sexual assault on a child. These and other religious dynamics of the FDLS exemplify at least four instances of religion being used in ways that clearly violate the modified care ethical standards identified in section 3.

To begin, the use of religion to contain, commodify, and coerce women to care is explicit in the FDLS under the leadership of Warren Jeffs. Members, especially women, are encouraged to “keep sweet”, meaning that they are to submit to spiritual leaders without dissent or complaint. Women are subject to male church elders, fathers, husbands, and sons, but there is also male hierarchy (Hannaford 2018). A man’s status increases in proportion to the number of his wives and children, with men at the highest levels claiming scores of wives and hundreds of children. Under Jeffs, men who challenged the status quo had their wives and children reassigned to other men, and rebellious boys were sent for reeducation or expelled from the community altogether. Known as “lost boys”, they have formed communities in cities such as Phoenix and Salt Lake City (Jeffs and Szalavitz 2009).

In her book *Escape*, Caroline Jessup recounts how she became disillusioned with the FDLS community in Colorado City, AZ, and in 2003 fled with her eight children (2007). She reports how girls like her were coerced to become sexually subordinate caregivers, groomed from an early age to find their highest mission in pleasing husbands. This life goal is referred to as “Glorious Womanhood”. Some girls do not discover whom they are to marry until days or hours before their wedding ceremonies. Prior to Jeff’s conviction, some like Caroline Jessup married men over eighty, and/or their first cousins, as in the case of Elissa Wall, who initiated the charges that eventually led to the imprisonment of Warren Jeffs (Wall 2008).

Second, there is a lack of critical education in the FDLS. Under Warren Jeffs, FDLS communities not only lacked critical religious education as recommended by Noddings, but even comprehensive historical, civic, and health/sex education. Children attend primary school, but most were then home schooled or educated in the schools established and administered by Warren Jeffs. The curriculum in these schools removed images of Black Americans and U.S. and
world history past the 1800s. FDLS refugees report being taught that Warren Jeffs was president of the United States. Children were not educated about their bodies, sex, or civil and women’s rights (Jessup 2007).

Third, as Noddings admonishes, FDLS communities use ontological supernatural claims to ground patriarchal power. FDLS beliefs are reinforced with religious metaphysical claims that uphold the epistemic privilege of those identified as spiritually enlightened. The FDLS teach the mainstream Mormon epistemology of “continuing revelation” (Cook 2020) which emerges from living representatives on earth in the male priesthood. In the FDLS, patriarchal leaders have knowledge of spiritual realities afforded by their divine appointment. The true reality is an otherworldly one, and a woman can gain eternal blessing only if her husband allows her to enter the kingdom of God (Jessup 2007).

Fourthly, FDLS communities show a willingness to damage and sever relationships in favor of abstract entities and principles. The reluctance to question FDLS religious habits is reinforced by the threat of being “shunned”, as those who leave have little hope of further connection with family and friends. In some cases, this ostracism is welcomed. But often those fleeing FDLS oppression experience heartbreak over those left behind, ambiguity over their religious disillusionment, and anguish in the face of rebuke from those they seek to help. At age 14 Flora Jessup filed sex abuse charges against her father and then created an underground railroad to assist children fleeing the community (Jessup and Brown, 119). Most of her family will not speak to her, apart from her sister Ruby, who after years of being placed in hiding and forced to marry her step-brother (also her second cousin), fled and reunited with Flora in 2013 (Ng 2013).

Given that the religion of the FDLS under Warren Jeffs violates care ethical standards, the next question to consider is how care ethics is to best respond to both those who wish to leave such communities, and those who wish to stay/return. In this capacity, FDLS communities pose three challenges for care ethics beyond how they clearly violate Noddings’ earlier standards for religious approaches to
care. First, although the right to exit such communities is vital by the standards of care as well as justice, it is also true that leaving them inflicts perceived caring damage. A second challenge arises from the care ethical claim that all relations are embedded in interdependent webs, because this insight is strained by the self-sought isolation and self-sufficiency on the part of mainstream FDLS communities. Finally, this case challenges care ethics in that the FDLS meet some standards of care well, perhaps better than “outside” communities, who harass them according to duplicitous standards. All of these are serious and complicated problems, which I will briefly address in the context of how a care ethic might respond differently as compared to a justice perspective, not only to religious pluralities, but also to failures to care that come in tension with religious freedoms.

To the first point, a liberal justice perspective stresses the right of individuals to exit oppressive circumstances. An ethics of care also endorses a right to exit under such circumstances but is also bound to maintain relationships with those who wish to stay, and more precariously, to be left alone. But a care ethical perspective notes that relationships in the FDLS arguably are also damaged when the dissatisfied leave. When Caroline Jessup fled she faced immediate resistance from her two oldest children, protesting that she was “taking them to hell”. Her oldest daughter, Betty, returned to the FDLS community in Colorado City two days after her 18th birthday. Betty now avoids her mother and refutes her account. She complains that her mother’s health problems related to post-traumatic stress disorder saddled her with many household and child care duties which caused her “current-traumatic stress disorder” (Adams 2009). What might care ethics say about such relational damage?

To her credit, Noddings addresses dilemmas posed by competing perspectives about care competence and incompetence afforded by religious fundamentalism, which can be extended to the FDLS’ extreme norms of care work, marriage and family (Noddings 2002, 76). She recommends that care ethics avoid remedying relational damage inflicted by oppressive religious beliefs and practices by inflicting more relational damage, and instead seek to mitigate the
need to strike a “second blow” (Ibid.). She further reflects that a relational response recognizes that exposures to different ways of life run in both directions, and that indeed, “liberal educators and policy makers may be in greater need of lessons of tolerance than the fundamentalists whose ideas they scorn”, with top priority given to the maintenance of “nonviolent relations” and “local dialogue and compromise” (2002, 76-7). However, this approach is complicated in the case of the FDLS because of the self-sought isolation that is characteristic of such communities.

As noted, this isolation complicates the fundamental tenet of care ethics that individuals are located within webs of interdependent relationships. This case drives home that there are varying degrees of interdependency, and that embedded webs of relations often have multi-faceted and dynamic layers of insiders and outsiders. The FDLS are one of several religious communities who, though sharing geographical spaces and legal jurisdictions with larger communities, are largely self-sustaining in their care relations. They wish to be left alone to autonomously self-determine their religious and political affairs, and domestic lives. They eschew the political authority of state and federal governments, do not recognize the religious authority of the larger religions, and have still less regard for secular interlopers, even when such interlopers are motivated by care.

At the same time, it is possible to say that such attitudes fail to accomplish the desired isolation, in that members of FDLS communities have been prosecuted not only for rape and child marriage, but also state welfare fraud. They are subject to media attention and porous boundaries afforded by those who flee and return to help others, and have opportunities for discursive dialogue with people outside of the community via border town businesses and internet chat rooms. These more minimally embedded relations pose dilemmas for both liberal justice and care ethical perspectives, further highlighting their responsive differences.

While liberal theory and practice is faced with the dilemma of needing to balance respect for religious freedoms and group rights against the rights of individual dissidents, care ethical theory and
practice is faced with the dilemma of being called to care about and for (and to be cared about and for) members of religiously isolated communities such as the FDLS, and the need to reconfigure relational ties in ways that are minimally damaging. Susan Moller Okin illustrates this difference when she asks from a liberal perspective whether multiculturalism is bad for women. Focusing largely on religious teachings and practices imbued with cultural patriarchy, she concludes that multiculturalism is bad for women, and that liberal feminists ought to support if not the outright extinction or assimilation of entire cultures into less sexist (and secular) cultures, then the strong encouragement that cultures self-alter to reinforce the equality of women (1999).

Responses to Okin’s proposal bring into relief the different voice of care ethics. This is put poignantly by Bonnie Honig who shifts Okin’s original question to ask whether feminism is served by liberalism, whose “relentless individualism…feeds a privatization, withdrawist conception of citizenship that is at least tensely related to feminism’s project of empowering women to act in concert to advance their own aims” (1999, 39). As Abdullah An-na’im points out, this approach looks to uphold liberal laws and freedoms without asking about the failures of some liberal societies to fully provide for an adequate provision of care, education, and living standards, or “the implications of cultural extinction for members of minority cultures” (1999, 60-1). The justice perspective of liberalism is not wrong to insist on the rights of individuals to exit oppressive communities, especially when a community affords no other option than to stay and submit or leave and be shunned. It is also justified to prosecute and imprison religious leaders like Warren Jeffs for sexual crimes against women and children.

But for a care ethical perspective this is not primarily because Jeffs violated the legal standards of the larger community, but because (and if) those legal standards are in place to protect those made vulnerable by oppressive or neglectful care relations. A more ideal approach from a care ethical perspective is to meet the basic needs of dissidents and dependents, which in time may ideally include them
returning or reconciling to mend fractured relations, at least with those who were not direct perpetrators of assault or injury. Okin’s latter suggestion, to listen to and support dissatisfied members of a religious community, especially young adults, and to create opportunities and spaces for mutual world traveling and reform, is preferable to care ethics than the call for cultural extinction or assimilation. This is because as Yael Tamir notes, such internal reform and the struggle for it can be seen as part of the preservation of religious culture (1999, 51). As such, a care ethical approach to the call for care and solidarity across religious and cultural differences requires three things: 1) the location of possibilities for the development of enhanced interdependent relations in order to respond to the needs of dissidents and traditionalists, 2) the epistemic centering of those who claim relational harm (or not), and 3) the willingness of outsiders to inspect their own religious and cultural traditions for relational harms and unmet care needs, as much if not more than others.

Thus, the FDLS directs care ethics to address hypocrisy in the use of caring norms, which may cast the FDLS as “other” without “theologically spelunking” within the status quo. It must seek to avoid what Homi Bhaba calls, characterizing Okin’s liberal critique, “a gaze that is above and elsewhere” (1999, 82). This not only means that necessary religious reforms are to be primarily initiated from a relational posture that is “side-by-side and within,” but also that this scrutiny does not exclude religious status quo. Theological spelunking with care ethics requires looking for “caves” in mainstream religious and secular worldviews, and to turn the critical gaze of care-ethics “within the here and now” of one’s own cultural and religious spaces. This type of self-reflection is ironically endorsed by many spiritual and religious traditions, including Christianity.7

Considering again the legal interventions into FDLS communities by U.S. state and federal authorities, from a care ethical perspective there are notable double standards afoot. Rarely reported is that

---

7 In Luke 10:42 Jesus teaches, “Why do you look at the speck of sawdust in your brother’s eye and pay no attention to the plank in your own eye?”
FDLS communities provide citizens with free communal stores of food, housing, and health care (Jessup 2007; Wall 2008). Those leaving these gift economies struggle when food and housing must be “earned” via competitive and scanty paid employment in the larger liberal U.S. economy. Some FDLS women counter that while they face challenges like all families, polygyny can offer companionship and care-sharing, freeing up individual women to pursue their own ambitions. As noted by O’Neil Parker, this option is not always available to women in mainstream U.S. society. Due to the Covid-19 pandemic, liberal sex/gender norms of care associated with the Protestant work ethic, and the lack of more robust welfare and care support programs, many women in monogamous U.S. households are finding their economic opportunities curtailed and their care burdens multiplied, with little attention devoted to meeting their needs (Scarff 2020; Smith 2020).

Moreover, there is hypocrisy in the status quo approach to the FDLS in that many of the abuses evident in the FDLS are also evident in mainstream Christianity. To take one example, Roman-Catholicism promotes its own form of glorious womanhood, bars women from the priesthood, resists birth control and sex education, and sometimes shuns and excommunicates those it sees as apostates. This includes those who facilitate abortion, same sex relations, or the ordaining of women. At times it has shielded male sex offenders behind a brotherhood of the cloth (Balk 2010; Bonavoglia 2012; Hornby 2013). While Roman-Catholicism and other Christian denominations fare better in providing for caring needs through religious charities (as do religions like Islam with its practice of zakat) as the story of my mother’s wedding bears witness, it, too, has struggled with how best to maintain relations with converts, dissident “apostates”, and non-Christians.

---

8 The Association of Roman Catholic Women Priests (ARCWP) says that there are now more than 124 female priests and 10 bishops worldwide, though the Vatican considers them excommunicated (Hornby 2013).
To highlight additional hypocrisies with the status quo use of caring norms to intervene on behalf of those harmed by FDLS policies, responses by the U.S. justice system to the FDLS fall short of Noddings’ standard of “preventing a second blow” without inflicting further damage. The mainstream U.S. media capitalizes on the sensationalism surrounding the FDLS, and state agencies have not always responded in caring ways to them. In 1953, officers from the Arizona Department of Public Safety and National Guard raided the FDLS community of Short Creek, arresting 400 polygamists, 263 of whom were children. 150 of these children were separated from their parents, some of whom were never returned (Driggs 1990; 1992). What is now known as “the Short Creek raid” resulted in decades of broken relationships and mistrust between the FDLS and state authorities. A second raid in 2008 on the Yearning for Zion ranch in Colorado exacerbated tensions even as it yielded vital evidence needed to convict Jeffs (Van Sant 2008). Initiated by what was later determined to be a fraudulent call for help from a non-FDLS woman posing as an FDLS child bride-to-be, this raid was fruitful in the interests of justice, but led to another painful detainment of hundreds of FDLS mothers and children who denied being victims in the first place. Given that an ethics of care stresses the importance of “caring about caring”, members of isolated communities like the FDLS who request aid from outsiders should be met with caring response, but so, too, should their dependents, and those who choose to stay or return. While the arrest and conviction of Jeffs is justified as vindication to his past victims and the prevention of future crimes, care ethics questions the justice response to these crimes absent a plan to improve larger embedded relations.

As of today, the incarceration of Jeffs has been followed by improved FDLS religious standards along the lines of Noddings’ recommendations, but this has largely been accomplished by caring reform from within, and freer collaboration between insiders and

---

9 This legal practice anticipated what in 2018 became immigration policy under U.S. President Donald Trump.
outsiders (Danovich 2019). Activists like Caroline and Flora Jessup, vilified by most FDLS elders, reveal the possibility of dissent to the youth, even if at a spatial and philosophical distance. The internet has opened discourse facilitating broader “theological spelunking” and world traveling across geographical isolation and religious ideological differences. FDLS bloggers voice the other side of the story, portraying themselves as a community discriminated against because of the actions of a few and subject to problematic criminal justice double standards. As one FDLS blogger puts it, “In a world where anything goes, why not us?” (FDLS Blogspot). Indeed, one must wonder whether the popular preoccupation with FDLS communities in the U.S. (via books, television shows and documentaries) has more to do with voyeuristic religious othering than with concern for gaining a more nuanced understanding of FDLS lives, beliefs, and virtues, in order to help meet the self-defined needs of FDLS dissidents and traditionalists. Tronto’s “unsympathetic disregard” cautions against casting aspersion on religious others who look and live very differently from those in conventional society, because it encourages hypocritical smugness which prevents self-scrutiny of egregious lacks of support for care in many mainstream religious and secular communities.

As Noddings recognizes, if there is to be any harmony between Christian and care ethics, it will be through relational dialogue and empathy. As my Great-Uncle demonstrated, navigating religious pluralities can be highly personal and emotionally charged. People have the right to challenge, change, and exit religions that they find ill suited to their needs. But it is best to do so with relational diplomacy and sensitivity to the value that such religions may play in the lives and relations of others, in ways that lead to the least amount of relational damage. Reforms of religious beliefs and practices that are destructive to relationships can be reformed and amended by small acts of care that bring people together, as much as, if not sometimes better than, legal interventions by impartial or hostile law enforcement agencies, or official religious institutional reforms.
Conclusion

In this chapter I used Plato’s allegory of the cave to go “theological spelunking with care ethics”, showing how Noddings’ critique of the differences between care and Christian ethics yields religious standards that prioritize care completion and recommend a skeptical, pragmatic theology. I argued that the New Testament story of Mary and Martha supports Noddings’ thesis about the incompatibility of care and Christian ethics to a degree, but that she overlooks some of their potential affinities. After qualifying Noddings’ care ethical standards to account for intersectionality, the possibility of care ethical Christian sub-schools, pragmatic openness to supernatural possibilities for care, the contributions of Christianity to the provision of care, and the desire for relational maintenance, I then applied Noddings’ analysis to the U.S. state response to the FDLS. I argued that while care ethics endorses the imprisonment of Warren Jeffs, it highlights double standards in the liberal state’s justice interventions and seeks to reduce and improve relational damage caused by them. Platonic caves of oppressive care and theology abound, and religious epistemology is eminently suited to create them. But care ethics, Christianity, and other religions can sometimes agree that a relational approach helps to explore and escape them, or better yet, improve them with minimal damage to relationships.

Works Cited

Maureen Sander-Staudt


Daly, Mary. 1968. The Church and the Second Sex. Boston, MA: Beacon Press.


James, William. 1896 “The Will to Believe”. The New World 5: 327-347


Premise

‘Spirituality’ comes from the Latin word *spiritualitas*. In Latin, *spiritus* is breath, the breath that keeps us in life. In the Italian language, ‘avere spirito,’ to ‘have spirit,’ signifies having an inner energy that manifests itself in a positive way of being. In ancient Greek, the spirit, the vital breath, is designated by the term *psyché*, meaning ‘soul.’ But *psyché* has another meaning, that of ‘butterfly.’ The butterfly is an extremely delicate entity, which lives by its beauty: if we touch the colored patterns on its wings, these patterns are irrevocably damaged and the butterfly, violated in its delicate beauty, will never fly again. The soul, the spirit that gives life to that being-here that we are, is like a butterfly: it has the energy to fly high but is also extremely fragile. So our spiritual life requires care.

This chapter will address care for the spiritual life that is the essence of our human life. The main reference point for this study on spirituality is ancient Greek philosophy, in particular the theories of Plato, Aristotle, and Plutarch. The reason for this choice is that ancient Greek thought, the root of Western culture, offers seeds of wisdom which, if they become at this historical moment the object of intense reflection, could generate a new politics of existence, more faithful to the needs of the human condition. Indeed in ancient Greek philosophy, we find the seminal concepts of care, spirituality, and ethics. Here the spiritual life is conceived as a primary ontological tension, which is in the soul before any systematic interpretation.
given by the different religions. This spiritual activity is the answer to an originary need that each human being can engage in if he/she stops any practical involvement and listens to the intimate logos that speaks inside him/her. As the Spanish philosopher Maria Zambrano claims, if we stop acting and silence the mind, then the soul can explore the ‘originary deep root of life,’ a generative matrix that takes place before any vital concrete phenomenon (2011, 49). To perceive this “deep root” means to perceive the mystery that accompanies life. Zambrano suggests that the first way in which reality manifests itself to the human being is that of complete concealment and the first reality that conceals itself to the human consciousness is the essence of the human condition (2011, 48). To feel mystery is the essential nourishment of spiritual life. If there is no consciousness of the puzzle and acceptance of the insolubility of this mystery, there cannot be an authentic spiritual life.

To nourish the spiritual life is to care for the soul. Nowadays, to theorize on care is a fundamental cultural field; in particular, care ethics is a discourse essential for a politics of care. But when the object is spiritual activity, care ethics reveals a limit that obliges us to rethink it. Indeed, care ethics is based on an embodied conception of care and forgets the immaterial dimension of human life, but also the immaterial life requires care. Care is said to have as object “child care and people who are disabled, chronically ill or elderly” (Robinson 2011, 1). When Fiona Robinson lists the problems that are a consequence of the lack of care, she speaks of health problems (2011, 3). In short, care is conceived as the action to provide things that are essential to preserve life and repair it when the body becomes ill: these are real dramatic problems. But human life is also spiritual life since to be human means breathing the breath of the soul. For that ontological quality, care not only requires providing material things (biological resources, home to inhabit and where to live in the shelter of the weather, and therapeutic gestures of cure) and provide immaterial things that can nourish the spiritual life.

This study assumes that the ancient Greek philosophy is an essential reference to spiritual care since this tradition has given intensive
attention to celebrating care as spiritual nourishment (Mortari 2016). But, since the theories on ethics of care have been developed in the contemporary culture, it is necessary also to refer to the scholars of “care ethics”; many of these are women who reflect on care starting from the analysis of their direct concrete experience.

For a rigorous discourse, an obliged step consists in making evident the ontological primacy of care. Accordingly, I start from an eidetic phenomenological analysis of the human condition to name its ontological qualities (Mortari 2018); the rationale for this inquiry is that identifying the ontological essence of human life is a necessary step to provide a rigorous ground both for a theory of care and for the cultivation of spirituality. To enroot the discourse in the concrete reality, the reflection is grounded on previous empirical research on the practices of care (Mortari and Saiani, 2014). Theoretical and empirical analysis makes evident the need for a new kind of politics of existence where care, ethics, and the cultivation of spirituality must become the cornerstone. Since human life is a continuous moving in time that is oriented by the desire for good, then to understand the right way to interpret the spiritual life is to reflect on this tension. Such reflection is necessary to discover a practice of caring spirituality.

The ontological call to care

Much of contemporary philosophy has in many ways betrayed its original purpose, which is to reflect on life to find the knowledge of living, which in ancient Greek is called the ‘technique for living.’ Philosophy seeks knowledge that helps us live and find the proper measure to inhabit our own time; thus, it should be conceived as a form of practical thought that day by day seeks a living and transformative truth capable of orienting the practice of care for our life. Saying that philosophy is the philosophy of existence is like saying that technique of colors is the science of painting.

It is essential to seek a technique for living because, as beings, we are incomplete. We are a bundle of possibilities, which must find the knowledge necessary to give form and meaning to life. Indeed, if we
carry out a phenomenological analysis of the human condition, we discover ourselves as uncomplete entities called to become our being. We are not fully realised, but we are potentialities of being. We are dynamis, a Greek term that means potentiality not yet unrealised. Our being exists within the possibility of being. We are energy in search of form. In ancient Greek, ‘form’ is eidos that also means ‘idea’; this double meaning shows that our search for a form of life requires an idea. To be called to give shape to our being means to be called to transcendence, going beyond what already is, to create the possibilities of a fully human life. Being called to search for a form of life is the essence of the human condition.

This essence can be problematic for us, insofar as the idea of being-here is not a thing we have but which we have to search for. This lack of an ontogenerative idea for shaping our being in the world makes us radically different from other forms of life. Like other animals, we are part of nature and, as the poet Rilke claims (1996), like every natural entity, we are at risk since nature protects nothing; indeed, every entity born to life is abandoned to itself and at risk. We are not only at risk, but we are also risk-takers, for unlike other creatures, who are born with a ready-made map for living, we have to construct our path on our own time. We are not like the migratory birds that know straight away how to cross the sea; in order to cross the time of life, we must construct a map that guides the steps of living. We need an idea of life.

Because of this ontological condition, we need a technique for living, in other words, a philosophy for existence that consists in orienting the search for the best idea for modeling life and for identifying the actions that are necessary to actualize this idea. Moreover, this ontologenerative work is challenging because the human condition is fragile and vulnerable. Indeed, we do not have sovereignty over life, and we are always dependent on the other.

We do not have sovereignty over life because we are positioned in time beyond our choosing. For our entire lives, we are assigned to time; like a log dragged into the sea, we are immersed in the continuous flow
of time without having the possibility to decide the rhythm of living. We do not have the power to move from not-being to being-there. We are our potentialities of being-there, but we do not have the primary potentiality to begin to be in the world.

When we arrive in the world, we find ourselves always dependent on what is other than us. We are dependent on nature because to conserve life in its biological materiality. We need things that only the natural world can give us. Yet, we do not live only biological life, but an immaterial life, and to conserve and nourish this life, we need things that only the other human beings can give to us. We are relational beings, and all our conditionedness consists in this relatedness. The lack of sovereignty and the conditionedness make human life particularly fragile and vulnerable.

The reflection on the fact that human beings are conditioned entities is developed by Hannah Arendt (1958, 9). But her discourse analyzes the ontological dimensions of the “conditionedness,” especially in relation to the physical and manufactured world, without deepening the problematic dependency of a person concerning others. We must wait for the feminist thought on care to find a more complete and gendered analysis of the dependent condition of human beings. In particular, the work of Eva Kittay should be considered. Kittay, starting from the analysis of her experience, defines the labor of care as a dependency work by identifying the work of caring with a practice for those who are inevitably dependent (1999, ix). As regards the concept of dependency, Kittay outlines that all human beings are dependent on others. Still, there are some periods of time (infancy, childhood, old age) where the dependency is more intense and, for some persons, even becomes an insuperable condition of life (disabled people, chronic patients). Moreover, dependent persons require more care: this is an unquestionable phenomenic data. But, as regards this data, a political dramatic problem is evident: care for dependent persons is a burden of women, and the women who take care are in a disadvantaged social position, since the labor of care is devalued and unpaid (Kittay 1999, xi).
The sophia of existence

Being called to give a shape to life, the best possible shape, to our possibilities of existing given our immersion in a condition of fragility and vulnerability makes it necessary to care for life. Even if there is not a well-defined concept of care (Hamington 2004, 2), everybody knows from experience that care is essential to life. Without care, we cannot live, since to care for life means nourishing and protecting ourselves, creating the conditions for life to flourish, and to repair life when the body or the soul suffers injury. Care is an indispensable way of being since the human condition is that of being called to “care for oneself by oneself” (Plato, Statesman, 274d). Thus, to care for life is to care for oneself, for others, and for the contexts in which we live, both natural and artificial.

Among contemporary theorists, the first thinker who reflected on care was Heidegger (1962). When Heidegger addresses care, he refers back to an ancient tale whose protagonist Cura gives form to the human condition by fashioning some clay she finds along a riverbank. This mythical tale is a metaphor to say that being-in-the-world means to have the responsibility to find the right way and the right actions for modeling our being-there. Indeed, we who are dynamis, in other words, potentialities of becoming something, bring about our potential for being through actions which shape the form of life. The technique of living consists in understanding what actions to carry out in order to shape a good life and how to put them into practice.

To conceive the technique of living means having the knowledge and wisdom of care; in other words, knowing what good care is and how to put it into practice. If human beings possessed the knowledge and wisdom of living, they would be capable of what Socrates defines as “perfect care” (First Alcibiades, 128b), and they would experience the full pleasure of being in the world. If it is true that care, insofar as it is a primary ontological action, guides our being-there to its essence, then having care for oneself and for others is not only a possible ideal for existence but the first and originating necessity for being. In this sense, care is the ethics of being in the world.
In the *First Alcibiades* Socrates engages the young Alcibiades in a dialogue that has as its object the theme of “care for self”. In order to reach an understanding of what it means to care for oneself, Socrates explains that it is fundamental to understand the nature of our essence, and after many dialogic exchanges Alcibiades reaches the conclusion that our essence is the life of the soul (*First Alcibiades*, 128c). Beginning with this ontological assumption, care for oneself is seen to care for the soul. As introduced above, in ancient Greek, the ‘soul’ is termed *psyché*, and this term means the vital breath, the spirit; so, if our essence is in the soul, then it follows that our essence consists in the spiritual life. If we accept this Platonic ontological vision, then the primary question for life is to understand how to care for the soul, for our spiritual life.

But what does it mean, to care for the soul? Socrates guides Alcibiades to understand that to have proper care for the soul (*First Alcibiades*, 128b) is to care for the virtue of the soul, and that virtue consists in searching for *sophia* (133b) (in Latin: *sapientia*), a word commonly translated as wisdom. Socrates explains to Alcibiades that the search for *sophia* consists in knowing our own essence and what are the good things for life (*First Alcibiades*, 134d). This search is a spiritual work, for this knowledge nourishes the life of the soul of what is the truth for existence. So the *sophia*, in other words being in possession of the technique for living, is knowing “the good things” for life (*First Alcibiades*, 134d), “the realities that are worthy of love” (*Phaedrus*, 250d), those which are to be sought in order to make life a time worthy of being lived.

The virtue of the soul, which consists in dedicating vital energy to search for what is good for human life, is the first virtue of politics (*First Alcibiades*, 134b-c); politics, understood as the actions which shape our way of living together, needs the *sophia*, in other words it needs to know what are the good things for all citizens.

Since this chapter explores the radical importance of thematizing care with regard to the spiritual life in the present time, the Platonic theory of “care for soul” is relevant. However, this consideration should not overlook the limits of the intellectual Platonic theory of
care: not only is it a theory conceived by men for men, but it is also focused on the soul and forgets the body as an object of care. Instead, the feminist theory of care assumes the importance of the body and analyzes the practice of care as an embodied action (Hamington 2004; Kittay 1999; Kittay and Feder, 2002; Tronto 1993, 2015). Conversely, the necessity to emphasize the embodied side of care brought some scholars to set aside attention to care for the life of the mind. Reexamining the concept of care in Plato allows us to rethink care as a cognitive and spiritual work and, at the same time, to find in this philosophy the first conception of politics as a work of care, precisely the work of caring for the community. Constructing bridges among different traditions (as Vrinda Dalmiya does by relating care with both virtue epistemology, which has Aristotelian roots, and the Sanskrit epic, Mahābhārata (Dalmiya 2016)), certainly requires a rigorous method and epistemic precautions. Still, it can fertilize new generative frameworks of thinking.

The necessity of the good

The first virtue of the soul is to remain faithful to the first necessity of human life: to search for the good. Human life is not something already realised, but it searches for its shape, and the telos, or the purpose, that guides this existential search is the idea of good. The search for sophia leads to the “plain of truth” (Phaedrus, 248b) if we remain faithful to what is of prime necessity for human life, in other words what is good. Socrates states that perfect care takes place when we make something better (First Alcibiades, 128b), but in order to make something better it is necessary to have an idea of good. Thus, the first essential virtue is keeping the soul directed towards the search for the good, since this is the necessary condition in order to care for life. The search for the good is the fundamental research for life. There is not ethics, religion, or spiritual traditions if there is not the search for the good. And the proper telos (aim) of the spiritual activity consists in reflecting on the good.

The idea of good is fundamental in ancient philosophy: Plato, Aristotle, Plotinus, Plutarch. But over time ethics has forgotten to
reflect on what is good. The idea of good is not an esoteric notion, but it is the tool of every human being (Murdoch 1997, 301). Nonetheless, a perfect understanding of this idea cannot be grasped, and so placing ethical action on the plain of the search for what is good means taking on a work of thought that can never end. For this reason Murdoch states that the quality of the ethical action is to be endless (1997, 321). Consequently the practice of care, that is ethical in its essence, is immersed in an inevitable imperfection, and for this reason it requires dedicated thinking to examine in depth the ethical questions that correlate with the question of good.

Plato defines the idea of good as “the most important knowledge” (*Republic*, VI, 505a), because it is only with a knowledge of this idea that we can discern things of value for life: what is “the most desirable life” (*Philebus*, 61e). We constantly find ourselves faced with choices, to the extent that we might say the question which indicates the problematic nature of human life is “what should we do?” and only the idea of what is good can help us find what is truly worthy of choice (*Philebus*, 22b). For this reason the idea of the good constitutes the greatest knowledge, not because this is a knowledge that we reach at the end of a long path, but because the idea of good should be at the basis of any research.

The good is what every soul pursues, and because of which a person carries out all their actions (Plato, *Republic*, VI, 505d-e). We always pursue what is good, even when we simply walk, since when we walk, we suppose that it is better to walk, and conversely, we stand still when we think that this is good (*Gorgias*, 468b). In the first book of the *Nichomachean Ethics*, closely related to the question Plato raises in the *Euthydemus* (278e), “Is it not perhaps true that all men wish for good?” is Aristotle’s statement that every being tends towards what is good (*Nichomachean Ethics*, I, 1, 1094a). A faithful interpreter of Plato and Aristotle, Plotinus writes that the properly human thought is this: “to move towards what is good and to desire it” (*Enneads*, V 6, 5, 5-9), since “the energy of all things is turned towards what is good” (*Enneads*, V 6, 5, 15-19).
If we feel that there is some truth in this vision, then being in the world according to nature, that is, according to the proper order of things, means seeking the form of being by situating our search “in the order of what is good” (Plotinus, *Enneads*, III 5, 1). To maintain our desire to search for what is good is to follow the path of the hedgehog, because as the poet Archilochus says, “the fox knows many things, the hedgehog just one, but it is a very important one” (fragment 30).

Staying with our thought in reality and following the intimate order of things means staying within the necessity of the good. The essence of having care for life is within the order of the most difficult simplicity: doing that which, and only that which, good asks of us, even if our vision is imperfect; this is the meaning of staying within the necessity of the real. Staying within the necessity of the good is an indicator of a pure choice, that choice where there is no choice (Murdoch 1997, 332). In this sense doing what is right is “obedience to reality” (Murdoch 1997, 332). If we reach the point of grasping what in reality is necessary, the problem of will is no longer an issue since the right action becomes that of obeying reality itself.

The expression “staying within the necessity of the real” might be perceived as problematic in that it seems to subtract value from liberty, but in reality it asserts that the greatest liberty consists in answering the call of what is good. A passage from the *Republic* reinforces this point. Socrates claims that the person who is lacking in education is the one who confuses what is necessary with what is good (493c). This statement might seem to be in contrast with the thesis of the identity between the necessary and the good, but the statement should be interpreted in light of Socrates’ observations in the immediately preceding lines, where he states that the person who lacks education is the one who has no real knowledge of what is high-minded or shameful, good or bad, just or unjust, and thus tends to define as good the things which he likes and as bad those things which make him suffer (493c), thus mistaking “subjective necessity” for the “true necessity” which lies in the objective order of things. Subjective necessity is defined as “Diomedean necessity”, which
consists in the compulsion to do only the sort of things that please us, and not the things that are truly good and beautiful (493d). Staying within the necessity of the real means following the good necessity: the necessity is suggested by what is good, adhering to that which will grant us the feeling of maximum liberty. Knowing what is good not subjectively but objectively, that is, means knowing the truth of living. This truth does not require great effort; rather, it activates an intimate consensus of the soul. Truth, which is knowledge of what is necessary to do good, is the real fount of free acts, the only generator of true sense, the one which gives life to life. By acting in accordance with the necessity of what is good we experience an instant of maximum intensity of being in the world. To live according to the sense of what is necessary requests that form of passivity in which the maximum intensity of the being-there is realised.

This thesis about the good is not the result of an abstract reasoning, but comes from an analysis of experience. When we ask a person who has carried out actions which have been defined by others as of good care, in the sense that they have had the effect of making another feel to have experienced something good, he/she replies in a very simple and effective way from which it is easy to infer that doing something which does good to the other is something which he/she does simply because it must be done, almost without thinking about it. A nurse who did not spare her energies in the most difficult early moment of the coronavirus epidemic (February to May 2020), spoke to me about the difficult situation she found herself facing in times of exhaustion. Patients were arriving one after the other and there was very little time and not enough staff. She said: “I didn’t dwell on the thoughts, by thinking too much, I just do what I have to do” (Luísa). When we grasp what we must do in order to do good, the mind does not need to come up with complex reasons or elaborate thinking, we just act as the necessity of good asks to us and that is all.1

---

1 The work of thinking, which is typical of philosophizing, makes sense if it is not only “thinking on the desk” but “thinking into the reality”; for this reason,
María Zambrano claims that at the moment of decision the conscience aches a “subtle suffering” because to decide to act always involves a kind of violence (2011, 72). But the empirical research on the act of deciding in the practice of care reveals that those who act by obeying to the necessity of the good do not avoid the sufferance of the decision; it is a sort of pure action. The analysis of decision-making processes shows it not true that “moral choice is often a mysterious matter” (Murdoch 1997, 342); rather it is very clear, becoming mysterious only if we seek in the agent the confirmation of sophisticated philosophical reasonings carried out in the abstract. The straightforward yet essential way of reasoning of those who are engaged in the practice of care “is not a proof that convinces those who prefer subtle reasonings, but only the wise men” (Phaedrus, 245c). The thinking of just people, which is to say those people capable of a just care, is always very simple and essential. The ethical agents reasons thus: reality demands something good and so that is what is done. The actions which have “most purity, most energy, most life” are carried out without the need for complicated acts (Plotinus, Enneads, I 4, 10, 25-30). Ethics is far removed from any calculation I cultivate the reflection on the philosophical traditions and the empirical inquiry at the same time. To stay with the thinking among the things, by listening to the voice of people, is a form of teaching, which I have learned from two women philosophers: María Zambrano and Simone Weil. There is a rich truth in the telling full of sufference of a nurse, in the telling full of passion of a teacher, in the telling full of ethical dilemmas of a social worker, than in some books about care. When you adopt the phenomenological method, which emphasizes thematizing across phenomena, it happens that some theorizations shatter under the impact of the experience. Nobody can spoil the value of Levinas’ thought, that provides useful categories to meditate on care; however the analysis of caregivers’ reasonings shows that his theory, according to which “the responsibility for the other can not have begun in my commitment, in my decision” (1998, 10), is not in accordance with the data that emerge from the analysis of the ways of reasoning a caring person develops when he/she is challenged by a critical decision. Indeed, to care for the other always requires a decision and it is just because I take the decision to act for the other that I can care for her/him. Perhaps it is true that “the good … has chosen me before I have chosen it” (Levinas 1998, 11), but if my conscience does not decide to obey to the call of the good there is not the possibility of an authentic ethical presence.
Ethics of care is answering with solicitude to the quest of making good. Obedience to reality does not mean accepting everything which happens; this is blindness. Rather, it means keeping our desire oriented towards the first necessary choice, which is guided by the search for what is good. Desire leads to something good if, as the ancient Greek affirmed, it is \textit{kata physis}, that is, in accordance with nature. Acting in accordance with nature is quite different from acting in spontaneous fashion, and means keeping faithful to the order of the real; such is the desire which is an expression of the tension felt by the soul and the soul in its originating tension, seeks that which is good. The Stoic philosopher Zeno maintained that the human being is required to be coherent with the nature of things and that this is the first virtue (Radice 2018, 87). We can understand this thesis if, when we translate the Greek term \textit{physis} with the word nature, we understand it not as a collection of natural entities but as a living energy, the energy which makes all things be. Since the energy of the human being is a part of natural energy, when it acts in search for what is good, it acts in accordance with nature, for every entity which exists seeks the good. In this sense seeking what is good is obedience to the necessity of the real. Adhering to the necessity of the real means keeping our desire anchored in reality: as reality asks for what is good, the proper desire is to respond to the request for the good. This is the ethical nucleus of the right and good action of care.

According to Murdoch, it is the idea of perfection which should be at the heart of ethical reflection, and which should be sought beginning with the question “how can we make ourselves better?” (1997, 364). Instead, it is a mistake to assume that this is the central question of ethics, as it leads the individual to concentrate on himself. It is a misleading question because it is not realistic in the sense that it does not adhere to the quality of the real; as a question it is not faithful to the ecology of life where everything is interconnected, and insofar as it is not realistic it cannot be ethical. Besides, excessive attention to this question risks generating attitudes of neurosis. It is
the idea of what is good that should be at the heart of ethics and which should constitute the object of thought.

The first ethical question, that is the essential question of care, is *how to make something good*. This is what ethics consists of. Ethics comes from the Greek *éthos*, which means not only habit and character, as it is usually understood, but above all dwelling, or home. When the human being is born he does not yet have his dwelling place; when he/she is born he/she finds himself with his/her roots in the earth and his/her branches stretched towards the sky, and from this position he/she must search for a home where he/she can inhabit the time of his life. He/she must seek a home for his soul, what Socrates calls “the plane of truth” (*Phaedrus*, 248b). Since constructing the home of the soul is having care for life, the knowledge to construct the home, in other words ethics, is the ethics of care. Ethics, the wisdom of inhabiting the earth and living under the sky, is, then, the wisdom of care, thus requiring both a concrete involvement in care actions and the practice of the care for the soul, since, without cultivating the soul we do not have the possibility to develop the intimate cognitive and affective postures that constitute the essence of care.

Before developing the other parts of the discourse, it is necessary to explicate the relation between care ethics in its feminist root and the conception of ethics delineated here. Care ethics is a feminist perspective (Bowden 1997; Bubeck 1995; Gilligan 1982; Noddings 1984; Held 2006) and the feminist tradition would appear not compatible with the male-dominated philosophy of Plato and Aristotle that, instead, constitutes the main reference of the present conception of ethics that is developed in this study. But, through my empirical research on the practice of care, I have found the same ethical core, in the sense that at the core of the ancient philosophy as well as at the core of the action of care there is the question of good.

My method of inquiry is phenomenology as way of inquiry that searches for the essence of the things and the phenomenological method is the analysis of a phenomenon. Care is a practice and as a practice is a phenomenon. By following the phenomenological method I investigated many practices of care worked out by mothers
with children in foster care, teachers, social workers, educators, and nurses. Through interviews and narratives, I searched for grasping what is the essence of the work of care: it resulted that when a person cares for he/she searches for a good experience for oneself, or for the other, or for the community. This indicated that the decision to care for the other is the desire to create the conditions that allow he/she to have experience of the good.

Ethics is first of all a practice: the practice of searching what makes possible to have an experience of good. From the analysis of experience it resulted that at the core of ethics of care there is the search for good. But that is the main question of the Platonic and Aristotelian thought. To care is to search what is good for the other. It is on this concrete phenomenic data that it is legitimate to take into consideration the Platonic reflections on good in order to construct the meaning of the ethics of care. As Iris Murdoch states (1997), the problem of the modern and the contemporary philosophy consists in forgetting the question of good and the analysis of care demonstrates the necessity to go back to the thought of Plato for take those reflections that are important for going to the essence of care.

In summary: (a) care ethics assumes care as the pivotal way of acting and care means placing the other at the center of action; it is radically different both from the Kantian normative conception of ethics and from the utilitaristic view. (b) Also the ancient Greek ethics is neither normative nor utilitaristic, since it conceives the ethical way of being not as an application of rules but a practice based on a continuous reflection on the question of good. (c) The analysis of the practices of care makes evident that good care is ethical in its essence since it is moved by the aim to contribute to the other have experience of a better condition; at the center of the thought of a caregiver there is the question of the good of the other: if we analyze this statement we find in it both the situational view of care ethics and the primary place of good of the ancient philosophies. This flow of reasoning makes evident that it is necessary to avoid any ideological preclusion about some traditions of thought. The reality teaches to build bridges and not to establish separations.
Yet there is no science of the good

In the First Alcibiades Socrates raises a fundamental question: “what does taking perfect care consist of (128b)?” If we accept the vision according to care seeks what is good, then it follows that good and just care should have as its reference point the perfect idea of what is good. In other words, what are the things of value, those which make life worth living? But in Platonic ontology what is perfect and right is only that which is outside time. It is something both pure and transparent, from which the truth of all things flows. Thus even were the perfect idea of good to exist, it would not be accessible to our imperfect gaze; such an idea is not accessible to ordinary thought, which is to say thought which moves in time, but only to a thought which is not a thought, which realises itself in contemplation; and contemplation is a kind of thinking that does not act and does not develop. The contemplative soul is described in the Phaedrus (247b-c): it takes its stand on the high ridge of heaven and a circular motion carries it around those things which must be known. In contemplation there is no movement for the soul, but it is moved around; the soul finds itself in a situation of entrustment to an energy different to itself, which moves it. It is this condition of passivity which allows knowledge of the essence of things. But for us, even while we are stardust which yet retains something of the essence of the real, it is not possible to remain within a condition of pure passivity. Our mode of being is always that of action, and this goes for thought as well.

According to Plotinus, thought which manages to approach what is good cannot be ordinary thought, which thinks by means of differences and opposites and proceeds by reasoning; it can only be intuition (Plotinus, Enneads, V 6, 6), that is, the thought that sees the thing with absolute immediacy. But intuition thus conceived is not available to human reason which acts upon the object; thought always takes as its starting point a circumscribed space within which the process of “adaptation” and “assimilation” of the object takes place.

In the thought of the ancients, the good is something perfect and whole, which does not lend itself to being grasped through the
technicalities of reason and its need to analyse and separate, in order then to re-compose. This is perhaps why Murdoch—even though she does not quote Plotinus—maintains that thought which thinks what is good is in some way analogous to prayer (1997, 356), deploying this term to refer not to a religious practice but to a way of thinking which realises itself in full attentiveness to the object.

The reference to contemplation is therefore difficult to sustain, for the mind engaged in understanding something obscure has a need to act upon the object. We come into the world called upon to act; having care, which is our proper mode of being, cannot but be an action, and this holds also for the life of the mind, in the sense that thought which has care for ideas, realises itself through diverse cognitive moves. We cannot but act, and therefore entrust ourselves to the imperfect way of thought which is accessible to us.

If we discard contemplation as a mode of knowledge, we are left with thought in its normal form as the human mind knows it: thinking which knows that it always has to search and thereby proceed by successive approximations within a reality which always retains an area of opacity. The thinking which seeks a true knowledge of human affairs is the thinking which manifests itself, as the Socratic method teaches us, by circling repeatedly around questions (Philebus, 24d-e). A divine mind does not need to ‘construct’ truth, but since it is capable of a perfect realism, which consists in being able to see the thing just as it is, truth is something which is welcomed in; the human mind on the other hand proceeds by way of reasoning, and reasoning proceeds by degrees. In this proceeding, which can be long and arduous, there may be many obstacles to make us stumble, many choices to be made along the path to be followed, and all of these moments imply something impure which sneaks in. For this reason, what is to be sought is the greatest clarity of thought and purity of attention (Murdoch 1997, 356). Seeking ‘clarity and purity’ (Philebus, 57c) means avoiding fantasy, which ‘can prevent us from seeing a blade of grass just as it can prevent us from seeing another person’ (Murdoch 1997, 357), and seeking words which help us to see reality in its essence, avoiding the opacity of that way of thinking which
approaches things in a manner already conditioned by pre-structured theories.

The thinking which seeks to grasp the essence of the good is thus arduous work, but even if we cultivate thought in the best way possible, the idea of good is destined to remain inaccessible. Such an idea is not knowable by human reason because it is of a different order, the mind being of the same quality as life: uncertain, fragile, always lacking something. Plato warns us that knowledge of the good is not of this world, in that if someone were to reach the point of acquiring this knowledge, he would become a stranger to other human beings, to the extent of being persecuted because nobody would be able to understand what he was saying (Republic, VI, 516e-517a). It is given only to divine creatures to know the idea of good, and even were they to be able to explain it, we would not understand the definition, such is the perfection of the idea of good compared to the imperfection of human thought (Xenophanes, fragment 34).

It is disorienting to note that the mind thinks ideas which it cannot comprehend, as it is when the mind thinks of the idea of the infinite. It thinks ideas which it cannot hold within the borders of its reasonings. And yet it can conceive of them without them appearing mere invention or fantasy. We can conceive some ideas because our thought is no other than the thought which governs the real, since as all the things also we are part of the logos of the universe; however we cannot explain them since the logos that permeates the universe is present in our mind only in small and insignificant amounts (Philebus, 29c). The perfect idea of good is not given to us. It would therefore be out of place to seek the “entire knowledge of all things” (Philebus, 30b), while we can search for the “sophia of the human things” (Apology of Socrates, 20d).

In spite of the impossibility of defining good, we cannot avoid taking on this search because we will never be able to know what it is best to seek and to do if we do not know what is good (Plotinus, Enneads, VI 7, 19). But what we need to seek is an idea of good which is consonant with the quality of the human condition; “a mortal
being must have mortal, not immortal thoughts” (Epicharmus, fragment 20). For this reason Socrates suggests shifting our attention: “let’s abandon the quest for what the good itself is... it is too big a topic” and he proposes examining questions that are offspring of the good, which is to say questions which are congruent but of lesser difficulty (Republic, 506e). If we are in authentic search for the truth, it is possible to reach the threshold of the house where the good inhabits (Philebus, 64c).

The practical idea of good

The idea of good to be sought cannot then be the perfect idea, which is situated in the space of realities which are always identical to themselves and which know no change (Philebus, 59c), but it must be an idea congruent with human nature and at the same time daughter of the perfect idea of good (Republic, 506e). Such is the idea of “the practical good” which is realised through actions (Aristotle, Nichomachean Ethics, I, 7, 1097a 23), for it is actions which constitute the essential element of existence, in that the quality of life depends largely on them (Nichomachean Ethics, I, 10, 1100b 33). Care ethics is not a theory, but it is a way of being in relationship with the other, which is guided by a practical idea of good. We are placed within reality not as spectators, whose being consists in contemplating what takes place, but as agents. Action, through gestures and words, is a property of the human being; the good to be sought is, as a consequence, something which is configured as the outcome of actions. Indeed, the question which characterizes our being in the world and as such is an index of the problematic nature of human condition is “what are we to do?”.

The following question is therefore decisive: which actions should be carried out? According to Aristotle they are those actions which allow us to have experience of eudaimonia (Nichomachean Ethics, I, 4, 1095a 18-19). At this point, in order to verify if the meaning of eudaimonia is pertinent to the practice of care, it is vital to clarify the meaning of the this term. Generally eudaimonia is translated by “happiness”, but here we should attempt a literal, more faithful meaning.
The Greek word *eudaimonia* is composed of ‘*eu*’ and ‘*daimon*’; ‘*eu*’ means “in a good way” and ‘*daimon*’ means not only the divinity, and precisely the divinity that dispenses destiny, but also spirit. In many dialogues Socrates speaks of his daemon, that is his conscience, which tells him what he must not do. *Eudaimonia*, understood as the good to which the human being tends, therefore consists in a good quality of the life of the soul.

The meaning attributed here to the term ‘eudaimonia’ is supported by a passage of *Philebus* (11d), where, after posing the question of good, Socrates turns to his interlocutors Protarchus and Philebus and asks them to indicate the condition and disposition on which depends the potential of the soul to reach a “good eudaimonia”. From this passage we deduce that *eudaimonia* is held to consist in a way of being of the soul. When Aristotle states that “the greatest goods are those of the soul” (*Nichomachean Ethics*, I, 8, 1098b 14-15) and that these goods consist in its actions and its activities, he is expressing his complete accord with the Socratic/Platonic thesis. The actions and activities of the soul are the spiritual practices through which we realise care for self (Hadot, 2002).

*Eudaimonia* is a perfect good because it is always chosen for itself, never in view of anything else (*Nichomachean Ethics*, I, 7, 1097a 34); it is the thing which is most beautiful and most good, and therefore also the most pleasing (*Eudemian Ethics*, I, 1, 1214a 7-8). The term *eudaimonia* indicates “living well” and since the human being is essentially an agent, “living well” is the same as “acting well” (*Eudemian Ethics*, II, 1, 1219b 1-2; *Nichomachean Ethics*, I, 4, 1095a 19-20).

When a person cares for another one, she/he acts guided from the aim to procure a better condition for her/him; at the basis of her/his behavior there is the awareness that to act in a right way is the most important thing. The wellbeing of the soul springs up from this ethical kind of action. Thus, we can affirm that the practice of care, when it meets the needs of the other in the right way, procures *eudaimonia* both to the *caregiver* and the *cared for*.

Care ethics reveals itself in the practice, which results to be meaningful for the caregiver even if care is a labor that requires a demanding
involvement. This occurs because to care is to act in a just way and the awareness of it is sufficient to make someone feel a positive sentiment in his/her conscience.

When I act to care for myself as well as when I act to care for another, what is crucial is the idea of good. At this regard, the practice of care teaches me that it is not only necessary to search for a concrete, immanent idea of good embodied in the daily life (about this, it is possible to speak of a materialistic spirituality as the generative matrix of care ethics), but also to cultivate a manner of thinking that is congruent with both the human limits of thinking and the essence of care. With the help of the thought of the Spanish philosopher María Zambrano we can speak of a maternal thinking, that is “narrative, humble, non-polemical, situated and compassionate” (2003, 91).

A humble thinking is aware that it is not given to us to “seize what is good in a single idea” (Philebus, 65a), but we must come to the question by degrees, through a plurality of questions which move between the opposites in which the movement of the real can polarize itself. The perfect idea of good pertains to a reality which is perfectly realised and always identical to itself, while we inhabit a reality which is a place of mixing, where the good is mixed with the bad, the just with the unjust, the beautiful with the ugly. Our mind is lost if it seeks a perfect idea, because it is neither conceivable nor sayable to a thought which thinks through differences: just as the life in which we find ourselves is a becoming between opposites: hot/cold, dry/wet, fast/slow and so on, so ordinary thought can find ideas which guide our actions by reasoning through difference. These are the questions which Socrates indicates as essential: “what is good and what is bad, what is admirable, what is shameful, what is just and what is unjust” (Plato, Gorgias, 459d). These are the primary questions, which the mind cannot avoid examining if it does not wish to dissipate itself far from what is essential. By examining these questions the soul comes to find itself on the threshold of good.

These are difficult questions which we must turn back to again and again (Plato, Philebus, 24d-e). When Plato/Socrates enunciates the
principle of returning again and again to questions, he is describing the movement of the blissful soul which is led in a circle in its contemplation of ideas, with the difference that here on earth, where we inhabit, the mind is not led but must gather up all its energies to take forward the work of this search. In order to find this epistemic energy, the thought which goes in search for truth, and with it other “things worthy of love” (Phaedrus, 250d), must be a thinking enamoured of the things to be loved.

But the property of the human condition is not only a thinking which proceeds by degrees and reasons through differences, but also that which happens with the other. We are relational beings, and we structure ourselves in relation with others. If in the pure world of ideas thinking is a contemplation of the soul which alone with itself keeps its gaze concentrated on the ideas which are always there, in the imperfect and complicated world in which we live the search for truth can only come about through dialogue with others, where minds come together and assist each other. In this sense thinking is engaging in dialogue, and those who engage in dialogue in the search for truth are said to both be capable of a thinking enamoured of those questions worthy of love (Philebus, 24e).

Counter-hegemonic spiritual care

The notion of spiritual care can be at risk when it is interpreted only as an intimate practice, since it can retire from the world. If Socrates indicates care for the soul as a preparation for the political life, we can also state that spiritual care is imperative for acting according to an ethics of care, since the labor of the soul that is in search for an ethics of life is an essential component of ethics and politics of care.

In this perspective, the discipline of spiritual care should challenge the tendency to interpret life on the basis of an acquisitive logic. Murdoch states that “we are blinded by self” (1997, 382) and egoism is functional to nourish the market logic which grounds neoliberalism, and this antipolitical and dangerous vision contrasts the practice of care and makes more vulnerable both the recipients of care and the caregivers. In order to cultivate a spiritual care able to challenge
the acquisitive logic it is necessary to reflect on the essence of the human condition.

When human being becomes self-conscious, he/she discover a lack: a need for something other, and at the same time an obligation towards transcendence and thus to move in the world in search of a form of life. When we leave for a trip in search of something we pack our rucksack with whatever we need for the journey; for that journey which is life the human being does not have a rucksack to begin with, not a compass, and is aware of his constitutive lack: a lack of those things necessary for life and a lack of a map of the directions for existence. For this reason he/she is assailed by a form of avidity for what he/she feels necessary in order to exist. This yearning for something other, lies at the origin of the action of self-care, and is the motivating drive which gives strength. But this desiring tension has to find the right measure, the mid-point between excess and defect; without this, it becomes a form of avidity, which transforms existence into an obsessive process of acquisition. Plutarch asserted that an essential action of the technique for living is to avoid excessive love of self (471d); indeed the perversion of the human mind when it is never satisfied with anything is the cause both of grief and suffering and of a consumistic logic that consumes the time of life.

The language we use is very often inclined towards acquisitive logic to the point of legitimising it. For example, when Plotinus says that “happiness consists in the possession of the true good” (Enneads, I 4, 6, 0-5), he leads us to think of good as an object which can be acquired. In this case he uses the ancient Greek term ktésis that indicates not simply having, but possessing as in taking hold of the thing, and he evokes a mercantile vision in that he indicates that something can be acquired. For this reason having care of spiritual life demands first of all a critical reflection on the words that we use.

Egotism has its root in our unfinished being; we are insufficient to ourselves and always in need of something other. Because where there is lack we fill the need to fill empty space (Plato, Philebus, 35a); from absence is born desire and the desiring being always seeks something to fill the void (Plato, Philebus, 35b). It is from unbearable emptiness
that acquisitive tension originates, the tension we find represented in the figure of Penia. In the Symposium, we read that Penia, or poverty, comes to beg at the banquet organised to celebrate the birth of Aphrodite. At the banquet, Penia finds Poros, or expediency, who falls asleep, drunk on nectar. To fill the lack in her being Penia comes up with a plan to have a child by Poros and lies down with him, and thus gives birth to Eros (Symposium, 203b-c). Eros, love, is thus born from poverty and expediency, and such is his essence: to be poor, lacking, and always in search of something that can fill that lack. For this reason Eros is the metaphor of the human condition, our being always in need of something other and as such needing to seek out what might fill that original lack. We are active beings moved by our desires.

What prompts our actions are our desires. In ancient Greek, the term which indicates desire is epithymia, which is composed of epi and thymos; thymos is the vital force, the soul understood as a way of feeling and desire, and epi indicates standing over; thus desire is a posture of mind which leans over something and that something is the idea of good towards which we tend. When what prevails is an egoistic idea of good, a gaze enclosed within the confines of our own skin, the search for good becomes an individualistic doubling down which forgets our relational essence, and thus the possibility of being in accordance with the order of things vanishes. Only when the good that we seek is open to the transcendent with regard to the self does it create movement which opens the actualisation of our own being in the world to something other which is beyond ourselves. Precisely because we are relational beings, it is only when the good we seek lies outside our own personal space that we move in accordance with the order of things.

However in our uncompleted and wishful condition there is also a tension between what exists and what lies beyond ourselves. This tension moves our being to the search for the true and good; it is our condition of neediness which makes us “searchers of knowledge for the whole of our lives” (Symposium, 203d). But feeling ourselves uncompleted can become a vortex pushing us to all sorts of expedients
to acquire everything that has the appearance of filling our sense of insufficiency.

The way of egoism, which interprets good as the filling up of our own emptiness, is the opposite to the way of care. We have said that care is the search for good, or rather those fragments of good that are accessible to us. According to Murdoch these fragments are lived in concrete forms by simple people. By putting into play the concept of simplicity, Murdoch is saying something essential about the good practice of care and it is worth to interpret this concept from a caring feminist perspective.

Feminist theorists argue that care ethics is radically different from a systematic approach (Noddings 1984; Held 2006). Care ethics is not conceptualized in a normative system of principles and rules, it is not the application of a norm that pretends to have a universal value, instead it is a practical response to the need of the other in a concrete situation and an immediate response to this particular condition. As the nurse Luisa explained, when the other, who depends on my actions, shows a need, the conscience has not to make reference to general rules and does not need to rest and engage in complex reasonings; what the mind feels is the urgency to make something for the other in order to make him/her live as well as possible (Tronto 2015, 4), and this requires a simple but essential way of thinking. To act on the basis of a simple and essential reasoning must not be interpreted as a spontaneous practice since the caregiver, who works out a good care, is acting in the light of an ethical perspective that is gained through a reflection on life, only that this ethics is not normative, i.e. it does not come from general rules, but from the awareness that each human being searches for the good and the right way to be in relationship with the other consists in dedicating our own practice to this research. In this sense, care ethics is a simple ethics, but a simplicity that involves all the arduous labor of the mind to find what is right to do. What is essential rests on what is simple, but the simplicity of the essential things for life are the most arduous.
If Murdoch helps us to see the essential simplicity of the ethical practice, however, she makes an assertion that is very problematic from the point of view of a feminist theory of care ethics. She identifies simplicity in the “humble people who serve others” (1997, 381). That assertion evokes the marginal position in which many female caregivers are confined (Tronto 1993) and at the same time reveals the misunderstanding of care as a service (Bubeck 1995). It is necessary to avoid such an obliterative vision of the ethical habit that legitimates a disposition to sacrifice. Instead, consider the idea of simplicity starting with an expression in the Christian Gospels that has engaged philosophers from Husserl to Zambrano: “poverty of spirit and purity of heart.”

It is difficult to interpret this expression, for to grasp its full significance would be to go to the heart of being. Nonetheless, it would seem that “poverty of spirit” is given when we can keep to what is essential, following the ways of knowledge directed towards the primary question and seeking the essential truth of this question. “Purity of heart” can be thought of as being able to focus vital energy on cultivating the feeling which has the force to sustain the search for the real sense of being: trust, hope, serenity. These feelings keep us removed from the tendency to facile consolations, to run after fantasies, and to keep our attention on the difficulty of the real. Purity of heart is an absence of desires which distance us from the just order of things and is given over to the necessity of the call to good; poverty of thought is the capacity to bracket off those thoughts which claim to systematise the real, distancing us from the real search for truth.

Thus we can say that care for the spiritual life is what sustains clear thought and pure feeling, and spiritual care is the ground for a good practice of care since the right action is sustained by the clarity of thought and purity of feeling. This is the spiritual core of care ethics. And since care is primary in life, care ethics has to be considered the very essence of ethics.

It is necessary to further clarify to avoid a misleading interpretation of the spiritual life concerning care. The spiritual life develops in a right way when it responds to what is necessary for life, and what
is necessary is the truth, precisely the truth of existence. In contrast, science searches for the scientific truth that is useful to understand the phenomonic world, spiritual work searches for the truth that illuminates our being-in-the-world-with-the-others. But this truth is not only an outcome of reasoning but it is gained through action. Precisely, the truth of existence is realised in actions that change the human experience for the better.

Thus, spiritual life is not a mere interior activity since, if conceived in this way, it would divert from the world; instead, it is a pragmatic activity since it is made of thoughts and sentiments that are embodied in the material experience. Only the experience we live with the others is the test of the truth. So, we can speak of materialistic spirituality.

The essence of actions of care

Since we, as human beings, are essentially entities who act, a good quality of life depends on the quality of our actions. It is therefore of fundamental importance to determine which actions are associated with the good. If we can answer this question, we can come to identify the agency that defines good care, that care which seeks what is good.

If we consider the experience of people who are thought of as being witnesses to good care, it is self-evident that their action consists of acts which it takes no conceptual stretch to define as virtuous: they have respect for the other person, they act with generosity, they conduct themselves with a sense of justice, and they know how to find the proper measure in doing things. When it is necessary, they have courage.

This phenomenological data, which indicate the essence of care in virtues, finds noetic evidence in the thoughts of the ancients. For Aristotle, who conceptualised the idea of “practical good,” virtuous actions are decisive (*Nichomachean Ethics*, 1100b 8-10). Acting well means acting in accordance with virtues (*Eudemian Ethics*, II, 1, 1219a 28). Thus we can say that the ethics of care is the ethics of virtues.

Plato and Aristotle are in complete agreement as to which actions might make us feel good. Socrates says that the good of the soul
consists in the virtues (Philebus, 48e), and Aristotle states that the
good of the human being consists precisely “in the activity of the soul
in accordance with virtue” (Nichomachean Ethics, I, 7, 1099b 26). In
other words, “the activity of virtue is the best good for the soul”
(Eudemian Ethics, II, 1, 1219b 32-33). It follows from this that search-
ing for good means acting in accordance with virtue. Thus if we were
to seek the answer to the essence of “perfect care,” we might say it
was that which seeks good by acting according with virtue.

But since the good we seek is a practical good, the actions of the
soul are not enough: we also need the practical ones. Indeed Aristotle
states that for a good life, we need movements of the soul in accor-
dance with virtue and the practical actions that draw inspiration from
them (Nichomachean Ethics, I, 8, 1098b 10-14/13-14). For this reason
he speaks of dianoetic or intellectual virtues, that is the virtues that
inform the search for science, and political virtues, that is the practi-
cal ways of acting in the public world.

We need to be clear what we mean by the term “virtue.” It is
a potentiality of being (Rhetoric, I, 1366a), that is to say, the way in
which we model our energy, our substance, orienting it towards
the search for good. Thus we can say that virtue is to live according
to nature, since it is to act in accordance to the order of things that for
the human being is the search for good.

With regard to the platonic question as to whether virtue is single
or many, the answer is as follows: since for everything there is an
essence which defines it, the same holds for virtue and its essence
consists in orienting action according to the good, but since the
modes by which it manifests its essence are different, virtues are
many. Indeed, when Aristotle speaks of virtue in the singular he is
describing the essence of the virtues as a whole; when he speaks in
the plural he is listing the modes of modelling being which actualise
essence: justice, courage, temperance, generosity, magnanimity, liber-
ality, wisdom and knowledge (Rhetoric, I, 1366a).

Virtues, states Aristotle, “are necessarily a good, in that those who
practice them feel good and are in a condition to do good things and
to act well” (Rhetoric, I, 1362b). Virtues differ according to the energy
on which they act. Virtues of the soul [in Greek: *aretai psychés*] are the way of orienting its energy; virtues of the body [in Greek: *aretai somatos*] are the way of nourishing and conserving its energy well, keeping it healthy and looking well (*Rhetoric*, I, 1361b 1362b). Both care for the self and care for the other need spiritual virtues and material virtues; a good maternal care gratitude the soul of the child through vital and gentle words and cultivates his/her body with gestures that communicate the best respect and delicacy. The physician or the nurse reveals to be a good caregiver when he/she is related to the patient by having respect and delicacy both for his/her soul and body.

Starting from this reasoning it is possible to reinterpret the ethics of virtues. On the basis of a disembodied culture who tends to interpret virtues as disembodied acts, when we speak of “moral or civic virtues” we tend to interpret them as relational acts that are put in place from an agent who considers the other only as a rational being, without a body. Instead, a good politics of care, as suggested by the feminist thought, is a care that gives attention both to the material life and the spiritual life.

**Spiritual practices**

Since good actions of care must be infused by good spiritual acts, an authentic philosophy of existence is incomplete if it does not indicate the actions necessary to cultivate the life of the soul (Mortari 2014).

Plato defines as “tender and pure” (*Phaedrus*, 245a), the perfect condition that has to be searched for by the soul when it looks at truth. It is extremely difficult to achieve such a condition, because even though it is no more than a puff of air the life of the soul tends to get bogged down in the continual contact with the things of life. The soul, which is to say the organ of spiritual life, is like a shell in the sea, which over time finds itself weighed down by the algae of the sea that attach themselves to its surface.

The essential question for spiritual life then, consists in understanding how to have care for the energy of the soul and thus enable
it to maintain its purity and power of caring for life. In order to find an answer to this question we need to seek in ancient philosophy what can be defined as “spiritual practices”.\(^2\) In this regard, we find some particularly insightful reflections in the philosophy of Plutarch, who speaks of “healthy thoughts” (On Tranquillity of Mind, 470d), those which contribute to achieving a good disposition of the soul, defined in ancient Greek by the term *euthymia*, which means a good way to feel life.

According to Plutarch, there are two ills which can afflict the soul: insensibility and ingratitude (On Tranquillity of Mind, 473c); in other words not feeling the quality of the real, and not acknowledging those phenomena and those actions which are indicative of the good which happens. A good quality of the life of the soul is facilitated by acts of gratitude. Thanking the other for a gesture or a word is an essential act of recognition.

The most important acts of care are gratuitous, since they are done simply because it is necessary, without expecting anything in return. But, as the language itself suggests, there is a close relationship between *gratitude* and *gratuitousness*; indeed, since acting with care requires a great deal of inner energy, both cognitive and emotional, the agent of care needs spiritual energy, and the act of gratitude that he/she could receive from the cared-for is the best nourishment. When I thank the other for what he/she has done, both her/his and our spiritual energy nourish.

Knowing how to give thanks for what it is easy to take for granted—“enjoying good health, seeing the light of the sun” (On Tranquillity of Mind, 469e). Knowing how to recognise the value of that “being able to speak and act” (On Tranquillity of Mind, 469e) is a good that we often take for granted. When we are incapable of seeing the value of what is but cannot comprehend the fragility of

---

\(^2\) Hadot, an important French scholar of ancient philosophy, uses the expression “spiritual exercise” to signify the work directed to the education of the soul. The study of Hadot shows how ancient philosophy has a practical vocation, especially Stoicism and Epicureanism. But the term “exercise” is too scholastic; for that reason the term “practice” is to be preferred.
certain goods, it is all too easy to lose these possibilities of being. Bad politics come to the fore when citizens cannot see the good they risk losing and allow themselves to be swept along by phantasmatic rhetoric. A good politics is therefore, one which invests in education.

Plutarch distinguishes between "people without education" (On Tranquillity of Mind, 467b) and “wise people” (467c). He presents us with this distinction in the same paragraph where he speaks of welcoming events with temperance, letting us understand that the education of the soul, which leads to wisdom, is realised above all through thinking, feeling, and acting in just measure. “Nothing to excess” was one of the principles written at the entrance of the temple of Delphi. The right measure is essential in evaluating the quality of events. The quality of our actions depends, indeed, on the wisdom with which we evaluate events.

For every event, it is vital to see what there is of good, despite our tendency to focus attention on negative elements and get caught up in tormenting thoughts. Torture a good disposition of the soul, it is important to learn not to neglect what there is of good and favourable in circumstances which we judge negatively because they do not happen in accordance with our desires (Plutarch, On Tranquillity of Mind, 469a). Adopting this principle means acting in accordance with nature, and, if we observe how our body behaves in reaction to stimuli, we notice that when our eyes are wounded by something too bright, we turn our gaze away and let it rest on the colours of the flowers and the grass (Plutarch, On Tranquillity of Mind, 469a). If we persist in focussing on the negative, this connection becomes more obvious and more vivid, producing a feeling of darkness in the soul. Learning how to shift our attention to the positive makes it possible for us to feel less unbalanced, less excitable, therefore more temperate. Shifting our attention does not mean eliminating the negative but finding a way to make it bearable. Often the work of care itself makes it difficult to do so, as it results in reports of nurses and doctors during the Covid-19 emergency: much trauma of the spirit results from overwhelming and unrelenting care duties that involve futility, bad decisions, absurdity, and death. The gratitude
manifested by citizens and civic institutions is the primary duty of a politics of care.

The condition for finding the right way of acting consists in practicing not becoming too closely attached to anything. Over-intense desire towards everything rouses in us the fear of being left without it, and in this, our joy becomes weak and uncertain, like a flame exposed to the wind (Plutarch, *On Tranquillity of Mind*, 474c-d). Because of the need that every human being has to procure those things necessary for life, he runs the risk of giving excessive weight to things, investing in them in measure which goes beyond what is necessary. Not dealing with things in just measure upsets the balance of the soul. Plutarch advises us not to become too attached to the things we have, or which we believe we have. Care for our belongings (Plutarch, *On Tranquillity of Mind*, 471b) is necessary for it allows us to find some security, but when it is excessive and becomes a matter of accumulating much more than is necessary, it prevents us from having care of what is really essential. It is therefore a question of learning to value not external goods but internal ones, such as virtues. It is not given to us to have sovereignty over our own lives; for this reason, even what we think we own is, in reality, fragile and uncertain. To protect the soul from inevitable suffering, experience teaches us to think as little as possible of those things which do not depend on us and to focus instead on our modes of being: learning to take joy in the good which comes to us, and not to despair at the good which is lost (Plutarch, *On Tranquillity of Mind*, 473f). Remembering always that our ontological weakness manifests itself in the impossibility of grasping the real. We are the fragile guests of reality. We need to do away with the tension to keep hold of things and place all our trust in them to cultivate an attitude of acceptance. An acceptance is an acknowledgment of the inevitable but never a surrender to the negative, which can be avoided by effort.

When we think of inner life, we tend to have an intellectualising vision, while thinking is always, in fact, feeling. And so cultivating spiritual life means cultivating a *health-giving feeling*, one who assists us in the work of living. In the literature which speaks of care, we
often find reference to love as a feeling essential to care and thus to ethical action.

The feminist philosopher Judith Butler admits that she does not have a clear idea about love, suspecting that we can know love only when all the ideas we have about it have been deconstructed (Butler 2002, 62-67). Zambrano (1950), on the other hand, perhaps because she has been an attentive student of both Plato and Dante, does not hesitate to speak about love, stating that since where there is no love, there is no life, we cannot conceive of a philosophy which aims to be of help in life without going into the theme of love. As Dante states, “love is what moves the sun and the other stars” (Paradiso, XXX). Murdoch, too, reserves a position of fundamental importance for love, maintaining that the weakness of contemporary moral philosophy lies in its having chosen not to speak of the concept of love (1997, 337). She maintains that reality—and for the human being engaged in care, reality is not only what is, but also what should be—“is revealed to the patient eye of love” (1997, 332). Kittay defines the practice of care as “love’s labor” (1999).

Perhaps it is then impossible to avoid speaking of love, but first, a reflection is necessary.

We can say that love is necessary for ethics if we understand love as the translation of the Greek term *agapé*. There is little said in Greek dictionaries about the meaning of this word, but if we consider how it is used in the Gospels, it indicates the spiritual love which the soul is capable of. When Plato speaks of the life to be sought, he uses the term *agapétotaton* (*Philebus*, 61e), which comes from *agapé*, which is the way of feeling of the soul which is necessary for the search for knowledge of the things worthy of being loved (*Philebus*, 62d), in other words, things which are of the greatest importance for life.

In love as *eros*, there is an acquisitive urge: we love the other in the sense that we desire not only to love but also to be loved: we love in being loved. This acquisitive drive is not present in *agapé*. In love as *eros*, there is a type of affirmation of the self because we love while seeking to be able to be loved: *eros* does not exist if there is not a movement of feeling from one to the other. Aristotle says that love
for the other also seeks something for itself (Nichomachean Ethics). In agapé, we make ourselves the instruments of necessity. We love in the sense of agapé when we seek that thing which has to be. Agapé is not just a feeling, but a way of being, a way of acting in the world. And the feeling which nourishes the mode of being which is agapé is not a passion, but the originating feeling of trust and hope that all those things which make life a good time to live may happen. The action of care, which puts itself at the service of becoming what it is good that it should become, has no certainty that what is desired will actually come about, for there are too many factors which intervene on action. Only hope and trust in the possible can sustain this effort of acting in uncertainty. Then, when a little of the good that we seek actually occurs, we feel pure joy, the joy which the soul feels when it sees happening what is necessary. We find an example of the joy which comes with agapé in the Gospel when Jesus explains that the friend of the bridegroom rejoices in the joy of his friend. “That is perfect joy,” and he adds, “He must grow, while I must be diminished” (John 3, 29-30). In love as eros, there is always something egotistical, which is not present in love as agapé.

And so we can say that reality, by which we mean that which is in the order of necessity, is revealed to the gaze which patiently seeks good, and this gaze is love as agapé. The fundamental disposition of the soul consists in obeying reality as an exercise of care, moved by that thinking and feeling which is agapé for good.

Conclusion
At the core of this writing, there is the following argumentative nucleus.

There is an originary spirituality that reveals itself when the soul remains in touch with the mystery of life. There is the possibility of an authentic spiritual life when the soul, having put in bracket any kind of theory, opinion, belief, can advert the sacred ground that generates the flow of life in the world. To be able to breathe in a spiritual way requests the soul to keep in touch with infinity,
accepting not to be able to give it a name. Thus, the soul can cultivate a kind of purity of the heart and simplicity of the mind.

This breath of the soul is originary since it comes before every systematic thought, before every theory, before every religion. Therefore, the authentic spiritual life cannot be confused with systems of thought, neither philosophical nor religious.

The spiritual breath makes the mind conscious of the prime question for life: the question of good. To assume the research of good, both as a thoughtful activity and a practical one is the generative matrix of the practice of care.

Works Cited


Section II: 
Embodyment, Gender, and Family
The Fluidity of Becoming. 
The Maternal Body in Feminist Views of Care, Worship and Theology

Inge van Nistelrooij

In some senses ['the mother'] is everywhere, our culture saturated with her image in its varied guises, and yet theoretically she remains a shadowy figure who seems to disappear from the many discourses that explicitly try to account for her (Baraitser 2009, 4).

Maternal subjectivity is (I take it) a variation on female subjectivity, but it is important to treat the two as distinct, otherwise we lose sight of what is peculiar to maternity (Stone 2012, 4).

Introduction

Care theorists’ attention to maternity has always been characterized by ambiguity. On the one hand, care ethics is rooted in feminist research regarding practices of mothering, in which women’s practices, their self-understanding and their related morality were analyzed and expressed (Chodorow 1978, Gilligan 1982, Noddings 1984). As such, this research was part of the Women’s Movement of the 1970s and women’s political consciousness raising movement which was not unrelated to the legalization of abortion in many parts of the (western) world (Gilligan 1982, ix). By expressing their experiences as women and mothers, they discovered and filled an enormous knowledge gap that has existed throughout academic history, in which women had lacked a voice until then. This lacking voice has led to an almost total ignorance and neglect not only of women, but also of topics that relate to all human beings, like birth (Schües 2008). On the other hand, the topics of maternity, pregnancy and
birth have also been abandoned on purpose by most care ethicists in the early 1990s. For instance Hankivsky (2014) describes the distinction between the first and second generation care theorists as a move away from ‘mothering practices’:

The earliest articulations were associated with the work of Carol Gilligan (1982). They were linked to women’s morality and in particular, mothering, caring, and nurturing activities and experiences (Held 1993, Noddings 1984 and Ruddick 1989, 1992). Second generation care theorists, led by the work of Tronto (1993), transcended such conceptualizations. They firmly established care’s importance as both a moral and political concept, defined 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. That world includes our bodies, [our selves, and] our environments [sic], all of which we seek to interweave in a complex, life-sustaining web” (Tronto 1993, 103). (Hankivsky 2014, 253; emphasis in text, additions made by IvN)

Claiming a feminine specificity in the public realm had proven to be an unsuccessful strategy for care theory to gain the political and moral impact it deserves (Tronto 1993). As feminist theorists, care ethicists sought to advance the equality of the sexes as well as classes, races and ethnic minority groups. Therefore Tronto and Fisher devised a broad definition of caring as social, moral and political practice rather than embodied and gendered experiences. More specifically, Tronto considers the first care ethicists on mothering practices (especially Noddings 1984) as failing to acknowledge ‘the political setting of their moral arguments at their peril’ (Tronto 1993, 3) and as following a politically naive, unsuccessful and ineffective strategy (Ibid, 1-3). For these reasons she has developed a care ethics as a broad political and moral theory. Joan Tronto’s pathbreaking work has been an invaluable new impetus for care ethics at the point where it found itself increasingly stuck in binary oppositions of sexes and gendered moralities.

This strategy is not disputed here, nor will it be contradicted. I underscore the necessity and importance of Tronto’s work and the change of course of care ethics that it brought about. Yet I will argue throughout this contribution that a lack of attention for the way in which each human being is ‘some mother’s child’ (Kittay 1999, 23) and how we have come into being inside another person’s body, leads to a distorted understanding of our reality, which is detrimental to all mothers, with whatever gender they identify. I therefore uphold that the embodied experience of maternity – i.e. pregnancy, birth, lactation – is of a particular kind, and that the female sexuality associated with it still suffers from particular oppression, exploitation and violence which care theorists need to address (I return to these cases below). For this reason, care ethicists should not abandon their roots altogether, but need to find a way to address the care ethical ambiguity regarding maternity and pay renewed attention to it, for the sake of those women and mothers who are oppressed, exploited or violated.

The various strands\(^2\) of care ethicists have had their valid and plausible argumentations that have underpinned their problematizations of care. We may now need a third strand, that readdresses the topic of its early research that gave a voice to maternal experiences and identity (Ruddick 1980, 1989; Gilligan 1982), without failing to acknowledge care as a broad practice within a political context (Tronto 1993, 3) and without falling into the trap of reinvoking ‘traditional sexist notions of gender roles’ or ‘a quasi-scientific grounding for a view that men and women are essentially different’ (Tronto 1993, 85). Readdressing from a care ethical perspective both female sexuality and pregnancy as morally and politically relevant topics, and taking both the personal experience and the political context into account, it might be helpful to start with some pioneering sources

---

\(^2\) The terminology of ‘generations’, as coined by Hankivsky and adopted by many, is actually misleading: several of the ‘first generation’ care ethicists are still writing (Noddings, Tronto, Kittay). I therefore speak of ‘strands’ from this point onwards. With thanks to Joan Tronto for this suggestion.
and look for their present relevance through a filter that warns us of these pitfalls. Within the framework of this volume I want to turn to theorists who have tracked the religious roots of the oppression of female sexuality and the pregnant body, an analysis from which many lessons can be learned. By looking at the role of religion and by including feminist theology I follow in the footsteps of theologian and care ethicist Van Heijst (2008, 2011b). She argues that Christianity, like other patriarchal monotheistic religions, has contributed importantly to the erasure of female representations of divinity such as images of female fertility, advanced pregnant goddesses, who embodied and gave birth to new life, in short ‘the maternal’ (Van Heijst 2011b). Feminist theology offers – perhaps surprisingly – sources that help reinvigorate the meaning of our coming into life through somebody else’s body, some-body.

This contribution therefore puts the following questions central: even though care ethics is a proponent of the philosophy of natality, does it not, in its anti-essentialism and anti-biologism, blur the physicality of pregnancy and birth as well as the moral and political consequences of this physicality? If so, how could we re-include maternity in our understanding of care, while avoiding the pitfalls of the early care ethicists, of essentializing, naturalizing, and containing maternity to one gender or the private setting, and naively ignoring the political setting of care practices? And thirdly, for what ideas can care ethics draw upon feminist theology, which has contested the theological underpinnings of essentialism, naturalization, and the containment of maternity?

Before I proceed, however, I need to address certain tensions that must be upheld and endured when discussing this subject, that is the gender of ‘mothering’ or ‘maternity’.

The Tensions Involved in the Gender of Mothering and Maternity

I expressly aim to acknowledge the blurring of gender boundaries. Traditionally considered as limited to two, gender is increasingly acknowledged as a plurality. Pregnancy is no longer contained to the explicit female body, and transgenders, intergenders, non-binary
genders, and others, either experience pregnancy too or long to do so in the near future (Schrupp 2019). As a result it is plausible to argue that an emphasis on the embodied experience of maternity is not ‘essentializing’ women, and a neglect of this experience is to the detriment of all mothers, both those who identify as mothers and women and those who identify as mothers but not as women. Since maternity can no longer be analysed along the lines of a gender binary, it also (and anew) challenges our assumptions of the male and female sex. Moreover, fathers have expressed that discussing ‘mothering’ or ‘maternity’ fails to appreciate their involvement in child care and makes them feel neglected and excluded. They have responded critically and negatively to the terminology of ‘mothering’ and ‘maternity’, and suggested to replace it with ‘parenthood’ or ‘parenting’ as non-exclusivist terms.

In no way do I want to add to the suffering of fathers, co-parents or other parents when they are ignored, mistrusted, misunderstood, or insulted, when they care for their children. Nevertheless, the choice of terminology is also a socio-political statement: asking the mothers to understand ‘parenting’ as inclusive of their experience of pregnancy, birth and lactation, is something else than asking co-parents/fathers to understand ‘mothering’ as inclusive of their care. The former fits with the history of philosophy in which women have been asked to understand male pronouns as inclusive of them, while their particular experience and position was ignored. The latter would be a reversal of this tradition, asking others to make a similar endeavour, which would be a repetition of exclusion. There is no magic wand that can make these differences go away: by prioritizing ‘parenting’, no gender is essentialized or biologized, and parents may feel to be recognized in their commitment to child-care more equally, but we run the risk of ignoring the experiences of pregnancy, birth, and lactation. By prioritizing ‘mothering’ and ‘maternity’, we run the risk of repeating a form of exclusion.

There are, however, several good reasons to uphold the maternal terminology. These reasons are given with the ongoing oppression, exploitation and violence which are explicitly targeted at women and
the pregnable body. Women in general, but mothers in particular, have a long history of being silenced – culturally, philosophically, morally, and politically. Examples include:

- the global marketization and exploitation of women as surrogate wombs\(^3\), a practice that poignantly came to light when new-borns could not be ‘delivered’ to their adoptive parents during the Covid-19 pandemic (see Surrogate Mother Ukraine 2020);
- discrimination against pregnant persons who do not meet the norms of motherhood, like those too young, single, coloured, homeless, migrant, imprisoned, lesbian, transgender, or intersex, and count as ‘failed mothers’ and ‘failed womxn\(^4\) (Macleod et al. 2020);
- the influence exercised by the hospital birth culture, in which technocratic values dominate and the maternity care system is fragmented, leading to biased medical information on risk and pain during labor influencing the mother’s decisions (Newnham et al. 2018);
- exclusion of fertile, menstruating and pregnant people from research leading to inadequate information, undertreatment and overtreatment, which is a form of scientific violence (Rogers 2014, 68);

\(^3\) Stunningly easily one can find providers of surrogate mothers and advertisements that market babies, like the Ukrainian women offered on the website of ‘Surrogate Mother Ukraine’ (2020) that includes ‘Guaranteed Baby Program (Up to a Positive Result)’, ‘IVF Services (Advantages and Success Factors)’, ‘Egg Donors and Surrogacy (Donor Selection)’, ‘Pass The Quiz (Find Out Surrogate Option For You)’. Hewitson (2014) analyses the practice of ‘globalization and commodification of reproduction’ (1) and states that ‘India has become a world leader in the outsourcing of pregnancy, and the industry is estimated to be worth over USD 2 billion a year’ (2). Taking the contexts of both the buying western persons (free to ‘purchase gestational services’, Hewitson 2014, 1) and the surrogacy mothers into account, this ‘commercialization of child-creation …. simply consolidates the elite levels of consumption of wealthy nations and the global rich’ (Hewitson 2014, 1-2). I wonder if we could speak of a ‘fertility drain’ here. See also Mahadevan (2014) for a rich analysis of relational, reproductive freedom, that combines global feminism, care ethics, and post-colonialism.

\(^4\) A term coined by the authors of the reference in order to ‘disrupt normative assumptions about gender and sex’ (Macleod et al. 2020).
the fact that in low income countries in 2019 the overall no. 1 cause of death concerns ‘neonatal conditions’ (WHO 2020);

- economic oppression in the long-term effects of maternity-related job interruptions on mothers’ income (e.g. the inventory study in 10 European countries by Dotti Sani & Lupi 2017);

- the negative effects caused by cultural portrayals in the media of pregnancy and birth as risky, dramatic and painful (Luce et al. 2016). This also raises questions regarding the laboring person being depicted as passive, unknowing, helpless, and dependent upon the medical expert (Faber 2018; Cummins 2020);

- the struggle to have women’s rights acknowledged as human rights, to battle human / women trafficking, to abandon obstetric violence, etc. as fought by the Committee on the Elimination of Discrimination Against Women (CEDAW 2020) of the United Nations Human Rights Office of the High Commissioner (OHCHR 2020);

- rape as a weapon of war, which gained recognition as a violation of human rights in the Nobel Peace Prize for Denis Mukwege, human rights activist and gynaecologist, and Nida Murad, human rights activist, in 2018 (see Nobel Prize 2018).

This list could be much longer and include racist and domestic forms of violence which often intersect with sexual violence against women. But I hope that it suffices to show why I uphold the terminology of ‘mothering’ and ‘maternity’, since it is this specific combination of role, position, physicality, and experience that makes mothers the target of violence in many forms – familial, social, economic, medical, political. The ways in which female sexuality and mothers are still violated makes maternity and mothering an urgent political question.

Outline of my Argument

I proceed as follows. First, I need to keep in mind the multiple challenges mentioned above, and seek my way to focus both on the oppression of female sexuality and (non-gendered) experience of
pregnancy, and the challenges of non-essentialism, non-biologism, non-binarism. For this I resort to a hermeneutical guide, which I have found in two works of art by Louise Bourgeois which will serve as symbols that ‘give to think’ (*donne à penser*, Ricoeur 1959) with regard to pregnancy as well as sexual stereotypes. Her works function in line with Paul Ricoeur’s hermeneutics of suspicion, as images that do not pin down my interpretation, but rather keep me thinking in a dialectic continuum. After my description of these artworks below, I return to them at certain points in my analysis for this purpose.

In this contribution I seek to fill the gap of maternity in care ethics by drawing upon three germinal works in which this experience is key. My selection of these works – Ruddick 1989, Rich 1986, and Keller 2003 – has been guided by the context of this volume, i.e. bringing together care ethics, spiritual traditions and religion. I believe that these works offer substantial insights that allow us to re-include embodied maternity in our understanding of care, while avoiding the traditional pitfalls.

I first characterize the ambiguity of care theory regarding maternity which can already be traced back to the early days of care ethics. Although mothering has been conceptualized in such a way that the embodied experience of pregnancy has almost fallen outside of its scope, it has not been ignored entirely. Especially Ruddick (1989) offers rich material. After that, I turn to an analysis of historical religious depiction of maternity based upon the classic analysis of Adrienne Rich (1986) and the work of feminist theologian Catherine Keller (2003). Keller’s work on Christian theology being a dominology, i.e. a doctrine that worships the ‘dominus’ (Almighty Lord) while suppressing everything connected to pregnant bodiliness – its womb, fluids, uncontrollability, darkness – is not only helpful to deconstruct religious oppression, but also to construct a different theology (Keller 2003). As such, theology of this kind can offer several eye openers to care ethics. It shows how the physicality of pregnancy, birth, and maternity – which should not be ignored in feminist theory – can be taken into account in care theory in morally and politically relevant ways. Specifically, it provides a new and promising
perspective on our being as becoming. I conclude with a modest proposal for including this idea in care ethics.

**Two Images as Hermeneutic Tools**

It has often been pointed out (e.g. Mol 2008; Van Heijst 2011a; Tronto 2017; Vosman & Niemeijer 2017) how the logics of marketization, efficiency, dynamization, and controllability, predominate caregiving. On a deeper level the cultural embodiment of care impacts what is valued and what is neglected or pushed aside (Van Heijst 2011b). Van Heijst’s research into historical care practices and accompanying imaginaries shows how dependency, vulnerability, and helplessness have been substituted by images of healthy looking, happy choosing, and warmly bonding patients, older people and their caregivers (Van Heijst 2011b). These images serve as a ‘mood board’, she argues, that evoke a certain sphere that represents our cultural conceptions of good care relations (2011b, 6).

An artist like Louise Bourgeois (1911-2010) offers provocative and alarming counter images that explicitly aim to break through and break with self-evident ways of thinking. Simultaneously, her works allow for many interpretations, so what it is, exactly, that she calls attention for, continues to be discussed. This makes her work especially suitable for my analysis, which also seeks this openness. I have selected two of her images from the exhibition ‘To Unravel a Torment’ (shown in Museum Voorlinden, Wassenaar, The Netherlands between December 2019 and the museum lockdown in March 2020 due to the Covid-19 pandemic, see Voorlinden 2019-2020). The owner of the images, Glenstone Museum in Potomac, Maryland, has granted permission for including them in this publication. Additionally I offer a brief description based upon the information from the exhibition brochure and in my own words.

The first is *Ste Sébastienne* (1998, ink on Xerox paper mounted on canvas), which is a female variation of the classic depiction of the Christian Saint Sebastian (Fig. 1). He is the informal patron saint of gay men, usually depicted as a beautiful, erotic, young man, bound by his hands on his back and tied to a pillar, pierced by arrows, dying
(murdered) as a martyr. Bourgeois’ Ste Sébastienne neither has arms and hands nor a head. Her body is voluptuous with large breasts, belly and buttocks, which are emphasized by blue hatching lines. The arrows do not pierce her body, but barely touch her in spots that are

Fig. 1: Louise Bourgeois, Ste Sébastienne (1998, ink on Xerox paper mounted on canvas).
made bright red – like a bull’s eye. ‘Ste Sébastienne represents a body under attack’ (exhibition brochure, np, transl. IvN).

The second image is *The Maternal Man* (2008, archival dyes on fabric) and shows the transparent silhouette of a pregnant body from

Fig. 2: Louise Bourgeois, *The Maternal Man* (2008, archival dyes on fabric).
just below the breast(s) to the upper legs (Fig. 2). The belly is slightly swollen and contains a head down, doll-like baby with stretched arms and legs and an umbilical cord. The pregnant body has male genitals: a prominent, aroused penis. Bourgeois ‘often spoke out against stereotypical gender roles and she believed men capable of maternal instincts’ (exhibition brochure, np, transl. IvN).

I have selected these images because they confuse and disrupt. When looking at them, we may become aware of our views, experiences and norms concerning female and maternal physicality, and our traditions concerning gender and religion. In Christian iconography, for instance, male bodies have often been depicted as the object of violence, showing the tools of their martyrdom and their horrifying yet sanctifying deaths. Not only are female saints hard to find, we also hardly come across images of women other than virginal, paradoxically even when a mother. Sexuality in a woman has rather been the grounds for denouncing her altogether, up to the point where throughout Christian tradition (but not only there) the sexual woman as such has been the object of violence (Van der Waal, forthcoming), like Ste Sébastienne. The classic distinction between the ‘mother’ and the ‘whore’ align with the Christian moral definition of permissible and rejected behavior of women, personified in Mary, mother of Jesus, and Eve respectively. Alison Stone (2012) offers a sharp characterization of this distinction:

In her mediating function [between the spiritual and material realms] Mary is emblematic of the good mother. By leading her worshippers towards the spiritual realm, she leads them beyond the material and maternal realm. After all, Mary has been worshipped above all as virgin, miraculously able to conceive and bear a son without even rupturing her hymen. According to the doctrine of the Immaculate Conception, Mary inherits no stain of sin from her own mother Anne: this symbolizes Mary’s freedom from the maternal context of her own childhood. As virgin, too, Mary takes away the sin, and the necessity of giving birth in sorrow and pain, which was supposedly unleashed into the world by Eve. Thus Mary as good mother inescapably opposes Eve as bad woman – the figure of embodiment, passion, sex, lust, and all that is earthly, mortal, fallible and corrupt (Stone 2012, 51).
Ste Sébastienne ‘gives to think’ about embodiment, passion, sex, and lust, and their relevance in moral and political ways. Particularly, Bourgeois thematizes how morality and power are gendered and upheld by religion. She takes a well-known male, Christian symbol, changes its sex and reduces its abilities by beheading and ‘dis-arming’ it. As such her artwork challenges powerful ideas of the ‘good’ woman who preferably lacks the embodied and sexual characteristics, and the ‘bad’ woman who is sexual, sensual, and violated. The Maternal Man thematizes the relationship of maternity and sexuality in a different way. Bourgeois’ work confronts us with the deep-rooted imaginary of female pregnancy that makes it hard to think ‘manhood’ together with ‘maternity’. Her depiction of male sexuality and pregnancy is full of tensions; and leaves these tensions intact. This also confronts feminist theorists and care ethicists who have emphasized the de-sexualized, de-gendered, non-essentialist notions of care. They have stated that care is not founded upon or rooted in the ‘nature’ of women’s capability to give birth, as Gilligan (1982) and Noddings (1984) as well as classical (Christian) thought would have it. The Maternal Man challenges the essentialism of thinking of pregnant bodies as mothers and as women.

These two images serve as hermeneutic guides that underpin feminist and care ethical analyses of women’s and care’s marginalization. Feminism in general and care ethical theory have pointed out that care needs to be detached from (specifically) women’s bodies and instead be connected to a social practice that anybody can (and should) do and take responsibility for. This has led to an ambivalent attitude regarding maternity. In care ethics, maternity is considered both as a non-gendered practice (mothering) that is a source of practical moral thinking and understanding, and as an oppressive ideology of women, called motherhood. In its emphasis on and aiming for

5 With ‘hermeneutic guides’ I refer to Ricoeur’s idea of ‘interpreting’, i.e. ‘to follow the path of thought opened up by the text, to place oneself en route toward the orient of the text’ (Ricoeur 1991, 122). In this case I aim to follow the path not of a text, but of Bourgeois’ artworks, which disrupt essentialist thought and may orient towards a rethinking of maternity.
equality, care ethics was at first rooted in the experiences and prac-
tices of mothering and critique of motherhood ideology (Ruddick
1989, 17), but has increasingly ignored the female body and the
embodied experience of pregnancy. Bourgeois' images help to reconsid-
er both. By selecting two images instead of one, I also aim to keep
the tension alive between the ‘inclusive gender fluid pregnant body’
of The Maternal Man on the one hand and the ‘explicit violence that
is aimed at women’s bodies’ of Ste Sébastienne on the other. Language
can sometimes be in the way when I discuss this tension below, but
I hope to speak consistently of pregnancy as an experience that is not
limited to one gender, while remaining sensitive for sexism in its
many forms that harms women in particular.

**Care Ethics’ Ambiguity Regarding Maternity**

Care ethics, and primarily its Anglo-American body of knowledge,
has insisted on the non-essentialism of caring, with the most notable
exception of Nel Noddings (1984). In her pioneering elaboration of
an ethics of care, which is specifically modelled after the mother and
child dyad, she emphasizes:

> An ethic built on caring is, I think, characteristically and essentially femi-
nine – which is not to say, of course, that it cannot be shared by men,
any more than we should care to say that traditional moral systems can-
not be embraced by women. But an ethic of caring arises, I believe, out
of our experience as women, just as the traditional logical approach to
ethical problems arises more obviously from masculine experience (Nod-
dings 1984, 8, emphasis added).

This view has been much criticized for its essentialism, most promi-
nently by Joan Tronto (1993) who accuses Noddings of a ‘morality
first’ version of caring that leads to a ‘dangerous politics’, lacking
‘strong conceptions of rights’, which leads to the inability to realisti-
cally approach ‘the kinds of problems that caring will confront in the
conceptualize care as a practice: it is something we do that includes
a certain attitude as well as ‘a form of practical rationality’ (Tronto
Ruddick (1989) explicitly defines mothers not as those who have had the physical experience of gestation. Rather:

a mother is a person who takes on responsibility for children’s lives and for whom providing child care is a significant part of her or his working life. I mean “her or his.” Although most mothers have been and are women, mothering is potentially work for men and women (Ruddick 1989, 40, emphasis in text).

In brief: the caring practices of preservation, nursing, and training of children are the practices of ‘mothering’ (Ruddick 1989, 17), and this verb ‘mothering’ should not be confused with the ideologies of ‘motherhood’ in which a mother’s identity is fixed. Mothering signifies what people do and can do, which is not connected to their sex but rather the result of social, moral and political practices. An ideology of ‘motherhood’, however, is oppressive to women in many societies, as ‘[i]t defines maternal work as a consuming identity requiring sacrifices of health, pleasure, and ambitions unnecessary for the well-being of children’ (Ruddick 1989, 29, emphasis in text). Ruddick’s ‘practicalist’ way of thinking (13) helps her to detach sexual identity (‘the female’) from the moral and political thinking that arises from the practices of taking care of a child (‘mothering’). As such, her analysis fits with feminist theory, that emphasizes practices (e.g. in the use of verbs rather than nouns), the social distribution of these practices (and hence there changeability), non-dualism (male-female, culture-nature, reason-emotion, detachment-attachment, etc.), and basic and essential gender equality. As such, mothering starts from the moment of birth, when anybody can start taking care of a child.

However, Ruddick (1989) acknowledges the knowledge gap that both the philosophical tradition and feminist theory have yet to fill,

---

6 Instead of adopting ‘mothering’ as elaborated by Ruddick, I take ‘maternity’ as central for my plea. As Ruddick reserves ‘mothering’ for the practices of child-care, I also take the embodied experience of pregnancy, birth and lactation into account as one that for many mothers has profound impact upon their identity and self-understanding. Throughout this section I adopt Ruddick’s terminology; my own will be developed in the next pages.
i.e. ‘to tell the story of birth again, reconnecting the work of mothering to the female labor in which it begins’ (197). It is her explicit aim to remain loyal to the feminist goal to detach social arrangements from any essentialism and to simultaneously give voice to the birthing experience which (in 1989) was considered as exclusively female. She argues that both philosophy and feminism have fallen into the trap of ‘minimization of birth’, which for philosophers may have rooted in misogyny and for feminists in the fear that women would (again) be defined by it (193), but the effect has been the same: ‘When birth figures in reason’s story only as an absence, the birthing woman is silent’ (196).

Ruddick aims to overcome this silence by telling the maternal story of human flesh, while separating (and reconnecting) the ‘potentially genderless work of mothering from the female birth on which it depends’ (187). In wordings that – in this text – foreshadow Keller’s language, Ruddick points at the ‘fleshly beginnings’ (190) of every human life that involve various uncontrollable fluids not much appreciated:

In many cultures birthing labor, the menstruation associated with it, and at times even breastfeeding evoke disgust. Regarded ungenerously, a woman’s birthing body – bloody, swollen out of shape, exposed in its pain, its otherwise concealed parts broken open – is repellent. [...] The nursing couple is disturbingly sexual, while the milk of a nursing mother is usually out of even the mother’s control, coming when it’s not needed, staining, and dribbling, or “drying up” despite a baby’s hunger (Ruddick 1989, 190).

Another fluid involved in the female fertile body, menstrual blood, is highly associated with uncontrollability and object of social regulation and exclusion. Since menstruation is regarded as some form of ‘incontinence’, it must be bound and hidden (191). Because of their

7 Following Schrupp (2019) and others, I acknowledge that people who identify as ‘he’ or ‘they’ at present can also experience pregnancy. New questions that arise as a result, concerning embodiment and relationality of pregnancy, also need to be addressed, but that falls outside the scope of this contribution.
cycle women have been regarded as irregular, unreliable, unpredictable, and therefore they have been excluded ‘from psychological experiments as well as employment or posts that require stability’ (191). So general female physicality makes her societally unfitting, as she embodies unreliability, a serious threat to classic Reason (3).

What is more, birth undermines the idea of individuality:

The growing fetus, increasingly visible in the woman’s swelling body, an infant emerging from the vagina, a suckling infant feeding off a breast, the mother feeding with and of her body express in dramatic form a fusion of self and other (Ruddick 1989, 191).

However, in birth this fusion – as forming one entity – does not stand in the way of a ‘reciprocal relationship’ of both mother and infant, of two bodies that intimately and closely connect. So in some way there is both a fusion and two-in-relationship. As will also become clear below, the common language of two, one, fusion, or relationship, on which philosophy relies, is under pressure when the topic of pregnancy and birth is discussed; and I consider this a sign of how strong language, concepts, and symbols are permeated and debilitated by the ‘Great Silence’ of maternity to which Adrienne Rich (1986, 84) alludes. So when Ruddick gives language to the ‘history of human flesh under the aspect of natality’ (205) one can see the need to find new, common language for this real-life experience. She applies the unsuitable categories of fusion and self-structuring when she describes birth, for while there is a reciprocal relationship of woman and infant in birth, there is also ‘the dissolution of boundaries – a living being inside another, emerging from another, a body feeding off another body’ (210). Simultaneously the birthing woman is not erased or lost in ecstasy and neither does her self-consciousness dissolve in fusion with her infant:

A birthing woman is bound within herself through unshareable pain and overwhelming sensation […]. Birth is singular, in outcome as well as in process. […] [T]he entangling of self and other in birth – physical union in metaphysical separateness – is a crystallizing symbol not of self-loss but of a kind of self-structuring. The birthing woman is actively herself and her activity is a giving to, a creating of another who could not live without
her. Her creation fails unless the infant takes up the singular life, breathing, crying, kicking, sucking her or his own way into the world. Giver and recipient are engaged in mutual, active, interdependent creation (210, emphasis added IvN).

With a reference to Hannah Arendt, she describes how in the Christian language of “glad tidings” and “a child is born” these physical realities of birth are at best passed over’ (212). The new-born child is quickly covered in clothes and the mother ‘is even less bodily’, ‘sexually innocent’, sitting ‘serenely with her child’ after ‘a birth whose dangers and pains require no mention’ (212). In opposition to such language, Ruddick uncovers and pays ample attention to the physicality of birth, in her history of human flesh.

In general, we may conclude that care ethics has acknowledged the embodied beginning and entanglement of life, of each person’s life, and of all life, in a life-sustaining web, that is called ‘our world’ (Tronto 1993). In emphasizing care’s essence as a practice that is, can and should be performed by all, care theory aims for basic and equal human rights, a ‘caring democracy’ in which all citizens are acknowledged as needing and giving care (homo curans, Tronto 2017), and for an understanding of human identity as relational. However, the experience and practice of pregnancy and birth, which is a great ‘inequalizer’, has received less attention and Ruddick’s description of the bodily creation of new life has received little resonance within care ethics. Instead, the emphasis has fallen upon those doing the caring work, while ‘the birthing mother’ has remained silent and silenced. So, to rephrase a question posed by Catherine Keller (2003, 223): even though care ethics is a great proponent of Arendt’s philosophy

---

8 One might add that it is not only a matter of language. In Christian communities the nativity scene is performed, sung, narrated, depicted, and set up in living rooms, gardens, churches, and public parks, all of which enhance the mystique and saintliness of Mary, while making a farce of actual birth. These depictions might have implications for modern day expectations regarding birth. With thanks to Maureen Sander-Staudt for pointing this out.
of natality\textsuperscript{9}, does it not, in its anti-essentialism and anti-biologism, erase the physicality of pregnancy and birth, the womb, and to ‘dry her up’? And either way, does care ethics sufficiently acknowledge the moral and political consequences of this physicality?

Certainly care ethics does not want to reproduce Ste Sébastienne, meaning that care ethics opposes a subject position in which women are identified by their breasts, belly and buttocks, rather than by the works of their minds and arms, as has traditionally been their harmful fate. However, by walking the same path (non-identification with physicality) care ethics simultaneously runs the risk of reproducing the dualism which places the maternal, fertile, sexual capabilities on a lower scale than the thinking and productive capabilities. This leads to a simultaneous separation of cognition and production from emotional, embodied, and reproductive capabilities. By emphasizing that maternal practices can be performed by all genders, and in its fight against gender stereotypes (\textit{The Maternal Man}), has care ethics not lost sight of the embodied reality and the symbolic image of maternity as mutual, interdependent creation?

In brief, this is a tricky subject. How to defend the bodiliness of pregnancy and maternity as an important – also moral and political – epistemological experience and symbolic image that is relevant for care ethics \textit{without} falling into the dangerous pitfalls of essentialist theorists (from theology, philosophy, ethics and politics)? One answer was given by Ruddick (1989) and Tronto (1993) and can be summed up as criteria that need to be maintained. First, pregnancy is no guarantee nor an obligation for mothering, and the bodily experience of pregnancy can and should by no means be taken as the basis for an ethical capacity to care. Second, neither pregnancy nor maternity should be taken as gendered: fathers, co-parents, trans- and intergenerders, now or in the near future all can be both pregnant and maternal. Third, womanhood should never be reduced to the bodily

\textsuperscript{9} See for an excellent analysis of the concept of ‘natality’ and its implications for care ethics Verhoeven 2003; and a relevant analysis from phenomenology Schües 2008.
capacity of ‘pregnability’ (being able to become pregnant, a term coined by Schrupp 2019), nor should a woman’s biology be considered as of more influence on her behavior than a man’s. For these criteria we can apply Bourgeois’ images of Ste Sébastienne and The Maternal Man. These works challenge (‘give to think’ about) our views of the female body, as lacking the capacities to think and to act, and as an object of lust and violence, and precisely in these characteristics an object of sanctification; and the stereotypical identification of maternity and the female.

A different way of answering the question of how to avoid essentialism is by turning the question around: why have the ideals of non-pregnant and non-pregnable bodies become the standard of human being? This, of course, is not a new question, neither in feminism or care ethics, nor in theology. This approach – why not look at pregnancy? – puts us on the track of two analyses of religions, spiritual tradition, and Christian theology. Both show how primarily the Christian tradition and theology have succeeded in almost completely erasing any reference – in language, imagery, symbolism – to female fertility, making the male, non-pregnable bodies the standard of human and divine being.

Prepatriarchal Female, Sexual and Maternal Divinity

Adrienne Rich’s classic Of Woman Born (1986) traces the many ways in which maternity is marginalized, essentialized, worshipped and penalized, all of which are deeply intertwined. In Rich’s analysis patriarchal monotheism is responsible for the destruction of female divinity of prehistoric times:

Patriarchal monotheism did not simply change the sex of the divine presence; it stripped the universe of female divinity, and permitted woman to be sanctified, as if by an unholy irony, only and exclusively as mother

10 Margaret Urban Walker’s analysis of ‘necessary identities’ also comes to mind, i.e. identities that ‘need to be naturalized, privatized, or normalized, in some combination’, and because those who bear these identities are ‘epistemically marginalized or unauthorized’, they are made unable to contradict or contest their identity (2007, 177).
Rich draws upon abundant archaeological evidence to underscore that in prepatriarchal times the primal power was considered female, not male, stating: ‘In the earliest artifacts we know, we encounter the female as primal power’ (Rich 1986, 93). And she goes on to describe these artifacts:

[T]hey express an attitude toward the female charged with awareness of her intrinsic importance, her depth of meaning, her existence at the very center of what is necessary and sacred. She is beautiful in ways we have almost forgotten, or which have become defined as ugliness. Her body possesses mass, interior depth, inner rest, and balance. She is not smiling; her expression is inward-looking or ecstatic, and sometimes her eyeballs seem to burn through the air. If, as very often, there is a child at her breast, or on her lap, she is not absorbed in contemplation of him (the “Adoration of the Virgin” with the Son as center of the world, will come later). […] She is for-herself even when suckling an infant […]. She exists, not to cajole or reassure man, but to assert herself (Rich 1986, 93-94, emphasis in text).

Rich ponders on what might have been their effect on women:

Let us try to imagine for a moment what a sense of herself it gave a woman to be in the presence of such images. If they did nothing else for her, they must have validated her spirituality (as our contemporary images do not), giving her back aspects of herself neither insipid or trivial, investing her with a sense of participation in essential mysteries (Rich 1986, 94).

Taking Bourgeois’ images of Ste Sébastienne and The Maternal Man as hermeneutical guides enables us to make the following analysis of Rich’s descriptions. The prepatriarchal female divinity obviously sanctified the female body, also and primarily in its capacities to give birth to a new life. But, like Rich emphasizes, this female divinity was a woman in her own right, “for her-self”, not a woman lacking cognitive or acting capacities, nor was her power or her capacity a derivative of a male father, partner or son. Neither was she an object of violence
or intending herself to be primarily an object of admiration or lust for somebody else: she asserted herself. This prevents her from becoming a Ste Sébastienne, that is: an incapacitated (lacking arms and a head) object of violence.

Does Rich then fall into the trap of enhancing the female stereotype, as is questioned by The Maternal Man? This question is harder to answer and urges me to differentiate. In twenty centuries of Christian theology the powerful, self-asserting, female divinity is definitely not a stereotype, nor in other patriarchal forms of monotheism. In popular culture and recent feminism, power-women-and-mothers have been idolized by making powerful icons that may exert a similar empowering force that Rich imagines the prehistoric images may have done (e.g. Beyoncé, Michelle Obama, Jennifer Lopez, Serena Williams). A more nuanced question is how all images run the risk of stereotyping in a similar way. A power-mother or a power-parent on the one hand, and a dependent-mother or dependent-parent on the other, are both a reduction of the ambivalent experience of parental/maternal care itself. Sarah LaChance Adams (2014) offers an alarming analysis of this reduction which leads her to a reappraisal of ambivalence as an achievement rather than an incapacity (64, but also throughout her book). Maternity, she argues, has a Janus head, a head with two faces: the one being mutuality (the child is a part of oneself), the other conflict or separation (the child as being in the way of one’s own identity) (27-72). An emphasis on only one of the two faces has been detrimental to mothers, who were either considered as pathologic (‘mad mother’) or evil (‘bad mother’) when they failed to meet the standard of harmony or independence (1-6). Mothers (and the same goes for other parents involved in childcare) rather have a double bind: they both want to be with and without the child (36).

So as an imaginary, ‘the power-woman-and-mother’ has historically been lost as a divinity, but may resonate in the appealing images shared on social media by a selected group of well-to-do, iconic women. What is of interest to my undertaking here, is that in these recent images certain aspects are repressed. The images of Bourgeois
bring these to light, as they show the tensions involved in the physicality of pregnancy and maternity. What Bourgeois confronts us with are those physical aspects which we tend or are coerced to hide in shame: sexuality, genitals, the womb; and the fluids that are involved, like menses, vaginal moisture, sperm, amniotic fluid, breastmilk. As long as images hide these indispensable yet socially shameful aspects, we might say that they are stereotypical. Whether it is serenity (like Mary’s) or glamour (like Beyoncé’s), the very reality of pregnancy and maternity remains hidden, unnamed, silent and silenced. In theology – perhaps surprisingly – we find critical thought on these aspects that were once glorified as human fertility, and now have become something presupposed yet repressed.

Feminist Theology: Returning to Christian Roots of Oppression

It seems that patriarchal monotheism has not only changed the sex of the divinity and put only the male and the mother as sanctifiable figures in place; it also dispensed with an entire area of associations, to the detriment of women to whom these associations were most closely attached. Feminist constructivist theologian Catherine Keller (2003) has developed a poetic kind of theological analysis in which she uncovers these hidden associations in biblical texts and Christian dogmatic teaching. I consider her analysis relevant because of Christianity’s dominance in culture and politics in many parts of the world, as she shows us what has been covered, how it got there, and how the covering up creates a power structure from which not only women, bodies, and biology suffer, but all that is associated with them. In Keller’s deconstruction of (Christian) religion she reveals how the traces of the womb, the fluids, the uncontrollable, the dark, can still be found in foundational biblical texts. And since these traces are there, Keller minutely shows how they slowly but steadily got to be looked over and ignored, up to the point where they simply had nothing to say anymore.

A reader might ask: why is this concern about the concealment of women’s and pregnant bodies relevant? We know already that women’s sexuality as well as pregnancy are ignored, exploited, suppressed
etc. Should we not rather look at how we can get out of this? I agree that this is definitely something we should aim for: the liberation of the pregnant body and of maternity. However, precisely for this it is important to look at how this oppressive situation came about, not only to see what we have lost, but also what was at stake for those forces that oppressed, ignored, and covered it. Looking at how we got here might be the best strategy to find ways to get out of here. Therefore, I urge to consider the question: how did the female as divinity, as power of fertility and procreation, of transformation, as embodied, fluid, dark, intimate, bloody beginning, come to be a threat, something to overcome and forget, to be ashamed of? And why, the persistent reader might ask, is this relevant for care ethics? The relevance lies in the violence of discarding, I would answer. For it is a violent act to only acknowledge an outcome and not the effort, to value the product but not the raw materials, to honor the result but not pay for the collateral costs paid to get there. This one-sided acknowledgement is also epistemologically relevant, as it leads to a distorted understanding of our reality. As Joan Tronto (1993) has argued, there is a strong connection between the marginalization and neglect of care on the one hand, and the maintenance of power on the other.

Not acknowledging the care one’s existence has required and requires every day is a form of ‘privileged irresponsibility’ (Tronto 1993, 120) that all care ethicists have opposed. Tronto writes:

The connection between fragmented views of care and the distribution of power is better explained through a complex series of ideas about individualism, autonomy, and “the self-made man.” These “self-made” figures would not only find it difficult to admit the degree to which care has made their lives possible, but such an admission would undermine the legitimacy of the inequitable distribution of power, resources, and privilege of which they are the beneficiaries (Tronto 1993, 111).

What has received less attention in care ethics so far is how the privilege and power of so called ‘independent’ humans has been shored by a long tradition of ‘self-making’, or ‘originating from nothing’, or ‘creating out of nowhere’, i.e. the theology of ‘creatio ex nihilo’. For this I turn to Catherine Keller’s work (2003).
Keller takes us back to the very first words of the Jewish and the Christian scripture in which heaven and earth are created, the story of Genesis 1, 1-2. Those belonging to these traditions or to cultures that have been permeated with the artful imageries, will have a general idea of this creation story along lines such as ‘In the beginning there was nothing, but then God spoke ‘Let there be….’ and with these words He created everything.’ Keller asks us to read the source, or to re-read, and see what it literally says. For the first two verses say something else, something that has been hidden and even forbidden.

(1) When in the beginning Elohim created heaven and earth, (2) the earth was tohu va bohu(a), darkness was upon the face of tehom(b), and the ruach elohim(c) vibrating upon the face of the waters (Keller 2003, xv; (a) without form, and void, (b) the deep, (c) Spirit of God, transl. Genesis 1, 1-2, King James Version).

So… there was not ‘nothing’, but there was an earth, there was darkness that was upon ‘the face of the deep (tehom)’, and before God spoke, “his” spirit was already ‘vibrating upon the face of the waters’, so there were also waters. Dark, deep, waters. Spirit upon the face of water. These are the elements that are not only forgotten in common memory but also explicitly covered over by the Christian doctrine of creatio ex nihilo, i.e. the creation from nothing. Tradition – although not from the very start – shows denigration for this text and for all elements mentioned here. And this is the task that Keller (2003) sets herself: to trace the ‘many denigrated faces’ of ‘the darksome deep’ (xvi) that is mentioned in the very first biblical verses. She constructs a feminist theology that acknowledges this darksome deep. But she warns us that her feminism ‘attempts to free itself from the ‘light supremacism’ of Euroamerican ideals’ (xvii), by including all the ‘denigrated faces’ of ‘the dark’: ‘formless monsters, maternal hysteria, pagan temptation, dark hoards, caves of terror, contaminating hybrids, miscegenation and sexual confusion’ (xvi).

The long tradition of theology has been predominantly characterized by the doctrine of creatio ex nihilo. This means that the literal
biblical text of Genesis 1, 1-2 has been turned into a ‘doctrinal hegemony’ (4) which Keller traces back to the third century ACE, of an “origin” that is absolute’ (5). With reference to Edward Said, Keller makes the distinction between this absolute origin and ‘beginning’, which ‘is always relative, contested and historical’ (5). The biblical text, however, ‘knows only of the divine formation of the world out of a chaotic something’ (4), a darksome deep. So this is the movement that the classical official theological teaching has made: instead of considering ‘creation’ as it is described, as ‘creation from chaos’, making creation a relational process, it has turned creation into an act ‘barnacled with stereotypes: of a great supernatural surge of father-power, a world appearing – zap – out of the void; a mankind ruling the world in our manly creator’s image’ (6). Here lie important roots of the long western theological tradition of dominology, i.e. ‘the subjection of the oikos to the dominus’ (6).

The abiding western dominology can with religious sanction identify anything dark, profound, or fluid with a revolting chaos, an evil to be mastered, a nothing to be ignored (6).

The entire idea that God did not create from nothing, but from something, some material (mater-ial) that could be formed or transformed, would entail that God’s power was constrained; an unacceptable idea for an image of God as omnipotent (xvii).11

A theology of becoming: eye openers for thinking maternity

Once these meanings – of ‘creation from chaos’ offered by the original text and of ‘creation from nothing’ given by theological doctrine – are uncovered, Keller aims to construct a theology that she calls

11 The connection between matter and maternity, and prepatriarchal imagery was already described by Rich: ‘Prepatriarchal thought gynomorphized everything. Out of the earth-womb vegetation and nourishment emerged, as the human child out of the woman’s body. The words for mother and mud (earth, slime, the matter of which the planet is composed, the dust or clay of which “man” is built) are extremely close in many languages: mutter, madre, mater, materia, moeder, modder.’ (Rich 1986, 107-108).
a *tehomic theology*, a theology of becoming. She explains that this theology centres around ‘relationality as a beginningless process’ (xvii):

So this becoming theology continues a *deconstruction* of the paradigm and presumption of linear time: the bottom line of origin, the straight line of salvation history, the violent end of the line of time itself. I mark “the beginning” instead as a beginning-in-process, an unoriginated and endless process of becoming: *genesis* (xvii).

Keller also uses poetic words, like these from Hélène Cixous:

‘In the beginning, there can only be dying, the abyss, the first laugh’ (3).

and her own:

Beginning is going on. Everywhere. Amidst all the endings, so rarely ripe or ready. They show up late, these beginnings, bristling with promise, yet labored and doomed. Every last one of them is lovingly addressed: “in the beginning” (3).

Beginning then falls in between the categories, in an ‘alternative milieu, neither being nor nonbeing’ neither a ‘changeless Being who somehow suddenly (back then) created’ nor ‘the pure Nonbeing out of which that creation was summoned’ (12). Rather beginning is a ‘becoming as *genesis*’, creation that is not created by a Creator, but creation that *becomes* in ‘inter-fluencies of creatures – in ecology, predation, genetics, cultures [that] crisscross the abyss of difference’ (12). In other words: a theology that is no longer a dominology, of mastery by the *dominus* and subjection of the *oikos*. Instead, this theology dispenses with the stereotypes of ‘masculine creation vs. the feminine passivity’ (17), the linearity of time where the ‘new future’ is cast in terms of the past, hence ‘liberation [is] granted by the power of a creator God’ (20), the duality of ‘atemporality in God and temporality in creation’ (reference to Ivone Gebara’s ecofeminism, 21-22), and heterosexualism and colonialism which permeates ‘the western theological market’ (according to Marcella Althaus-Reid, in Keller 2003, 22-23).

What, then, does Keller construct as a theology of becoming? I limit my description of her feminist ‘tehomic theology’ to where
maternity is one of the keys, where she seeks to overcome duality and draws our attention to processes, to fluidity, to instability. She opposes ‘the sea of a monistic Presence’ that within theology has been ‘well countered by the tradition of process panentheism – in which chaos replaces the nihil and in which flux, carefully mediated by forms of stability, permanence and order, remains primary’ (218). Central is ‘the third space […] from which both creator and creature emerge as mutual differentiations’, in ‘the co-creativity of creator and creature’ in which:

Creator and creature create, effect, each other; not from a prior nothing but from their shared preconditions. This radical interdependence would take place within the infinite “creativity” (218).

Panentheism is not the same as pantheism and by applying this term Keller remains consistent to her aim: to point at a difference without clear demarcations. Panentheism would mean that the divine is everywhere; nihilism that the divine is nowhere; and theism would clearly delineate ‘the divine’. Not so within panentheism:

The “en” designates an active indeterminacy, a commingling of unpredictable, and yet recapitulatory, self-organizing relations. The “en” asserts the difference of divine and cosmic, but at the same time makes it impossible to draw the line. For is not the line always already smudged? The smudge, the flux, “is” the en, the overlap, of divinity with world, of world with divinity (219).

Therefore

A theology of becoming negotiates its solidities, its solidarities, within the flux. It sketches not disorder but responsive, flexible and therefore steadfast forms of self-organization (216).

This poetic language is more revolutionary than one might think. With it, she deconstructs traditional doctrines, looks for meanings in

---

12 Throughout her work, Keller’s indebtedness to the philosophers Whitehead, Deleuze, Kristeva and Irigaray is obvious, although her views also diverge. She for instance positions her work as a theology and unlike Kristeva and Irigaray Keller does not delineate a female gender. With thanks to Rodante van der Waal for our ongoing conversation on these subjects.
a hermeneutics from within, and constructs a new theology. In her ‘tehomic theology’, ‘solidities’ are negotiated ‘within the flux’, leading to an entire new description of foundational concepts like creation and incarnation. Both creation and incarnation (i.e. the Divine becoming human in the birth of Christ) have previously been thought of as ‘changeless symbols’, as ‘the origin and the climax of the timeline’ (226). Negotiating these ‘solidities’ from ‘the flux’, or from ‘panentheism’, one can no longer uphold these ‘absolutes’, but needs to see them as ‘irreducibles’: ‘Creation is always incarnation. […] And then neither creation nor incarnation expresses a completed process’ (226-227). In other words, when no dichotomy is posited between creator and creation, between divinity and world, but if both are ‘commingled’ and 'self-organizing relations' (219), then ‘incarnation’ cannot be considered as a ‘unilateral will, gift, or love’ but is far more mutual:

If divinity becomes incarnate in endless new forms, the metamorphoses of the creatures cast their effects back upon the divine. The divine and the world form the conditions of each others' becomings. Only, for instance, in the incarnation as the human does this deity become personal. As in the beasts, animal, in the plants, vegetable, in metals, mineral… (227).

This constructive theology of becoming has repercussions for thinking about maternity too. Amidst a tradition of ‘appropriation and annihilation’ (222) maternity has been idealized in service ‘to keep women in their place […], designed to refresh men with a brief resort to the origin’ (223). Feminists, in their resistance to this idealization, have therefore contributed to ‘matriphobia', to mother-hate:

In the guise of anti-essentialism, anti-biologism, anti-natalism, much feminist discourse shares the impatience “to dry her up” (223).

Keller objects to this ‘feminist womb-annoyance and womb-avoidance’ (223) and proposes to take the ‘topos of the deep’ as the heart of a ‘deep-end feminism’, as it ‘de-essentializes any language of sex and gender’ (223). Hence feminists and theologians should ‘bear with a wide range of wombs’ (223) and see how replacing a male
Godness with a maternal Godness is not enough. Rather, this ‘wide range of wombs’ discloses how birth and creation are endlessly continuing. It is the

endless birth [that] reveals and conceals the creativity of a creator who is also born […] a birth without origin or ends – a cosmographic natality […]. And indeed this divine birth, because it is “everlasting,” going on continuously, cannot be appropriated by the religion of a single, exceptional incarnation’ (225).

Drawing upon mystical writings from Christian and Jewish origin Keller constructs the mutual birth of divinity and self, ‘this birth of the self from a maternal Godness inverts itself: the self gives birth to God’ (Silesius, 224), or even ‘a startling triad: the everlasting birth of God; the birth of the world; the birth of the soul’ (Rosenzweig, 224).

These ideas have consequences for thinking about maternity and birth, as well as for theology. Maternity is not personalized, for mothers need to be born themselves (225). Maternity and femininity can no longer be colonized, contained, or enclosed, as this would block every becoming and ‘reinscribe the matriphobic nihil’ (223). If everything and everyone and every divinity is in flux, is becoming; if birth, creation and incarnation are endless; it seems hopeless to ‘try for an impossible permanence and a defining separation’, although ‘humans can hardly avoid the attempt’ (227). Nevertheless, relationality is key to all thinking, both in where we stand when we decide and in what its ultimate effects will be:

If we begin ever again not from nothing but from it all, in media res, any beginning partakes of the irreducible. Something may come of it. This should not reassure us. […] The force of beginning ripples outward, sometimes with a great splash, sometimes a lighter energy, ever dissipating into – it All. As beginnings disperse they imprint the waves of the future (227).

In a way, Keller has broken down all traditional boundaries and vocabulary. The skin no longer contains our being, but all boundaries have become fluid and flexible in a continuous process of becoming, like the permeable membrane between a fetus and a pregnant body.
Time has become a wave instead of a line. Metaphysics and physics are inseparably interwoven. Separations between the sexes, or between human and non-human, have become utterly irrelevant. Here lies an answer to the battle that Bourgeois has fought: against stereotypes, against oppression, against violence. If we harm others/anything, we harm ourselves, for the others are ourselves.13

The way in which Keller deconstructs the doctrine of ‘creatio ex nihilo’ and the theological violence that resulted from the erasure of the dark, deep, the waters, and the spirit, denigrating the elements, the material, the relationality of our beginningless becoming, may resonate with Bourgeois’ ‘unravelling’ of patriarchal power in Ste Sébastienne. How Keller constructs a new idea of being as becoming, as fluid, permeable, mutual creation of both creature and creator, brings to mind the powerful yet fluid and transparent image of The Maternal Man. Both Keller and Bourgeois challenge commonly shared (western, Christian) patterns of power, maternity, sexuality, and normativity. An alternative is offered by Keller: conceiving our ‘being’ as becoming. We now need to see how to include this in care ethics.

Conclusion

Care ethics has rightfully looked at caring practice and emphasized its non-essentialist character. There has, however, been a neglect of the ‘great unequalizer’ in these practices (e.g. in western capitalism in the economic sense, and globally when looking at birth mortality): the physical ability to become pregnant, give birth and breastfeed. Rich’s and Ruddick’s writings on this have not received the attention they deserved from a care ethical perspective. Spiritual traditions have shown that these abilities have not always been suppressed or ignored, but worshipped. Moreover, this has not exclusively been to the

13 The many ways in which the traditional western boundaries and patterns of thought have worked to dominate and destroy have also been pointed out by thinkers on decolonization like Rose (2004), who also makes a strong case for the interconnectedness of harming others and self-harm.
detriment of women, since they were not essentialized by motherhood, but positioned as self-asserting women who also took care.

With this contribution I have looked at spiritual and theological traditions as well as at the development of care ethics. I have intended to avoid the pitfalls of essentializing and of silencing the mother; of idealizing and discarding maternity, and I have aimed to do justice to a non-stereotypical view of humans and life. For this, Ruddick, Rich and Keller have proved valuable. I consider Keller's concept of 'becoming' as inviting to overcome boundaries of ontology, sexism, anthropocentrism, humanism, colonialism. Care ethics can be enriched by the concept of becoming in making its theory less anthropocentric as well as less agentistic. Taking 'becoming' seriously, it might even be one more characteristic of care itself: in 'letting become', in abstaining from intervention in development, in waiting and acknowledging what is growing, transforming, developing in and around us, and developing us, we might be doing exactly what may help our world to become the place where we can live together with all living and nonliving creatures. Hence I propose that we extend Joan Tronto's and Berenice Fisher's definition of care to include the idea of becoming. My proposition follows the example of Maria Puig de la Bellacasa (2017), who amended the definition in order to include posthumanist thought, to expand “our” world and ‘to disrupt the subjective-collective behind the “we”’: care is everything that is done (rather than everything that “we” do) to maintain, continue, and repair “the world” so that all (rather than “we”) can live in it as well as possible. That world includes... all that we seek to interweave in a complex, life-sustaining web (modified from Tronto 1993, 103) (Puig de la Bellacasa 2017, 161).

In conclusion, I propose to extend this version even further, by including the notion of that what becomes and that we need to let become and that seeks to be interwoven:

- care is everything that is done to maintain, continue, letting become and repair “the world” so that all can live in it as well as possible. That world includes... all that seeks to be interwoven in a complex, life-sustaining web (modified from Tronto 1993, 103 and Puig de la Bellacasa 2017, 161).
This new proposal aims to express the idea of becoming and interwovenness as a core of our being. In care ethics, however, we need to pay attention to power inequalities and the way in which ideas may be misused. Hence we cannot accept this idea entirely unconditionally. The first condition is that pregnancy can only be a process of ‘becoming’ if it is acceptable to the pregnant person. The process of becoming of the fetus turns into an instrument of torture when the pregnancy is forced upon the woman or person, and of oppression when her life is organized in such a way that she neither physically nor mentally can create the required life-sustaining conditions for this becoming. Secondly, and in line with the previous condition, pregnancy needs to be understood as a process of becoming of two and more people. At the minimum, pregnancy involves the fetus and the pregnant person. Often there are intimate others involved too, who become parents (co-, grand-, step-, or adoptive parents), uncles and aunts, brothers and sisters. Their lives go through a process of becoming too, as through birth their identity changes. Thirdly, there is always the larger relational web that needs to be involved as the complex life-sustaining web, including the creation of safe and respectful conditions for pregnancy, birth, and child-care. And finally, any process of becoming can only take place in a world in which all life can find air to breathe, water to drink, food to eat.

Acknowledgements

I want to thank my colleagues and co-editors of this volume for their valuable comments on earlier drafts of this paper: Vivianne Baur, Pieter Dronkers, Maurice Hamington, Carlo Leget, Marieke Potma, Maureen Sander-Staudt, Joan Tronto, Rodante van der Waal, Els van Wijngaarden. Special thanks go to the Catherina Halkesfonds for providing a fellowship which allowed me to write this paper.

Works cited


Van Heijst, Annelies. 2011b. Ontfermimg voor Dummies. Zorgverhoudingen in een religieus verleden en een pluriform heden (Mercy for Dummies. Care relations in a religious past and a pluriform now); inaugural speech. Tilburg: Tilburg University.
‘With Prayer from Your Loving Father’
Men, Masculinity, Faith, and Care

Martin Robb

‘With Prayer from Your Loving Father Charles Edward. Love and Kisses from all.’

So ends a letter written on 18 January 1916 by my great grandfather Charles Edward Robb to his son, Arthur Robb, my grandfather, a Private in the Royal Fusiliers stationed at Corunna Barracks in Aldershot, England, awaiting embarkation to the Western Front in France. The letter is one of a series of eight, written by Charles on a more or less weekly basis between 6 January and 24 February 1916. Sadly, only one side of the correspondence has survived, and any letters that my grandfather may have written home have been lost.

The letters came into my possession after my grandfather’s death, and as I read and reflected on them, I came to see them as a potentially rich resource for my academic research on fatherhood and for my continuing exploration of issues concerning men, masculinity and care (Robb 2020). The letters presented a rare example of texts that captured a man ‘doing’ fathering, albeit under the unusual conditions created by war. Moreover, these letters were rare in another sense. According to Michael Roper (2010), in his study of the emotional struggles of young soldiers in the First World War, letters from home to those serving in the conflict were overwhelmingly from mothers to sons, with fathers only occasionally acting as correspondents.

Even more unusually, my great grandfather’s letters appeared to demonstrate an affective fathering practice and an expressive
masculinity, as exemplified by the words quoted above, that seemed out of keeping with conventional notions of how a sixty-five-year-old Englishman, born and raised in the Victorian era, would have communicated with his nineteen-year-old son. Just as importantly, it was impossible to overlook the fact that the letters were pervaded by a powerful sense of my great grandfather’s Methodist Christian faith, both in terms of their language and, more importantly, their moral concerns. Indeed, the way that Charles performed his fathering identity and expressed his masculinity in these letters seemed inescapably bound up with that faith.

In this chapter I want to suggest that an analysis of my great grandfather’s letters might provide some insight into the potential of religious faith as a resource for the development of caring masculinities, and more generally in support of an ethic of care. Moreover, I will argue that this might contribute to a re-evaluation of the relationship between religion and care theory, and to understanding how religious faith can help to supply what some have identified as a motivational or normative vacuum in care ethics (Hollway 2006; Vanlaere and Gastmans 2011).

*Fatherhoods past and present*

Research on fathering has blossomed in recent years, growing out of second-wave feminist research and a wider re-evaluation of gender roles and identities, and coinciding with changes in the experience and practice of fatherhood and the emergence of a new model of engaged fathering. A number of landmark academic studies of fathering have appeared, including those by Doucet (2006), Dermott (2008), Miller (2010), and Ranson (2015). This expansion of fatherhood research has run alongside a growth in the study of men and masculinities more generally, again building on feminist research on women’s lives and experiences (for general overviews, see Hearn and Connell 2005; Kimmel and Messner 2010).

It could be argued that much recent writing on fatherhood, and indeed a good deal of popular rhetoric surrounding the so-called ‘new fatherhood,’ has defined itself by contrast with an image of how
fathering was supposedly done in the past, presenting a picture of fathers in previous generations as emotionally distant disciplinarians, unengaged in their children’s day-to-day care. Indeed, much research with contemporary fathers appears to confirm this stereotype, with men often comparing themselves favourably with their own fathers and grandfathers. As one participant in my own research on young men’s attitudes to fatherhood said, ‘As long as I’m nothing like my dad, I’m happy’ (Robb 2020).

However, recent scholarship has begun to undermine these stereotypes, providing a more nuanced picture of fathering in the past (see for example, Strange 2015; King 2015). An emphasis on the plurality and mutability of masculine identities (Connell 1995) has contributed to an understanding that, just as present-day masculinities and fathering identities vary on the basis of class and culture, so men’s identities and practices in the past were also complex and diverse. At the same time, academic research has also begun to challenge simplistic associations between religious faith and hegemonic masculinity. The conventional assumption has been that Christianity, in particular, has served throughout its history as a bulwark of patriarchy, acting to bolster societal strategies to keep women in their place and to fix conventional roles within the family (Hamington 1995). An example of research that has challenged this received notion is the work of the historian of masculinity, John Tosh (2005; 2007), whose exploration of the influence of religious belief, and specifically Methodism, on men in the nineteenth century has uncovered the ways in which many men in this period were closely involved in the care of their children and manifested a form of masculinity at variance with conventional images of men of that era. Moreover, Tosh has shown that it was precisely these men’s Christian faith that was the inspiration for their engaged fathering practice and expressive masculinity.

**Methodism and masculinity**

Founded by John Wesley in the eighteenth century as a revivalist sect that eventually broke away from the Church of England,
nineteenth- and early-twentieth-century Methodism was distinguished by its overt emotionalism, and by an emphasis on the loving Fatherhood of God and a personal relationship with a loving Jesus, as well as by the involvement of lay people in both preaching and self-government (Hempton 2006). Radical historians, such as Edward Thompson (2013), have taken a generally negative view of Methodism’s social influence. However Tosh (2007) has argued, on the basis of his own research, that ‘Methodism furnished the materials for a feminine, as well as a masculine view of the world, and even for a measure of challenge to patriarchal authority.’ The relevance of Tosh’s argument, and his research findings, for understanding my great grandfather’s wartime letters, will become clear in what follows.

My great grandfather Charles Edward Robb was a devout Methodist and lifelong teetotaller. Born in 1851 in Soho, London, the son of a law stationer’s clerk and of a mother who died shortly after giving birth to him, he was raised in the East End of London by his father and stepmother, who were themselves practising Methodists. He married Louisa, the daughter of an umbrella-maker, and they lived initially in Whitechapel, where Charles worked as housekeeper to the Wesleyan Methodist Mission. Charles and Louisa had eight children who survived beyond infancy, of whom my grandfather, Arthur, born in 1897, was the youngest. By the time of the 1901 census, the family had moved out to the expanding working-class suburb of East Ham, on the London-Essex border. In 1902, Charles suffered the first of three bereavements, when his eldest son, also named Charles, a Royal Marine, died on active service at the age of 23. Three years later, Charles experienced two more losses within months of each other. In April 1905 his sixteen-year-old daughter Marion died from heart failure, and a few months later his wife Louisa died from typhoid fever at the age of 48, leaving Charles to raise his surviving children alone. It might be argued that Charles’ experiences of loss and of being thrown into the role, unusually for the period, of a single father, helped to shape his masculine identity and fathering practice. However, I would suggest that the particular
character of his Methodist Christian faith was of at least equal importance in that process.

‘A True Christian Manliness’

An analysis of my great grandfather’s letters reveals the close connection between his religious faith, his fathering practice and his masculine identity. In terms of their subject matter, the letters are something of a mixed bag, as one might expect from family correspondence, combining the serious with the trivial, the moralistic with the mundane. They include news from home and some practical business about missing items of clothing and subscriptions that need to be renewed. However, the letters also include more explicitly exhortatory sections, and there are long passages in which Charles confronts the issue of Arthur’s moral and spiritual wellbeing. For example, in a letter written on 6 February 1916, Charles’ concern about his son’s spiritual welfare is initially framed in terms of surprise that he is not planning to come home on weekend leave. The letter begins:

My Dear Arthur

I received your letter yesterday acknowledging the Undershirt but was rather surprised to hear that you were not coming for the weekend. I do not know under what rule or regulation the passes are given in your section but I do hear that in most sections they are allowed by the Officer in Charge to a certain number of the best behaved and most attentive to duty during the week. If this is the case in your section it does not appear to be altogether as it should be with you otherwise, I am sure that you would have been able to obtain leave by this time.

I have been making enquiries from two or three who are able to inform me about the Fusiliers, and they have made me almost to wish that you had not joined in that Regiment.

There then follows a long paragraph (somewhat abbreviated below) in which Charles employs explicitly religious language to warn against the temptations presented by life in the army:

Dear Arthur do take some advice from me, before you left home I begged of you not to associate yourself with bad companions. Remember you are an abstainer from all alcoholic drinks. Stick to the Temperance whatever it may cost you, likewise avoid in every way card playing or gambling, betting and
every means of dishonesty... I beg of you Arthur do not be led into following
these awful Soul destroying habits. I am very much afraid that you have not at
all times enough courage to say No when you are surrounded by Temptation.
You must Pray and Pray sincerely and earnestly and keep a Watchful eye wide
open so that you can clearly see there is Temptation and do not be in the least
afraid to meet it and Resist. Not alone in your own strength but keep your
memory clear that God is Omnipresent always near you, always ready to hear
your Prayer, always willing and anxious to Help you to persist. So I beg of you
Arthur not to be negligent with Prayerfulness and Watchfulness.

This is followed by a short paragraph in which Charles advises his
son to recall the words of a favourite hymn as a way of overcoming
temptation:

If you cannot think of words at the moment that you feel depressed try and call
to mind some Hymn verse that you know like this Shun evil companions. Bad
Language Disdain – God’s Name hold in Reverence. Nor take it in Vain. Be
thoughtful and earnest. Kind hearted and true Look ever to Jesus. He will carry
you through.

These passages are fairly typical of the letters as a whole. My analysis
of them leads me to conclude that they are driven by an inner strug-
gle on Charles’ part, to resolve a conflict between his religious beliefs
on the one hand, and his son’s current situation as a soldier in the
British army about to go off to war. Another way of expressing this is
to say that the letters seek to reconcile two vocations, one secular, as
a soldier for King and country, and the other spiritual, as a warrior for
Christ, in both of which my conservative, patriotic Christian great
grandfather believed. However, we might also reframe this opposition
in terms of a tension between two very different ideals of manhood:
the masculinity of the army culture, in Charles’ view characterised by
drinking and gambling, and the Christian manliness of Arthur’s
Methodist upbringing. The letters are constructed in such a way that
they move towards an attempted resolution of this conflict. A clear
example of their attempts at resolution is offered by the way in which
a number of the letters close, with a ritual bringing together of the
two vocations. For example, the letter of February 1916 already cited
ends as follows:
Now Arthur I beg you to read this letter and give it all the consideration you can and Do your very best to make a True Soldier not only for your King and Country but try and enrich your Loyalty by Faithfulness and whole Heartedness in your Service to God and His Son Jesus Christ who Loves you.

There are similar examples in other letters:

God Bless You and make you a good Soldier of Jesus Christ so that it may Blend with your life as a Soldier for your King and Country.

The word ‘blend’ is significant here, as it is precisely a blend between two seemingly irreconcilable visions of manhood that the writer is striving to achieve in these letters.

At the same time, however, I would suggest that my great grandfather’s Methodist Christian faith provided him with two very different registers for performing fatherhood and masculinity. One is certainly the register of moral exhortation that we see on display in the long passage already quoted, with its insistence on courage, self-reliance and persistence. There are similar examples in other letters:

Try and do all and everything of your Best in all things and do not forget the best way to conquer difficulties that seem almost impossible and are likely to conquer you is to use your own energy, capability, goodwill and endeavour.

I hope that you are getting on well and endeavouring in every way to do your very best. You are now placed in a position that everything you are told to do must be done immediately without any excuse for not doing it so keep up your courage and at every difficulty that comes in the way keep smiling and at all risks persevere until you conquer it Be active Be prompt Be careful Be willing Be diligent and then you will get on.

In these extracts we see one aspect of Nonconformist spirituality on display: the Puritan emphasis on individual effort and self-mastery, familiar from Bunyan’s Pilgrim’s Progress and Max Weber’s famous analysis of the Protestant work ethic (Weber 2013). These particularly masculine virtues also found expression in what became known as the ‘Christian manliness’ movement of the late nineteenth and early twentieth centuries, associated with the writings of Charles Kingsley and others, and often aligned with patriotic expressions of
support for Britain’s imperial ambitions. Norman Vance (1985) writes that this Victorian ideal of manliness ‘brings with it connotations of physical and moral courage and strength and vigorous maturity… The manly man may be patriotic, generous, broad-minded, decent, chivalrous and free-spirited by turns’. According to James Mangan and James Walvin (1987), for the early Victorians this ideal ‘represented a concern with a successful transition from Christian immaturity to maturity, demonstrated by earnestness, selflessness and integrity’, whereas ‘to the late Victorian it stood for neo-Spartan virility as exemplified by stoicism, hardiness and endurance – the pre-eminent qualities of the famous English public school system’. However, I would argue that a belief in these ideals was by no means confined to the public school educated upper classes. This vision of Christian manliness was also inculcated in working-class young men through organisations such as the Boys Scouts (to which my grandfather Arthur belonged) and the more explicitly Christian Boys’ Brigade, with the latter’s emphasis on ‘the promotion of habits of Obedience, Reverence, Discipline, Self-respect and all that tends towards a true Christian manliness’ (Meinhart 2006; Adonis 1995).

‘With Abundance of Love and Kisses’

However, it is evident from the letters that his Methodist Christian faith also provided Charles with another, quite different register for performing fatherhood and masculinity. John Tosh (2007) has written about the ways in which Methodism provided a language that enabled Victorian men to be emotionally expressive, with its emphasis on the unconditional love of God and an intimate personal relationship with a loving Jesus, often imagined in almost feminine terms. Tosh writes about one of the men in his case studies, a Methodist farmer from Lincolnshire, that his ‘fatherly involvement’ was ‘not what we might expect of a Victorian father, much less a devout Methodist’ and that fatherhood was integral to this man ‘sense of his divinely ordered place in the world, and inseparable from his masculine self.’

This more expressive masculinity is evident in the way my great grandfather signs off his letters, ending one with love from ‘your
anxious and Loving Father’ and adding two kisses. Another letter closes with the words quoted in the title of this chapter: ‘With prayer from your Loving Father Charles Edward’ and ‘Love and Kisses from all’. Other letters in the series sign off in a similar fashion, with references both to the divine love of Jesus Christ ‘who loves you so much’ (24 January), ‘Jesus Christ who loves you’ (6 February), and to paternoal love ‘with abundance of Love and kisses from your father’ (10 February), ‘With love and kisses from your loving Father’ (18 February), and so on. In these and other examples, Charles’ own affection for his son is interwoven with a vision of a loving Jesus and the loving Fatherhood of God.

These examples suggest that another kind of masculine identity was available to men of this era via their religious faith, besides the stereotype of the austere and self-reliant puritan or the exemplar of robust Christian ‘manliness’. The Christian, and specifically Methodist, image of the loving fatherhood of God, and its emphasis on a loving relationship with Jesus, provide Charles with a model for his own fathering, and at the same time the emotional spirituality of Methodism offers him a language in which to openly express his love for his son. I would suggest that Charles’ Methodist Christian faith was the key resource both for his appeal to a conventional Christian ‘manliness’ based on courage, persistence and effort, and to a perhaps more surprising and expressive masculinity and caring fathering practice. These two ideals operate in tension with each other throughout my great grandfather’s letters.

I had first-hand experience of some of these same tensions, growing up in a Methodist family in southern England in the late 1960s. My parents continued the family tradition of devout Methodist practice: my father was a lay preacher and my mother a Sunday School teacher and church pianist. At the age of eleven I was enrolled in the Boys’ Brigade company that had just been launched at our church. We dressed in a pseudo-military uniform which was inspected on weekly parade nights, when the first activity of the evening was always drill (marching in formation). We were also required to attend a Sunday Bible class, led by officers who had all experienced military
service and whose preaching emphasised effort and self-reliance and encouraged us in ‘all that tends towards a true Christian manliness’. By contrast, in Sunday School we sang sunny choruses that presented a softer, more affective version of Christian belief:

Wide, wide as the ocean
High as the heavens above
Deep, deep as the deepest sea
Is my Saviour's love.

In church, we sang the hymns of Charles Wesley, with their emotion-filled words about God’s infinite love and the sacrifice of Jesus:

Amazing love! How can it be
that thou, my God, shouldst die for me?

In other words, both of the ideals of Christian manliness on display in my great grandfather’s wartime letters were also in evidence in my own childhood half a century later. I’ve written elsewhere (Robb 2007) about the ways in which, for me, these versions of Christian masculinity increasingly came into conflict with the appeal of the new identities that were becoming available for young men in the late 1960s.

Of course my great grandfather’s letters reflect the experience of only one man, but taken together with the research of Tosh and others, they suggest that even a hundred years ago certain forms of Christian spirituality were able to act as a powerful resource for the expression of a caring masculinity. Nor, I would argue, was this confined to Methodism: an argument could be made that Catholic devotion to the Sacred Heart of Jesus, which was also at its zenith during this period, as well as the maternal image of the Virgin Mary, also provided models of divine love and an emotional spirituality which could provide a resource for care (see Hamington 1995). Based on my analysis of my great grandfather’s letters, I want to argue that certain forms of Christian faith are able to act as resource for an emotional and expressive form of fathering and a caring masculinity. I would suggest that this offers a challenge to care ethics, and to its general
scepticism about the value of religious faith as the basis for an ethic of care.

*Faith, Imagination and Care Ethics*

While a number of care ethicists have clearly been influenced by a broadly religious perspective (see, for example, Leget 2017; Groenhout 2004; Vanlaere and Gastmans 2011), the mainstream of care ethics, and in particular the influential feminist branch of care ethics, has remained mostly sceptical about the potential of religious faith as a resource for an ethic of care. There are certainly occasional acknowledgements of the positive role of religion in the writings of feminist care ethicists. For example, Joan Tronto (1993) makes brief reference to caring practices among black Americans, informed by ‘a deep commitment to caring that emerges out of the African American religious tradition’ (83). However, in general feminist care ethicists have tended to argue that religion, and in particular Christianity, is unable to provide a foundation for care ethics.

Virginia Held (2006) maintains that care ethics ‘need not invoke religious beliefs that carry divisive baggage’ and should avoid basing itself on ‘the moral claims of particular others.’ Instead, she seeks a basis for care ethics in ‘moralities based on reason’ which can attract universal support. Elsewhere she writes: ‘Valuing care is entirely independent of any religious foundation, and is the stronger for this, since those not sharing a given religious tradition have few reasons to attend to argument that appeal to that tradition.’ This scepticism about the positive potential of religious belief as a resource for care ethics is based on a general feminist hostility to the perceived patriarchal nature of established religion. Held argues that ‘the ethics of care as a feminist ethic is wary of existing traditions and traditional communities’ since ‘virtually all are patriarchal.’ Held’s wariness of religion is shared by other prominent feminist care ethicists, with Nel Noddings (2013), for example, arguing that ‘religious organisations often tend to diminish the ethical ideal’ and that ‘the frequent insistence on obedience to rules and adherence to ritual contributes to
the erosion of genuine caring,’ adding that women ‘should know what the world’s great modern religions have done to them.’

However, by contrast with Held and some other feminist care ethicists, I would argue that religious faith, such as that exhibited by my great grandfather in his wartime letters, can in fact supply something to an ethic of care which is lacking in appeals to universal reason. In her assessment of Joan Tronto’s care ethics from a psychoanalytic perspective, Wendy Hollway (2006) draws a parallel with Andrew Dobson’s (2006) critique of the principal weakness that he perceives in the ideology of cosmopolitanism: in that ‘it is based on a “thin” definition of what connects people together in a common humanity,’ leaving ‘a “motivational vacuum” in explaining how people might meet universal political obligations’ or, Hollway adds, ‘in my terms, a lack of a theory of subjectivity that accounts for people’s capacities to care (or not).’ Hollway argues that Tronto fails to ‘problematisate the capacity to care,’ drawing instead on ‘a…simplistic model of social learning to account for moral conduct, reinforced with the idea that practice is a sufficient conveyor of moral values.’ Concluding that ‘the naturalisation of care is a blind-spot in the literature about care ethics,’ Hollway suggests that Tronto ‘remains on the territory of the enlightenment subject of moral rationality that was so influential, through Kant, in traditional moral and ethical theory, a perspective that she explicitly criticises,’ and on voluntaristic notions of the ‘intentional rational subject.’

Hollway’s criticisms of care ethics are echoed by Linus Vanlaere and Chris Gastmans (2011), who cite Selma Sevenhuijsen’s (1998) questioning of ‘the naturalness with which care ethicists assume that positive care related conditions are evoked in a moral subject through contact with a person who is in need of care’ and her doubt as to whether ‘something like a “spontaneous” caring response really exists when one sees someone in need of care.’ The authors conclude that ‘care in and of itself is not very normative’ and point to what they regard as a ‘normative vacuum in care ethics,’ which has some parallels with Hollway’s perception of a ‘motivational vacuum.’
In considering the potential of religious belief to supply this ‘motivational’ or ‘normative’ vacuum or absence in care ethics, it might be helpful to have recourse to Maurice Hamington’s work on the role of imagination in care. Hamington (2004) has argued that ‘imagination plays a crucial role in animating morality’ and that ‘one function of imagination is creating the possibility for empathy.’ Writing about care ethics and poetry, Hamington and Rosenow (2019) suggest that ‘caring is imbued with imaginative thought’ and that ‘imagination plays a crucial role in understanding the one cared-for and the context they are in.’

I agree that there is a need for what we might describe as an imaginative superstructure in order to inform and motivate care, going beyond appeals to universal reason. And I want to suggest that certain forms of religious faith might be able to supply this imaginative dimension to care. While it is true, as care ethicists have argued, that it is relationships that provide the initial motivation to care, the particular character that care takes is determined by the imaginative framework within which those relationships are viewed. For example, while my great grandfather’s paternal relationship with his son was certainly the basis of his fathering practice, it was his religious faith that in large part determined the overtly affective and ‘caring’ nature of that practice, as seen in these letters.

In the case of my great grandfather and his fatherly care for his son, one gets the sense of a whole imaginative dimension of religious belief animating and inspiring his care. Methodism, grounded in a belief in a fatherly God of love and a loving, emotion-filled relationship with Christ, was able to create, for men of the nineteenth and early twentieth centuries, an intellectual and emotional framework that motivated and infused their caring fatherhood and affective masculinity.

**Conclusion**

My great grandfather’s wartime letters to his son offer just one example of the positive impact of certain forms of religious faith on men’s
capacity to care, and its role in nurturing a caring masculinity. More work is needed to untangle the complex connections between particular forms of religious belief, gender identity and caring practice. It is to be hoped that this might contribute to a re-evaluation of the potential of faith for inspiring and motivating an ethic of care.

Works cited

Theologically Motivated Conversion Therapy and Care Epistemology

Steven Steyl

I. Introduction
There is a general consensus amongst psychologists and psychotherapists regarding the ineffectuality and harmfulness of conversion therapy (also referred to as ‘reparative therapy’). The American Psychiatric Association (APA) writes for instance that:

Efforts to [change homosexual orientations] represent a significant risk of harm by subjecting individuals to forms of treatment which have not been scientifically validated and by undermining self-esteem when sexual orientation fails to change. No credible evidence exists that any mental health intervention can reliably and safely change sexual orientation (Scasta et al. 2013).

In spite of this consensus, the practice persists both legally and illegally across the globe (see, e.g., Bartlett, Smith, and King 2009; Karten and Wade 2010; Jones and Yarhouse 2011; Clucas 2017; Ryan, Toomey, Diaz, and Russell 2020). The United Nations Human Rights Commission (UNHRC) reported in 2020 that conversion therapy is practiced in at least 68 states, and that, in 2018, 698,000 LGBT individuals in the United States alone had been subjected to conversion therapy at some point in their lives (UNHRC 2020). Caregivers from myriad backgrounds continue to opt either themselves or others into conversion therapy on an immense scale.

Many care theorists will oppose these practices outright, not simply because of its apparent ineffectuality, but also because it is in some sense immoral. Yet it is unclear what sorts of ethical misdeed


caregivers perform when they volunteer themselves or others for conversion therapy. Why is it wrong to submit a care-recipient for conversion therapy? What sorts of mistakes are being made in the caregivers’ ethical reasoning? Which shortcomings, if any, does such a caregiver exhibit? Suppose a child in my care approaches me and asks to undergo conversion therapy – how do I wrong them in permitting this? Unlike ethicists in other camps, care ethicists have not taken the provision of theories of right and wrong action or a decision-making procedure to be the (or even a) chief philosophical task (Ben-Porath 2008; Tronto 2012; Collins 2015, cf. Slote 2007; Steyl 2021). Here, I help fill this lacuna, not with a decision-making procedure through which right action is to be algorithmically calculated, but with an explication of the epistemic dispositions good caregivers possess. A caregiver’s lacking one or more of these is, I suggest, often the reason why care-recipients are made to undergo conversion therapy – good care requires sensitivities to needs and relations, and these dispositional shortcomings preclude those sensitivities. In exploring these dispositions, this paper offers several contributions to the literature on applied care theory. The first is to add to the growing discussion of care epistemology, whose momentum remains disproportionate to that of moral epistemology more generally, and to show why it warrants greater attention. The second is to add to the sparse discussion of right and good action in care ethics by exploring one dimension thereof. The third is to proffer a care ethical analysis of theologically motivated conversion therapy, one of many morally concerning phenomena which care ethicists have yet to examine in sufficient detail.

I begin in Section 2 with empirical data about conversion therapy, the harms it inflicts, and the reasons on which caregivers act when they opt for it. I argue that conversion therapy is far more likely to harm than to benefit, but I note that caregivers view the harms inflicted by conversion therapy not as ends in themselves but as means to less proximate ends which are not themselves objectionable. The fault thus lies not in the ends, but in the means thereto. In Section 3, I unpack some of the epistemic dispositions necessary to
avoid such erroneous means-ends reasoning, starting with an argument for preferring the language of dispositions over that of neighbouring epistemological concepts. Following this, I discuss attentive, evaluative, and pragmatic dispositions which protect against failures such as the infliction of conversion therapy upon care-recipients. On the account presented here, good caregivers require each set of dispositions if they are to reliably care successfully, and conversion therapy offers a case in point.

2. Conversion Therapy

Though several competing definitions are in circulation, conversion therapy is understood here in perhaps its most familiar sense: as the set of practices intended to sexually reorient individuals whose sexual orientation is deemed in some way undesirable (see, e.g., Haldeman 1994; Miville and Ferguson 2004). Usually, the aim is to eradicate homosexual tendencies and instil heterosexual ones, perhaps with the goal of heterosexual marriage and/or procreation. On this definition, there is no necessary connection between conversion therapy and religious belief, and there is conceptual space for the variety of non-theological justifications offered for the practice (see, e.g., Beckstead and Morrow 2004; Karten and Wade 2010; Meanley et al. 2019). Some, for instance, opt themselves or others into conversion therapy for fear of stigma or abuse, or because they feel alienated from the specific sexual/gender group to which they belong (Shidlo and Schroeder 2002). Among other things, individuals might seek or be subjected to conversion therapy for the sake of ‘family honour’ or to rectify ‘hormonal’ pathologies (UNHRC 2020). Conversion therapy is a complex phenomenon driven by a variety of factors. Many attempts to ‘cure’ non-heterosexual inclinations are theologically

---

1 I ought to note at the outset (and shall note later on) that I do not believe that non-heterosexuality is either immoral or pathological. Commentators like Corvino (2013) have convincingly argued, in my eyes, that neither claim is true. Even if the arguments of heterosexists held water and non-heterosexuality was immoral/pathological, however, conversion therapy would remain impermissible for sheer ineffectuality (as the Kantian adage has it, “ought implies can”).
motivated, however (Spitzer 2003; American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation 2009; Karten and Wade 2010; Drescher 2015), and it is these on which I shall focus.

Conversion therapy is also methodologically diverse. Psychotherapists employ a variety of treatments, ranging from discussion sessions which aim to convince the participant that their sexuality can and should be ‘rectified,’ to exorcisms which aim to expel demonic forces, to physical and mental harm bordering on torture. Here I wish to address only those on which psychotherapeutic research has been conducted (though I suspect those findings will also be reflective of unresearched treatments). I do not limit this research to either self-imposed or paternalistically imposed conversion therapy, or to specific age groups or legal status. The analysis here would include a case where, say, an ‘autonomous’ adult surrenders herself for conversion therapy, and also one where a child is volunteered for conversion therapy by a guardian.

My overarching aim is to explain some of the epistemic missteps which lead caregivers to conclude that conversion therapy is morally good or permissible. Section 2.1 thus offers an account of the harms conversion therapy inflicts, and Section 2.2 argues that these harms are not inflicted in pursuit of the wrong ends, but merely because of epistemic mistakes about the means thereto. Section 3 then goes on to explore the dispositions which correct our inclinations to make the missteps identified in this section.

2.1 The Harms of Conversion Therapy

Unsurprisingly, a set of practices as diverse as conversion therapy also impacts its subjects in a variety of ways. This section presents an overview of these effects, beginning with an account of the numerous harms which conversion therapy is likely to engender. There are many ways in which we might harm one another. Here I divide the set of possible harms into two categories: physical harms and psychological harms. Philosophers have pondered the nature of harm since antiquity, but the classificatory scheme adopted here seems
particularly well-suited to the phenomena at hand because (a) it accounts for the most common cases, and (b) it highlights and is especially suitable for analysis of a general turn from physically harmful treatments (which have not of course disappeared altogether) towards more psychologically harmful treatments. It also considers some of the benefits conversion therapy’s proponents cite in defence of the practice, and explores the role these ought to play in caregivers’ moral deliberation. This lays a primarily empirical foundation for the project undertaken in Section 3, a normative analysis of some of the epistemological and dispositional shortcomings caregivers might exhibit in submitting themselves or others for conversion therapy.

a. Physical Harms

The first sort of harm is physical. Physical harm here includes the infliction of injury or physical pain on subjects of conversion therapy. In a brief overview of the history of conversion therapy, Beckstead writes that some:

Underwent surgical methods (e.g. spinal cord cauterizations, clitoridectomies, castration, ovary removal, and lobotomies) to eliminate their unwanted sex drive. Some individuals hoped that convulsive methods (e.g. epileptic seizures via electric shocks or drugs) would disrupt the brain “traces” created by repetitive sexual thoughts and non-traditional gender mannerisms. Some tried hormonal methods (e.g., radiation or steroid treatments) to reduce homosexual urges brought on by a supposed glandular hyperactivity or “balance out” non-traditional gender expression (2012, 122, see also Haldeman 1991; Meanley et al. 2019).

Aversion therapy was an especially prominent treatment in the last century, involving “punishing homosexual desires through covert sensitization, electric shocks, nausea inducing liquids, shame, threats of beatings, and rubber bands snapped around the wrist” (Beckstead 2012, 122-123). There is no genuine disagreement that these therapies are harmful in the sense used here – the treatment is the infliction of harm, the kinds of harms are familiar, and these harms are paradigmatic cases which any reasonable account of harm will leave conceptual space for.
The second sort of harm is psychological. It involves the infliction of non-physical injuries or pain, understood broadly to include, say, depression, spiritual anguish, and loss of self-esteem. Conversion therapy often involves among other things bringing about great distress, undermining identities, and laying blame for ‘deviance’ upon the patient. The psychological harms of serious and sustained attempts to sexually reorient non-heterosexuals are well-documented. In their well-known study, Shidlo and Schroeder (2002) identify several distinct “pathways” along which subjects of conversion therapy might progress. After an initial “honeymoon period” during which subjects might feel hopeful about their prospects for reorientation, the vast majority (87%) of participants indicated “self-perceived failure” and a further 6% were classified as “successful and struggling.” All who classified as failures underwent a “disillusionment period” characterised by “significant conflict between cognitions, emotions, and behaviour” (2002, 253). The disillusionment period was followed by one of two periods: the “dissatisfied asexual period” and the “conversion-model-cracks period.” The former involved the transition from “disturbance about the lack of change to a state of numbness and dissociation, characterized by celibacy, compulsive work behaviors, anxiety, and depression.” The latter, in Shidlo and Schroeder’s eyes the “most troubling” phase, involved:

a resurgence of ego-dystonic same-sex desire [accompanied by] a significant increase in guilt, depression, anxiety, confusion, and self-blame because of the rebounding of same-sex desire or behaviour. Some participants in this group engaged in serious self-harmful behavior, including suicidal gestures, unprotected anal intercourse with untested partners, and heavy substance abuse (2002, 253).

Recounting their experiences, one subject in Shidlo and Schroeder’s study reported that:

I felt dirty about [my homosexual orientation]. I felt like a cancer with a boil that someone is trying to lance out. I felt and still feel like a failure ... The counseling helped for a while but after that it reinforced the

Shidlo and Schroeder’s findings are borne out, moreover, by further research on the subject. Quantitative and qualitative studies have with remarkable consistency documented psychological sufferings of various sorts resulting from conversion therapy (Phillips 2004; Horner 2010; Ryan, Toomey, Diaz, and Russell 2020). Given what we know about human psychology, conversion therapy risks serious harms and can be meaningfully compared to, for instance, feeding a new-born solid foods, since we know in light of modern physiology that this too risks very serious harms. Once again, it will not be controversial that these are harms. If anything, these too are likely to fall into a set of paradigmatic psychological harms, in which case any reasonable account of harm will have to account for them.

c. Fecundity, Extent, and Purity

The import of these harms is magnified by what Jeremy Bentham, the father of modern utilitarianism, called ‘fecundity,’ ‘purity,’ and ‘extent.’ Here, I want to suggest that care ethicists borrow these terms because they offer a useful classificatory schema for morally salient modifiers of harm. Bentham described ‘fecundity’ as “the chance [some sensation] has of being followed by sensations of the same kind” (1907, 30). A fecund pain is one which is followed by other pains, a fecund pleasure by other pleasures. One of Beckstead’s interviewees, a gay man in a heterosexual marriage, exemplified this sort of fecundity in explaining that:

I had to fantasize being with a man for 12 years of marriage. The first time I had sex with my wife the day after our wedding I was extremely sick, vomiting nonstop for at least 2 hours afterwards, experiencing shaking and cold sweats (2001, 201).

2 Some effects of conversion therapy may not be universally recognisable as harms – Robinson and Spivey (2007) write, for instance, that conversion therapists often preach antifeminism. For some, myself included, this will represent a kind of moral or epistemic harm, but this will surely be a contentious view.
In this case, conversion therapy involved a particularly fecund pain – it was followed by a variety of ongoing psychological and physical pains. Similarly grim outcomes are documented by other studies. Shidlo and Schroeder report that “for decades, many experienced anger and grief at having lost time; they struggled with feelings of betrayal by mental health professionals” (2002, 254 (emphasis added)). In Bentham’s ethics, ‘extent’ is “the number of persons to whom [the pleasure or pain] extends; or (in other words) who are affected by it” (1907, 30). In addition to the enduring psychological harms suffered by subjects of conversion therapy, other harms are inflicted on those with whom they share or could potentially share bonds. Most obviously, those affected will include romantic partners, both ingenuous heterosexual partners and homosexual partners who must be abandoned or kept in secret, whose emotional wellbeing is also threatened by conversion therapy and the accompanying mental health risks (suicide in particular). Parent-child relations may also be strained or even severed by conversion therapy, and conversion therapy sometimes involves recommendations that patients abandon friendships (Shidlo and Schroeder 2002, American Psychological Association Task Force 2009, Human Rights Watch 2010). Suicide attempts and other forms of self-harm are, of course, problems for entire societies, and insofar as members have interests in the wellbeing of other members, conversion therapy threatens harm to entire communities.

Bentham defines ‘purity’ as “the chance [some sensation] has of not being followed by sensations of the opposite kind” (1907, 30). If the pains of conversion therapy are impure, they are followed by pleasures. Several studies report that conversion therapy does not result in (lasting) harm to all participants, or that it sometimes has beneficial outcomes such as improved self-esteem, better social wellbeing,

---

3 Care ethicists will be especially sensitive to this given their normative commitments, but so too will religious groups, for whom filial relations are often of great import. In this respect, conversion therapy is antithetical both to care ethical and theological aims.
respect for therapy-seekers’ autonomy, and greater self-acceptance (Nicolosi et al., 2000; Beckstead 2012, cf. Clucas 2017), and it seems platitudinous that it is possible for some benefit to result from conversion therapy. Yet these benefits may well be obtainable through less risky means, and we remain unsure of their fecundity, extent, or purity. What’s more, their likelihoods seem remote, and this ought surely to be factored in when a caregiver is faced with a choice between opting into conversion therapy and declining treatment. In those cases, the caregiver is in a position of uncertainty, where they must weigh the likelihood of harm and make predictions about the outcomes of their choices. And in the case of conversion therapy, the likelihood of harm seems overwhelming. Even if we grant for the sake of argument the claim that the care-recipient stands to gain some good here, the fact that some action has a remote chance of bringing goods about does not ipso facto justify my placing someone in harm’s way, particularly where the goods could yet be obtained through other means. Typically, we think that dire risks are only justifiably run where (a) the reward is proportionately desirable, and (b) no less risky means exist. As Walsh puts it:

4 The obvious reply here is that non-heterosexuality/non-procreative intercourse condemns one to some sort of punishment in the afterlife (or some other form of punishment or disapproval). I address this possibility in Section 3. Another possible worry here stems from what Gilligan (1982) calls the ‘math problem’ – the reduction by some ethical theories of moral dilemmas to equations. I am not suggesting here that we ought to take anything like the approach Gilligan and other care ethicists have expressed hostility towards; I am gesturing here towards considerations which care ethicists will need to account for in order to present a plausible account of ethics. No care ethicist will admit that you ought to risk a care-recipient’s life for a negligible benefit. It is glaringly obvious that I act wrongly if I speed with my partner in the car for the sake of getting to a dinner reservation on time, less wrong if our severely injured child is in the rear and I am rushing to the hospital. The morally salient difference here is the severity of the risk (and note here that one need not numericalise harms in order to recognise proportionality), and it seems to me that any ethic which fails to recognise some account of proportionality (a) fails to adequately deal with cases such as these, and (b) is therefore an inadequate moral theory.
Some goods are simply not worth attaining if one of the conditions of doing so is the substantial overpowering (whether through physical or mental means) of a cared-for. This will most clearly be the case when the end in question would provide only a marginal benefit to the cared-for. It may also be true even for much greater goods, however, if these are sufficiently difficult for the caregiver to attain (2019, 8).

It therefore seems unjustifiable to risk the harms of conversion therapy for the sake of, say, greater self-acceptance. All of these concepts, disentangled from Bentham’s felicific calculus, are therefore considerations which caregivers ought to consider in their moral deliberations.

If this general picture of conversion therapy holds water, then it becomes apparent that conversion therapy risks serious harm for little to no reward. Since we have assumed that non-heterosexuality is not pathological, the primary benefit advanced in defence of conversion therapy is not a factor. In most cases, ethicists of any stripe will regard this as sufficient reason not to take the sorts of risk discussed above. Given their emphasis on meeting needs and maintaining caring relations, care ethicists are likely to agree (see Section 3). The harms listed above threaten physical and psychological wellbeing, and undermine basic goods such as healthy filial and romantic relationships by inflicting experiences which are potentially highly traumatic or even physically injurious upon the care-recipient. Caregivers who meet some (minimal) standard of moral decency, and are epistemically positioned to make judgements such as these, will therefore not submit themselves or others for conversion therapy. In the next section, I argue that caregivers who opt into conversion therapy are typically not morally wicked and indeed pursue ends which we ordinarily regard as morally good. The problem therefore often lies not in the caregiver’s moral ends or intentions, but in the deliberative process by which they select particular means thereto.

2.2 Religious and Caring Justifications for Conversion Therapy

With remarkable consistency, those who opt others or themselves into conversion therapy cite as their reasons considerations which we
would otherwise find entirely reasonable. Most research explores the justifications offered by members of the LGBTQI+ community for efforts to alter their own sexual orientation. Though his results have proven extremely controversial for other reasons, the vast majority (79%) of Spitzer’s participants cited “conflict between their same sex feelings and behavior and the tenets of their religion” (2003, 407) as a reason for seeking out conversion therapy. Similarly, in an oft-cited paper studying Mormons who underwent conversion therapy, Beckstead and Morrow found that “overall, being LGB was seen as an invalid option, given the extremely high stakes of losing identity, family, friends, community, religious support, and eventually, ‘eternal exaltation’” (2004, 664). Tozer and Hayes’ (2004) findings are consistent with this. They report both that religious views of participants are associated with internalised homonegativity, and that internalised homonegativity correlates with a “propensity to seek conversion therapy” (2004, 729). Exploring this homonegativity, Tozer and Hayes write that “participants desired to live in conformance with the “ideal” of heterosexuality […] Participants also foresaw their lives as limited if they were to live with a same-sex orientation” (2004, 719).

While much of the literature, and many of the most widely cited pieces, focus solely on Christian attitudes towards and attempts at conversion therapy, there is also ample evidence that the practice continues in non-Christian communities, both Abrahamic and non-Abrahamic across regions as religiously and culturally diverse as the Middle East and Asia. Naomi Mark, for example, reports that “Orthodox [Jewish] gay persons are usually highly motivated to change so they can remain in their home community comfortably and live according to their understanding of tradition” (2008, 188), and though data on non-Western regions and traditions is more sparse, the sheer quantity of documented religiously-motivated instances of conversion therapy is sufficient effectively to guarantee that at least a subset of these will be concordant (OutRight Action International 2019).

There is, of course, no single conflict here. Religious beliefs are nuanced and diverse, and non-heterosexuality can conflict not only
with one's hopes about one's life's trajectory, but also with one's attitudes and beliefs about one's own mental states, spiritual health, deserts, place in the eschaton, and so forth. Accordingly, one participant in Van Zyl, Nel, and Govender's (2017) study reports that:

I didn't know at that point whether it was a demon... I thought it is a disease, it's a demon. I started to realise back then that if I wasn't going to change my life, I was going to hell. I had to change the direction of my life and become heterosexual so I could get forgiveness. I remembered that as a child my pastor had condemned homosexuality. I still felt conflicted. I didn't want to go to hell. Homosexuality was a huge sin; I deserved to go to hell. I cried like a child because I was not who I was supposed to be (2017, 192, see also Wolkomir 2006; American Psychological Association Task Force 2009).

Justifications for conversion therapy thus typically include one or more aims from a set which includes, for instance, achieving coherence between one's religious views and other facets of one's life, or the avoidance of some evil consequent upon failing to live up to one's (religious) ideals. This line of reasoning appears also to motivate caregivers and guardians who volunteer others for conversion therapy; religious aims include such things as eternal salvation, living in conformity with religious ideals, and so forth (American Psychological Association Task Force 2009).5

What is perhaps most ethically interesting about the empirical work done in this area is that the reasons it unearths would, in other contexts or when framed in abstraction, be perfectly understandable. Aristotle famously begins the *Nicomachean Ethics* with the claim that “every skill and every inquiry, and similarly every action and rational choice, is thought to aim at some good” (2004, 1094a1-2). Goods on Aristotle’s account are either ends in themselves or means to other

5 There are parallels to be drawn here with the much-discussed distinction between ‘caring about’ and ‘caring for’ – part of what distinguishes the two is that ‘caring for’ involves a sort of ‘completion phase’ where caregivers receive and respond/adapt to care-recipients’ feedback. Part of what good care involves is responsiveness to the worldviews of the care-recipient, and there is a strong case to be made for the notion that religiously motivated conversion therapy often falls short here.
ends. Aristotle argues in what follows that the final good, which gives value to subordinate goods, is *eudaimonia* (‘flourishing’). This latter claim is contentious. But that claim is not necessary here. All the thought here requires is that ends can be ‘nested,’ and this is a thought which care ethicists have shown some sympathy for. Tronto writes, for example, that:

we can imagine caring practices as nested within one another, from more specific to broader purposes. Thus, maintaining one’s medical equipment is a caring practice nested within the broader practice of using that equipment, which is nested within the broader practice of medicine, which is nested in the broader practice of pursuing health (2013, 21).

This notion allows us to make sense of the actions of caregivers who volunteer themselves or others for conversion therapy. These caregivers do not do so because therapy is an end in itself – conversion therapy is a means to an end, not choiceworthy in itself but only as a means to an end. The end at which therapy aims admits of varying descriptions. If the proximate aim is to heterosexualise oneself or another, then the empirical evidence indicates that this is a means to one of the more remote ends listed above, say eternal salvation or conformity with one’s ideals. Conversion therapy is a means to heterosexuality, and heterosexuality is not usually spoken of as an end in itself, but rather as a means to further ends. And *those* aims seem perfectly adequate. The general end of living up to one’s religious ideals is surely not objectionable *per se*. Yet if this is the case, then the data suggests that conversion therapy is in large part a mistake about means to ends, and not about (distant) ends in themselves.  

---

6 This is, of course, to let all such ends pass muster – my claim is simply that this is often the case. I also leave open the question of whether any particular end is ‘true’ or an instance of ‘false consciousness.’ The matter is rendered significantly more complex in cases where I am adopting another’s ends, either because I ‘assent’ to them or because they are imposed upon me in some way. It is also complicated in cases where children are surrendered for conversion therapy – in these cases, it may not even be sensible to speak of their having the same sorts of ends adults have. In that respect, there may be an illuminating analogy to draw between conversion therapy and genital surgery on intersex infants.
Conversion therapy is nested within (though perhaps not immediately subordinate to) ostensibly acceptable, perhaps even noble, ends. If this is the case, then diagnosing the problem of conversion therapy is at least in part an epistemological matter.7

3. Care Epistemology

In this section, I synthesise care ethical insights into the epistemological dimensions of care and the insights gleaned from the literature on conversion therapy into a normative account of moral deliberation in caregiving. The project is an epistemological one insofar as it pertains to knowledge, judgements, or beliefs. That good care requires excellences in these areas is uncontroversial. As Dalmiya puts it, “whether knowers always need to care or not, carers always need to know” (2016, 7). I begin in Section 3.1 by justifying this focus, explaining what dispositions involve and why care ethicists working on applied ethics ought to attend to them. I then offer over Sections 3.2, 3.3, and 3.4 a theory of epistemic dispositions necessary for good caregiving. I split these into attentive, evaluative, and pragmatic deliberative dispositions, devoting a section to each. Alongside these discussions, I explain how failures in each area can lead a caregiver to opt into conversion therapy. I thus show that care ethicists have recourse to a robust account of the epistemic resources good caregivers utilise when they care for others.

3.1 Why Dispositions?

Moral deliberation involves mental states, knowledge, understanding, dispositions, skills, capacities, emotions, and other related epistemological concepts. There are, however, six reasons to limit our discussion to epistemic dispositions. Firstly, we cannot do justice to all of the concepts here – a comprehensive inquiry into even one will

7 It is noteworthy here that there are at least two sorts of mistakes one can make about ends: there are conceptual errors, which involve mistakes about the ideas or definitions of particular ends, or pragmatic errors, which involve mistakes about how those ends are to be obtained. The boundary between these two categories is, unsurprisingly, particularly blurry.
require a book-length treatment. Second, we are in search of those traits which prevent moral deliberation from going awry. As such, we require adaptable traits which render their possessor reliably and cross-situationally averse to epistemic missteps. Because they do not involve reliability of the right sort (except insofar as they overlap with dispositions), the other available concepts do not suffice. A third, subordinate reason to focus on epistemic dispositions is that we want an account of good caregiving to serve a predictive function. To say that someone is a good caregiver (perhaps a wise or insightful one) is usually to give some indication of the sort of person they are—thats they can be trusted to deliberate well about how best to care. Fourth, as we shall see, many of these cases are not obviously cases of incapacity, unskillfulness, or improper motivation. In the case of conversion therapy, failures to care seem primarily to be matters of disinclination to make proper use of available deliberative resources. In most cases, I shall suggest, these resources are also not particularly elusive, and this is a fifth reason why dispositions ought to be focused on. Not only would many cases be wrongly diagnosed as cases of incapacity, but of those which are rightly diagnosed as such, the relevant capacities, knowledge, or skills are not particularly difficult to cultivate. Conversion therapy is therefore mostly a result of dispositional shortcomings, and of the epistemic necessities for good deliberation, these are among the most difficult to acquire. Finally, there is already momentum behind the notion that care involves epistemic dispositions. Care ethicists like Tronto (1993, 1995), Dalmiya (2002, 2016), and Hamington and Rosenow (2019) have already laid much of the groundwork for undertakings such as this, and leaning on that literature enables us to look beyond some of the more foundational matters to topics in applied ethics such as conversion therapy.

3.2 Attentive Dispositions

Care responds to states of affairs. When I care for someone, I actively respond to the world around (or within) me. Responding appropriately requires that one has an accurate understanding of the world one is responding to. Sometimes one is fully informed about the relevant
state(s) of affairs and need only deliberate about how to respond. Other times, however, good care requires expertise which caregivers themselves do not possess, so in order to care well, caregivers must sometimes gather information. The first set of dispositions necessary for good care therefore includes dispositions to recognise when one is not fully informed and to properly inform oneself as necessary.

Attentiveness is a central disposition in care ethics, among the most popular formulations of which is Tronto’s concept of attentiveness as “recognizing the needs of those around us” (1993, 127), which involves “a suspension of one’s self-interest, and a capacity genuinely to look from the perspective of the one in need” (2013, 25, she also acknowledges a kind of self-attentiveness which will be relevant here). In these passages, Tronto touches upon a broader point which unites virtually all of care ethics’ most prominent proponents: caring for others involves varieties of empathy and of receptivity to the worldview of others. For Noddings, the primary mechanism is one of ‘engrossment,’ “stepping out of one’s own personal frame of reference into the other’s” (2013, 24). And Held, advancing a similar thought, observes that “caring relations seem to require substantial capacities on the part of those in them for being sensitive to the feelings of others” (2006, 53). But the care ethical emphasis on empathy and emotion is not mutually exclusive with dispositional sensitivities to other morally salient particulars. Caring well requires certain emotional capacities and the dispositions to exercise them, but it also requires a disposition to notice other relevant facts about the world, for example, that a loved one is struggling financially, that a prescription is incomplete, or that the beloved toy has gone missing. Attentiveness ought to be understood not only as a disposition governing emotional sensitivity and empathy, but as a wider disposition to

8 This is a subspecies of a claim which is generally popular in feminist ethics. Walker, for example, explicitly leaves room in her epistemology for “attention, contextual and narrative appreciation, and communication in the event of moral deliberation” (1989, 19, see also Sevenhuijsen 1998, 57).
notice any morally salient particular.\textsuperscript{9} Baier rightly notes that “a reliable sign of real caring is the intolerance of ignorance about the current state of what we care about” (1985, 274), and ignorance cannot be limited to the emotions or others’ inner worlds. Only with a broad disposition such as this can caregivers properly gather all of the information they need in order to reliably care successfully.

Attentiveness hinges on a degree of epistemic humility or modesty. One cannot be a good caregiver if one is disposed to overestimate one’s own epistemic standing to care. I shall not enter into the notoriously difficult debates over competing definitions of humility and modesty, or of the relation between the two. It is sufficient to note here that whatever else the epistemic standing to care well requires, it surely requires that one not exaggerate one’s own knowledge or understanding, particularly when it comes to care ethicists’ most-discussed subjects – healthcare, parenting, teaching, and so forth. Proper attentiveness requires that one properly estimate one’s own epistemic standing and, where necessary and possible, makes efforts to improve it (Dalmiya 2016).\textsuperscript{10} In cases where mental or physical health are concerned, caregivers often will not be sufficiently informed to make sound judgements about how best to respond to needs, and indeed a good caregiver will possess not only the humility necessary to recognise this but a desire/willingness to learn what they must. Thus, Baier writes that “a reliable sign of real caring is the intolerance of ignorance about the current state of what we care about” (Baier 1982). Most caregivers are neither physicians nor psychiatrists.\textsuperscript{11} If I am to be ideally attentive, then I cannot assume that I possess more knowledge than what I actually have – overconfidence

\textsuperscript{9} Such a disposition can, of course, be confounded. I might have a disposition to notice that my loved one is in dire financial straits, but I might nevertheless fail to do so because they have made efforts to hide this from me.

\textsuperscript{10} Of course, it may well be the case that I cannot improve my epistemic standing. In such cases, it is perhaps the best one can do to try one’s best and hope that moral luck is on one’s side.

\textsuperscript{11} And even those who are could possibly be required by humility to seek second opinions or do further research.
such as this risks misjudging what good care requires of me. And in the case of conversion therapy, humility will require most if not all caregivers to gather information.

There are several subspecies of inattentiveness. Care ethicists like Tronto (1993) and Randall (2018), for instance, have distinguished deliberate inattentiveness from honestly mistaken inattentiveness, and indeed there is a large constellation of familiar varieties of inattentiveness. Most obviously here, I might exhibit consequential inattentiveness by ignoring, downplaying, or inadequately informing myself about the likely harms listed above (Gonsiorek 2004; Morrow et al. 2004). I might also be insufficiently sensitive to the emotions or worldview of my charge, perhaps by being dismissive of their emotions and expecting stoicism of them, or by denying emotional depth/breadth in the case of children or those with intellectual disabilities (see, e.g., Kittay 2009). I might be morally or politically inattentive by failing to notice that my behaviour is unacceptably paternalistic, that I am imposing my ethico-political views on another in a morally objectionable way (how often, after all, do we think it ethically permissible to enlist others in programs designed to change fundamental elements of their identity?) Feminist ethicists have had a great deal to say about the sorts of political considerations good caregivers will take into account. In some situations, particular behaviours or constructs may require that “those who bear [an identity] be epistemically marginalized or unauthorized, so that the setup in which identities are naturalized, privatized, and normalized cannot be contradicted or contested by them” (Walker 2007, 177). This is particularly worrisome in cases where contradiction and contestation are taken to represent disobedience towards a deity or some other ultimate authority, and where severe punishments and burdens attach to that disobedience. Attentiveness ought to include a subset of dispositions regarding awareness of or sensitivity to such power dynamics, hierarchies, and coercive institutions.

There is perhaps even a kind of doxastic inattentiveness where theology is involved. Debate persists over the positions of various religious groups, authors, and texts on sexual orientation and
non-procreative sexual behaviour. If, like myself, one believes the arguments mounted by thinkers like Corvino (2013) in response to various arguments against homosexuality to have settled the matter, then it will be the case at least some of the time that caregivers who opt for conversion therapy because it is in some sense blameworthy or impermissible have failed to do their due diligence and inform themselves properly about the belief system upon which they act.\textsuperscript{12} This includes, for example, carefully examining one’s interpretations of scripture by considering standard hermeneutical features such as genre and authorial intent, difficulties regarding translation, as well as updating one’s belief set as new evidence comes to light. Take, for example, Mark’s reports of her experiences with ‘outdated’ views in Orthodox Jewish communities:

Because most Orthodox rabbis interpret the tradition as prohibiting homosexual behaviors, they are inclined to want to view homosexuality as “a choice”—and therefore changeable. Their thinking goes like this: “If the Torah (law) prohibits homosexuality, then it must be within our control to refrain from these behaviors otherwise the Torah would not prohibit it” (2008, 189).

Proper attentiveness to one’s own beliefs, and to one’s epistemic position in relation to others (particularly as a believer in relation to (a) a care-recipient, and (b) other believers), may well prevent these sorts of inferences, or at least preclude the leap from the validity of the argument to its soundness.\textsuperscript{13} Doxastic inattentiveness is not, moreover, wholly separate from ethico-political inattentiveness.

\textsuperscript{12} Not all failures to inform oneself are indicative of dispositional shortcomings, however. Consider, for example, caregivers in remote parts of the world, for whom the only source of information might be a heterosexist spiritual leader/elder or religious text. In such cases, a perfectly attentive caregiver might opt for conversion therapy for lack of access to the necessary information. Attentiveness is thus relative to one’s context. But for much of the developed and developing worlds, a wealth of information is easily accessible through libraries, the internet, and healthcare professionals, and ignorance reveals inattentiveness.

\textsuperscript{13} Here again care epistemology will run up against accounts of epistemic justice like that offered by Fricker (2007) – care-recipients who protest conversion therapy may well be subject not only to an exploited power dynamic, but also to a credibility
— religious beliefs are deeply interwoven with interpersonal, congregational, societal, national, and/or global politics and ethics. The subspecies of inattentiveness overlap.

Even if one is agnostic about the theological/hermeneutical arguments, however, it does not follow that one ought to pursue conversion therapy for oneself or others. For one thing, as noted above, any normative claim that we ought to eradicate non-heterosexuality is premised on the capacity to do so. As we have seen, the evidence suggests at minimum that such a capacity is absent in the vast majority of cases. But for another, ceteris paribus, where the stakes are high, conditions of uncertainty require one to either inform oneself or to refrain from action until an answer comes to light. Many, perhaps most cases are cases of non-urgency,14 where it is possible for those with homosexual identities or experiencing homosexual feelings, or their guardians, to refuse conversion therapy pending further research. And in cases where a caregiver is given the impression of urgency (perhaps by the therapist, a religious leader, or some other trusted advisor), one has good reason to doubt the veracity of their statements. Presumably anyone who urges caregivers to volunteer themselves or others for conversion therapy understands the seriousness of the recommendation and ought to urge them to think carefully about their decision.15 Pressure to quickly and unthinkingly submit oneself or others for conversion therapy is itself a datum which indicates that the advisor is untrustworthy. Where an advisor — a religious leader, for instance — pressures a caregiver to neglect their epistemic duties and submit a care-recipient for potentially harmful treatments, this is sufficient reason to call their motives and advice into question. And

deficit, where their testimony is taken as somehow less credible (whether that be because of their age, their religious beliefs, or because they are ‘prodigal’).

14 And here I use this term broadly — it is difficult to see a sense in which a need for heterosexualisation might be urgent, particularly where young people are concerned.

15 Regardless of the stance one takes on conversion therapy, the choice is a grave one. Anyone who fails to grasp this gravity does not possess even a general idea of what is involved and their testimony ought probably to be regarded with suspicion.
this thought dovetails into another set of essential deliberative dispositions: evaluative dispositions.

3.3 Evaluative Dispositions

The information caregivers gather cannot always be accepted at face value. Information comes in a variety of forms and from a variety of sources, both of which might give a caregiver reason to doubt a datum’s veracity. It is not always obvious, however, that a datum is unreliable, nor is it always obvious why, and of course some information is reliable and ought to be factored into moral deliberation. Caregiving must therefore involve malleable evaluative dispositions if it is to be well-reasoned.

In order to properly evaluate information, one must first possess a disposition to notice when evaluation is necessary and appropriate. As they are understood here, necessity and propriety come apart. It may be unnecessary but appropriate to evaluate information, as when I have two equally reliable means of meeting a need but must choose one or the other, and it may be necessary in order for the need to be met but inappropriate to evaluate information, as when the evaluation itself precludes the need from being met (perhaps by suggesting that the caregiver is untrusting). Cases where risks are severe are cases where, other things equal, the standards for non-necessity/impropriety seem to become more stringent. Where fundamental needs such as food and shelter are at risk, more must be done to show that evaluation of information is unnecessary or that it is inappropriate. I cannot, for example, forego evaluation of information relevant to the meeting of a need for shelter by assuming that things will turn out alright, or that someone else might offer the necessary aid, though in a case of certain non-urgent or nonfundamental needs I might reasonably offer these excuses. In the case of conversion therapy, where (a) a variety of harms are both likely and serious (or there is evident and rigorous disagreement about the practice’s harmfulness), and (b) the deliberator is presumably a primary caregiver, the

---

16 For a discussion of these and adjacent concepts, see McMahan (forthcoming).
overwhelming majority of cases (arguably all cases) will require both as a matter of necessity and propriety evaluation of information prior to volunteering the care-recipient for conversion therapy.

Evaluation of information is itself a complex matter, in part because of the sheer variety of evaluative tools one might employ for a single datum. There is also a major threat of elitism in attributing evaluative dispositions to good care – the standard for good care cannot limit good care to logicians and statisticians.\(^{17}\) Simultaneously, however, it seems commonsensical that one cannot be a good caregiver if one has no capacity or disposition whatsoever to evaluate incoming data (Pettersen 2012). As one commentator on the anti-vaccination movement notes:

> we have access to a vast world of semi-coherent Facebook threads, YouTube clips and assorted online quackery, in which anxious people seeking reassurance can all too easily stumble across those who don’t have children’s best interests at heart (Hinsliff 2019).

The standard, then, must be somewhere in between these poles. A reasonable baseline for good caregiving seems to me to be roughly the features Aristotle (2004) attributes to ‘cleverness,’ which includes the sorts of evaluative dispositions one cultivates in introductory critical thinking and statistics courses. A typical syllabus for the former will include, for example, learning how to distinguish validity from soundness, identifying fallacies, distinguishing premises from conclusions, and so forth; one for the latter, sample size, basic

\(^{17}\) One might also think that the attentive dispositions attract a similar problem. I leave that question unaddressed for two reasons: first, a response will be much lengthier than the one I offer here because the attentive dispositions appear to a larger extent innate or natural. Second, there are already responses to such worries in the literature. The attentive dispositions figure much more prominently in care ethics and in the care ethical concept of care, which has faced related charges not of elitism but of sexism. The response, that care is not sexist because anybody can become a good caregiver, seems to entail also that anybody can develop the attentive dispositions partly constitutive of good care. And if this is the case, then the attentive dispositions also cannot be elitist in the sense that they are accessible only to a select few. For discussions of sexism and gender essentialism, see prefaces to the later editions of Noddings’ *Caring*, Clement (1996), and Groenhout (2004).
probability theory, and hypothesis testing. To Aristotle’s mind, and as scholars like Pols (2014) have shown, these skills are perfectly attainable without tertiary education and thus avoid that specific sort of elitism/classism, but they also seem sufficient for most caregivers to reliably meet the needs care-recipients present them with.\footnote{If these thinkers are ultimately mistaken, then the thesis does not collapse – rather, it becomes (more) urgent that education be provided as freely as possible.}

The debate over conversion therapy both evinces the necessity of such evaluative dispositions and reinforces roughly this standard. There are, unsurprisingly, numerous defenders of conversion therapy, and much of their work has been faulted for precisely the sorts of shortcomings caregivers with these epistemic dispositions will reliably detect (see, e.g., Jenkins and Johnston 2004). Take for instance Spitzer’s (2003) oft-cited defence of conversion therapy. Spitzer interviewed 200 individuals whose “sexual orientation had been predominantly homosexual, but […] because of some kind of therapy they have sustained for at least 5 years some change to a heterosexual orientation” (2003, 405), in order to test the near-universal professional condemnation of conversion therapy. Spitzer’s participants, 93\% of whom reported that “religion was ‘extremely’ or ‘very’ important in their lives” (2003, 406) and 79\% of whom reported conflicting religious beliefs as their justification for seeking treatment (2003, 407), were selected specifically using two criteria:

1. predominantly homosexual attraction for many years, and in the year before starting therapy, at least 60 on a scale of sexual attraction (where 0 = exclusively heterosexual and 100 = exclusively homosexual); 2. after therapy, a change of at least 10 points, lasting at least 5 years, toward the heterosexual end of the scale of sexual attraction (2003, 405).

After a lengthy analysis, Spitzer offers several conclusions, including that, on the basis of participants’ reports, “real change in sexual orientation seems plausible […] as the participants used change strategies commonly effective in psychotherapy” (2003, 413).

Spitzer’s work came under fire immediately upon publication. In the very same issue of *Archives of Sexual Behaviour*, Beckstead offers
several critiques of Spitzer’s research, including that “a variety of alternate reasons exist, besides the efficacy of reorientation treatments, as to why and how such participants claim success” (2003, 422), that participants might distinguish between being heterosexual and experiencing heterosexual attractions, that journal monitoring revealed homosexual “longings” which were later disregarded or forgotten, that a reduction in homosexual attraction did not amount to a change in the direction of heterosexuality, and that homosexual attractions might be ignored or minimised by means of prioritising other facets of life, that dissonance might lead to false reporting, amongst others (2003). Carlson offers more critiques in the same issue: that “individuals might not wish their true feelings to be known, particularly when these feelings differ from socially accepted practices in their community” (2003, 426), that interviews, especially those conducted solely by the investigator, are prone to contamination by interviewer bias, that Spitzer’s chosen concept of reparative therapy was overpermissive, and that, because Spitzer failed to use a control group, “causality cannot be demonstrated” (2003, 426). Religious beliefs here can interact in complex ways with a participant’s views, plausibly motivating them not only to seek out conversion therapy but also to define success in particular terms, whether that be in accordance with scripture or in such a way as to allow the participant to adhere to doctrine. Spitzer later repudiated his own findings, writing that:

I offered several (unconvincing) reasons why it was reasonable to assume that the participants’ reports of change were credible and not self-deception or outright lying. But the simple fact is that there was no way to determine if the participants’ accounts of change were valid (2012, 757, cf. Armelli et al. 2012).

These reasons for rejecting Spitzer’s study are not arcane – they are the sorts of reasons a caregiver who possesses the evaluative dispositions and capacities outlined above will be inclined to identify. Practices of conversion therapy therefore offer useful insights into good caregivers’ evaluative dispositions.
3.4 Pragmatic Dispositions: Some Initial Thoughts

Caregivers also require a disposition to synthesise various inputs into actions which further their ends. Pragmatic/practical dispositions have occupied philosophers for millennia, and I cannot for spatial constraints develop a comprehensive account thereof. Instead, this section traces the contours of one basic theoretical structure for this remaining step in moral deliberation. I want to suggest that this synthesis involves two steps: recognising particular facts about the world as reasons for action, and then reconciling the set of reasons into an all-things-considered judgement about what one ought to do.\(^{19}\) To begin with, practical deliberation involves not merely receptivity to relevant facts about the world, but also registering those facts as reasons for a particular course of action. Not all facts about the world qualify as reasons for action, of course. Some facts may be wholly irrelevant. But some might offer reasons for one action, several actions, or indeed all actions up for consideration. Reasons for action also admit of varying strengths relative to one another.\(^{20}\) I take it to be platitudinous that some reasons are more forceful than others. The classic moral dilemma where we are forced to choose between rescuing a drowning child or keeping a new suit unsullied is never regarded as insoluble, as it would be were the child's life and the immaculacy of a new suit equally weighty reasons for action. This overarching picture of practical deliberation strikes me as a plausible though not unassailable one.

Many care ethicists and psychotherapists will no doubt want to go further than this and morally prohibit the practice of conversion therapy. Such assessments are exclusionary – one cannot be a good caregiver and volunteer oneself or others for conversion therapy simultaneously. Care ethicists might also include in this category prohibitions against rape, torturing children, and other practices which we ought to prohibit tout court regardless of the goods which they

\(^{19}\) This account is inspired by the work of Aristotelians like McDowell (1979) and Foot (2002).

\(^{20}\) Joan Tronto and I defend a theory of this in Tronto and Steyl (forthcoming).
might hypothetically accrue. Care ethicists are generally hostile towards such universal prohibitions, usually because (good) care is sensitive and tailored to context (Ben-Porath 2008; Tronto 2012; Collins 2015, Ch. 2). Even apparently universal imperatives to clothe one’s children depend on such things as, say, the climate, the caregiver’s finances (“given my limited resources, is it better to clothe or to feed the child?”), one’s relationship to the child, other caring relations in which the child participates (“my responsibility is not to clothe the child, but to remind S of their responsibility to do so”), and so forth. Care ethicists thus tend to describe themselves as moral ‘particularists’ (see, e.g., Held 2006; Engster and Hamington 2015).  

A prohibition against conversion therapy does not violate what I shall call the ‘particularisability condition,’ the condition that caregiving be tailorable to particular individuals or states of affairs. The particularisability condition is not violated by injunctions against conversion therapy precisely because (a) the injunction is not preformulated prior to the consideration of evidence/context, and (b) such injunctions offer virtually no action guidance beyond the prohibition of one specific course of action. Once a caregiver has decided which information is reliable and morally relevant, they must then decide what to do with it. And though one might think, when faced with a choice to send a care-recipient to conversion therapy or not, that there are only two available courses of action, there are in fact a vast (possibly infinite) number of options facing the caregiver at that point. Do I abandon a non-heterosexual relative or child? Do I harm myself if my beliefs and sexual orientation are misaligned? Do I surrender or reform my religious beliefs, or live celibately? What aid can

---

21 The same point might also be made in response to blanket prohibitions against particular sexual orientations some theists defend.

22 Here we return to injunctions against such actions as feeding a new-born solid foods. Of course, only the most extreme utilitarians are likely to deny such an injunction, but we do not think that it violates the particularisability condition in part because it is a judgement one only arrives at upon consideration of available evidence about human biology.
I offer to this person/child, and how do I offer it? It is questions like these which the pragmatic dispositions equip good caregivers to navigate.

4. Conclusion

I have argued that theologically motivated conversion therapy offers insights into care ethics and care epistemology. I began with an empirical argument for the harmfulness of conversion therapy. I maintained than in opting for conversion therapy, caregivers with religious motivations err not in the pursuit of more remote ends, but in their choice of harmful means thereto. This dovetailed into a discussion of care epistemology. My overarching argument has been that caregivers who opt for conversion therapy exhibit a number of generalisable epistemic failings which map onto a tripartite account of the epistemic dispositions involved in moral deliberation. If these arguments hold water, it becomes clear how exactly theologically motivated conversion therapy and behaviours like it can represent a moral failing on the caregiver’s part. I have assumed that conversion therapy represents a failure to care adequately, and the account presented here goes some way towards explaining why this is the case. A comprehensive approach to conversion therapy will undoubtedly require more than merely acknowledging and cultivating particular epistemic excellences – it will likely require also reformation of religious teachings, dissemination of queer theology, and/or other correctives. Much more remains to be said on all of these topics, however, and one hopes that care theorists will do more to develop care epistemology as a distinct subfield of care ethics.

Works Cited


Tronto, Joan. 1995. “Care as a Basis for Radical Political Judgments.” Hypatia 10 (2): 141-149.


To Shelter an Egyptian Firstborn:  
The Revelatory Potential of Care Ethics  
in Jewish Thought

Jason Rubenstein

At times, I have felt that one of the most important elements of human experience, childrearing, has been all but invisible to normative religious thought; a cavernous intellectual silence has reigned where centuries-long, voluble conversation ought to have been. But at other times, I have suspected the opposite: that the rabbis, and their later readers and interpreters, intuited that the primal heart of Torah and mitzvot could only be truly known through the relationships of care and obligation we experience daily. This intuition remains just below the surface, perhaps suppressed. But it lurks there nonetheless (Benjamin 2018, xx).

Introduction

The religious crisis of my adult life began in the summer of 2014 when, three months after the birth of my elder son, I returned to teaching Talmud. I was 32 years old, and for the preceding fourteen years had basked in an uncomplicated love for the rabbis. Studying and teaching their words had been not merely fascinating and delightful, but an apprenticeship across millenia in their brilliant, quirky scholastic spirituality. I harbored no reservations of any significance about the value of being their disciple, and of striving to become one of them.

Six years prior, these same rabbis and their teachings had ushered me across the threshold of marriage. As I entered into a previously-unimaginable depth of love and commitment, I discovered a new dimension of the rabbis’ wisdom: their laconic aphorisms and stories sketched the rapture and challenges of marriage. The work of growing
into living with and for another person made me more confident in my rabbinic guides, who linked the private, religious, and communal registers of their lives through covenanted love. I expected fatherhood to bind me into yet-deeper communion with my ancient teachers.

But for a new father besotted with his infant son, the rabbis’ alienation from their adult sons was very nearly the opposite of the life I aspired to. For the first time I noticed—with something like horror—how in the hour of death it was the rabbis’ students, not their children, who escorted them out of the world. Unlike for marriage, the Talmud’s reflections on childrearing are meagre, haphazard, and superficial, never attaining the same sustained level of discernment and reflection, on either practical or theoretical planes. Through my struggle to discern a legible imprint of parenting on the minds and souls of the rabbis, a previously invisible dimension of rabbinic life came into focus: to follow our rabbis’ path means to live a life relatively unshaped by one’s children.

It was not in the Talmud, but in the contemporary philosopher LA Paul that I found a resonant account of the (mostly) welcome upheavals of coming to know one’s child—and this despite the fact that, as a father, several critical dimensions of Paul’s experience are unavailable to me:

Before someone becomes a parent, she has never experienced the unique state of seeing and touching her newborn child. She has never experienced the full compendium of the extremely intense series of beliefs, emotions, physical exhaustion and emotional intensity that attends the carrying, birth, presentation, and care of her very own child... it is, for many people, a life-changing experience. That is, the experience may... radically [change] what it is like to be you (Paul 2015, 156).¹

It wasn’t that I criticized our rabbis of blessed memory for preferring their students over their children—rather I found myself incapable of sharing their goals; their preference was one that I could not share. Further, over those summer months, I found that my religious life was

¹ With thanks to Raphael Magarik for sharing Paul’s article with me.
completely remade by the responsibility and wonder of fatherhood—and could not imagine how or why the rabbis were not more preoccupied, not more visibly marked, by the presence of their children in their lives. On an evening walk pushing our young babies’ strollers, my friend Yonatan Brafman suggested, “Hegel would have been a better philosopher if he had changed more diapers”—and captured what I was, for the first time, thinking and feeling vis a vis the rabbis. As a straight, cis-gendered, male-identifying student of Torah, I was late to the party: after an easy run of it, I was now joining the ranks of my friends, colleagues, teachers, and students who inhabited an identity that set me apart from the rabbis, one that cast a critical light illuminating areas beyond the horizons of their world. It feels just right that in making the final edits to these paragraphs, I stopped several times to help this boy, now 6, fall back asleep.

This essay is the product of, and response to, this crisis: a search for spiritual ancestors, for the murmurs of voluble conversations that ought to have been. And it is also an attempt to write the next chapter of the very tradition I am analyzing, to realize some of the liberatory potential feminism offers to men who, like myself, are defined by our caring work, and to Torah itself.

One of the great blessings of living as a Jew today is the invitation to join the tradition of Jewish feminists devoted to unknotting the tangle of caring work, gender, and Torah. And one the great blessings of my life has been to learn with and from Merle Feld, whose poem “We All Stood Together” is perhaps the most evocative and enduring articulation of my spiritual crisis—and thus a natural starting place for this essay’s interpretive work. Then, with the framing of Nancy Hartsock’s Marxian theory of a feminist standpoint, we will undertake a close reading of a Talmudic narrative that both realizes the revelatory potential caring work holds for Jewish religious life and depicts the tragic failure to make a thoroughgoing realization of that potential due to the systematic dichotomy between the most intensive forms of caring work and full participation in rabbinic discourse.

From here the essay follows those rabbis who would have endorsed a Jewish version of Nel Noddings’s formulation of care ethics, “Human
Human caring and the memory of caring and being cared for... form the foundation of ethical response” (Noddings 2013, 1): Human caring and the memory of caring and being cared for form the foundation of interpreting Torah. My purpose here is to summon the liberatory potential of caring work in rabbinic thought by collecting its most prominent moments. This section is divided into two parts: one centering the less-intensive caring activities consistently endorsed by the rabbis, followed by a concluding discussion of the rare rabbinic passages that thematize the experience of parents and children in their caring relationships, straining to burst the bonds of dogma in the process.

Feld’s poem is not only a beginning—it is an account of the Jewish beginning, Sinai—so let us begin there as well.

Standing on Merle Feld’s Shoulders

Something like Whitehead’s quip that the European philosophical tradition “consists of a series of footnotes to Plato” is true of care ethics and Jewish thought: it consists of a series of footnotes to Merle Feld’s “We All Stood Together.” The poem, one of the most widely reprinted writings to emerge from American Judaism, reads:

    for Rachel Adler
    My brother and I were at Sinai
    He kept a journal
    of what he saw
    of what he heard
    of what it all meant to him

    I wish I had such a record
    of what happened to me there

    It seems like every time I want to write
    I can't
    I'm always holding a baby
    one of my own
    or one for a friend
    always holding a baby
    so my hands are never free
    to write things down
And then
As time passes
The particulars
The hard data
The who what when where why
Slip away from me
And all I’m left with is
The feeling

But feelings are just sounds
The vowel barking of a mute

My brother is so sure of what he heard
After all he’s got a record of it
Consonant after consonant after consonant

If we remembered it together
We could recreate holy time
Sparks flying (Feld 1984).

Feld speaks as a participant at Sinai whose memories of revelation have been eroded by constant immersion in childrearing. The vastly unequal (and, though not the poem’s theme, vastly unjust) burden of childrearing has undergirded women’s exclusion from the life of Torah after Sinai. Because this work is unceasing (“I’m always holding a baby”) and embedded in networks of support (“one of my own/or one for a friend”), it renders participation in the propagation of Judaism’s textual traditions impossible: “so my hands are never free/ to write things down/ /And then/ As time passes/ The particulars/ The hard data/ The who what when where why/ Slip away from me/ And all I’m left with is/ The feeling/ But feelings are just sounds/ The vowel barking of a mute.” This forgetting unfolds over many lines: the loss of hard data is a gradual slipping away “then/ as time passes”, occurring over years. We are confronted with a loss that cannot be justified by metaphysical or even biological essentialism, but is rather the product of years and generations consumed in childrearing, bifurcating the Jewish people into women who exclusively care for others and men who only study.
Part of the poem’s beauty and truth lies in its insistence that this sexual division of labor is detrimental to Torah itself. Feld’s closing image of “feelings/vowels” remembered together with “consonant after consonant after consonant” is that of the Torah read in synagogue: the written scroll is a string of consonants, at once cacophonous, admitting of an infinite variety of pronunciations, and mute, lacking the vowels that would render it audible and meaningful. Readers devote hours to memorizing these vowels (and accompanying cantillation notes) to ready themselves to perform the Torah anew each Sabbath morning. This ritual of reanimation recapitulates Sinai, pyrotechnics and all: “If we remembered it together/ we could recreate holy time/ sparks flying.”

Feld’s poem is the canonical statement of the paradox of Torah and childrearing: Torah is impossible because of childrearing, and also impossible without childrearing. And because of this, it is not only a lament for women who have been excluded from the study of Torah, but also for the Torah that has been rendered static and lifeless for lack of feeling. The tradition Feld inherited contains this problem, but not its resolution, which is found not in the past but in the subjunctive: “If we remembered it together/ we could recreate holy time.” As a piece of Torah—a devoted commentary on Sinai—“We All Stood Together” is the first step of its own realization, a faithful recreation of the holy moment of Sinai.

Rereading Feld’s essay as a new father, and newly troubled student and teacher of Talmud, I confronted the genderbending nature of what I was attempting, and of who I had become. A reader and author of Torah who also devotes hours and years to caring for their children, and supporting friends who do the same—is a new type of creature who holds, within themselves, aspects of the gendered dichotomy Feld describes, and a product of feminism. This journey and this essay consist of a series of footnotes, further realizations of her vision of Sinai.
Care’s Conflicts: Rabbinic Narrative and Feminist Theory

The Talmud conveys its paradoxes in miniature narratives rather than poems. In the following story, which appears in the context of a meditation on the religious significance of visiting the sick, we hear something like an anticipatory echo of Feld’s caring-Torah paradox—in miniature and conflicted, but assonant nonetheless. It takes only a few lines to convey the urgent religious vitality of caring work:

One of Rabbi Akiva’s students became ill and none of the sages went to visit him. Rabbi Akiva went in to visit the student, and in preparation for the visit they cleaned and attended to his room. And he lived. The student said, “My master, you brought me back to life.” Rabbi Akiva went out and taught, ‘Anyone who does not visit the sick is as if he has spilled blood’ (bNedarim 40a).

The ‘moral’ of this story is the potential of caring work to create Torah in ways that Torah study alone cannot. A new piece of Torah, the equation between failing to visit the sick and murder, is learned not through the analysis of a text—and not by the scholars who continued studying within the rabbinic academy rather than leave it to visit their ailing colleague—but through attending to, and listening to, those in need of medical care. No textual authority is cited for Rabbi Akiva’s claim; the recovering student’s gratitude is sufficient authority for Rabbi Akiva’s pronouncement. Here the Talmud is precise in its use of prepositions: Rabbi Akiva goes in to visit the sick student and then comes out from there to the academy—meaning is centered on the dangerously ill student and his recovery, while those who mistakenly see themselves to be at the center of religious life due to their proximity to texts and teachers are revealed to be marginal. The beating religious heart of the story, the place where Torah is created and in reference to which other places take on their significance, is not the house of study but the chambers of the sick. Feld’s promise

---

2 For a methodologically sound account of rabbinic narrative, see the introduction to Jeffrey Rubenstein’s Talmudic Stories: Narrative Art, Composition, and Culture.
3 All translations of Biblical and Rabbinic passages are my own.
is made good here in all-male miniature: the consonants of the tradition brought to life through a breath of caring work.

This story not only praises caring work, it also delivers a stinging indictment of a certain type of intellectual and religious life. When a student falls ill, he no longer matters here—the life of the institution moves on, and he is consigned to the ranks of irrelevant outsiders. Rather than seeing the Torah as a precious gift and an expression of God’s love for the Jewish people (Rabbi Akiva’s formulation in mAvot 3:14), here each student is valued only as a means to advancing the study of Torah. Such a morally perverse institution is also intellectually and spiritually bankrupt: the definition of a rabbinic academy lies in its ability to generate new Torah ideas (Rabbi Yehoshua on bHagigah 3a). In a deep and bitter irony, a myopic focus on the advancement of Torah to the exclusion of all else has undercut this academy’s ability to achieve the only thing it values.

Here things take a tragic turn. The story of Rabbi Akiva visiting his student appears in its original Talmudic context as a story within a story:

Rav Helbo was sick.
Rav Kahana went out and announced, “Rav Helbo is ill!”
No one came.
Rav Kahana said to the sages, “Didn’t it happen that one of Rabbi Akiva’s students became ill…”

Rav Kahana and Rav Helbo, living roughly a century after Rabbi Akiva, inhabit an academy as callous as Rabbi Akiva’s. Rabbi Akiva’s intervention in the culture of the academy evidently failed to take, and Rav Kahana admonishes his colleagues for failing to learn from their predecessors’ dangerous and soul-sapping mistakes. The tragedy here is the obdurate nature of the academy, its apparent inability to resist its own worst solipsistic impulses despite claims to revere the man who rebuked them.

The rigidity of the all-male rabbinic academy, obsessed with studying and teaching unchanging consonantal texts, seems related to the critical silence of this story. We hear a cry of gratitude from the
recovering student, and we learn Rabbi Akiva’s pronouncement on the paramount significance of visiting the sick. But those who “cleaned and attended” to the student—his actual primary caretakers—never speak, or at least their voices are not preserved in the Talmud (nor is their silence noted).

Three personae, and the relationships between them, define this story. There are those who do nothing but study Torah, even when their fellow students of Torah fall ill—practitioners of an abstract masculinity, disembodied and unencumbered by relationships of caring. At the other extreme are those whose occupation, paid or otherwise, is the care of people in a state of dependency. And in the middle is Rabbi Akiva the protagonist, alive to the urgency of caring for his students but free from the most insistent types of caring work. Rav Kahana reveals that the conflict between Rabbi Akiva and the disembodied students continues from one generation to the next, and that Rabbi Akiva loses.

These personae and the relationships and conflicts between them are precisely parallel to the framework developed by Nancy Hartsock in her foundational essay “The Feminist Standpoint: Developing the Ground for a Specifically Feminist Historical Marxism.” Hartsock’s influence on care ethics is profound, if often hidden: Sara Ruddick credits her with providing “both an epistemological and political base” for her project of “maternal thinking.” (Ruddick 1989, 130). The specific feature that makes Hartsock particularly suited to Jewish thought is the way that she builds her account of the political and ethical significance of women’s caring work by extending a Marxian account of male conflict—allowing a single framework to hold both the conflict between Rabbi Akiva and the other rabbis, and the silenced caring workers all at once.

Hartsock begins with a Marxian account of the all-male conflict between workers and capitalists. This conflict is not only political and economic; it is epistemic as well. The very point at which they intersect—the labor market—is experienced and conceptualized by each party in fundamentally incompatible terms. Quoting Marx, Hartsock describes the scene from the employer’s perspective: “they
exchange equivalent for equivalent… work[ing] together to their mutual advantage” (Hartsock 1983, 38). Human labor is commoditized and exchanged, and to the employer it makes little difference that this commodity is the expression of a full human being, rather than widgets. This perspective is also—and not coincidentally—the regnant perspective of economics.

But from the standpoint of the worker the interaction is fraught and degrading. Continuing to quote Marx,

the money-owner, now strides in front as a capitalist; the possessor of labor-power follows as his laborer. The one with an air of importance, smirking, intent on his business; the other timid and holding back, like one who is bringing his own hide to market and has nothing to expect but—a hiding (Ibid.).

These two perspectives are not of equal value: “the vision available to the rulers [is] both partial and perverse”, whereas “as an engaged vision, the understanding of the oppressed, the adoption of a standpoint exposes the real relations among human beings as inhuman” (Ibid., 37). And just as the capitalist’s perspective is reflected in mainstream economic theory, the worker’s is expressed in Marxian theory.

The contrast between workers’ and capitalists’ perspectives extends to the goods they produce together and sell. For the capitalist, exchange-value is primary, whereas “the proletarian and Marxian valuation of use over exchange [is] on the basis of involvement in production, in labor” (Ibid., 39). It is the immediate, sensuous relationship of a worker to his work—the skill, craft, effort, and care that go into fashioning something—that guides his understanding of it. And here, too, Hartsock argues that the worker’s standpoint is privileged: “the epistemology growing from exchange not only inverts that present in the process of production but in addition is both partial and fundamentally perverse” (Ibid.).

The preceding is Hartsock’s recapitulation of Marx’s account of epistemologies in the conflict between capital and labor. Now Hartsock makes the critical observation that both parties to this conflict
are men, and that women and/as care-takers are systematically excluded from this account. Not only this, but the relationship between a proletariat man and his wife in a patriarchal society recapitulates the relationship between that man and his employer and the worker:

If, to paraphrase Marx, we follow the worker home from the factory, we can once again perceive a change in the *dramatis personae*. He who before followed behind as a worker, timid and holding back, with nothing to expect but a hiding, now strides in front while a third person, not specifically present in Marx’s account of the transaction between capitalist and worker (both of whom are male) follows timidly behind, carrying groceries, baby, and diapers (Ibid., 41).

Not only are the relationships of domination similar between the pairs capitalist/worker and husband/wife, so too is the difference in the directness of their respective labor. Contrasting a woman engaged in caring work with a laborer, Hartsock says “Her immersion in the world of use—in concrete, many-qualities, changing material processes—is more complete than his.” (42) Or, a bit later (43) she contrasts the capitalist, “A life structured completely by commodity exchange and not at all by production, and at the furthest distance from contact with concrete material life” with a male worker, who occupies “A way station on the path to the other extreme of the constant contact with material necessity”—that other extreme being a woman immersed in caring labor.

Like the proletariat perspective of which it is an extension and radicalization, the feminist standpoint reveals the “partiality and perverseness” of “abstract masculinity” (44):

the female experience not only inverts that of the male, but forms a basis on which to expose abstract masculinity as both partial and fundamentally perverse, as not only occupying only one side of the dualities it has constructed, but reversing the proper valuation of human activity (46).

The parallels between the rabbinic beit midrash and Hartsock’s characterization of class conflict are numerous and significant. First, each is the scene of a conflict between more humane and abstract
conceptions of the same production, be it Torah or economic. Second, both Hartsock and the Talmud see the abstract conceptions of production and Torah respectively as perverse. And third, both the classic capitalist economy and the rabbinic academy marginalize those most deeply engaged in caring work.

Unlike the Marxian account, the positions in the intra-rabbinic conflict do not derive from class conflict. To account for Rabbi Akiva’s unique, and uniquely humane, conception of Torah study we can refer to a tradition of roughly the same antiquity as our initial story. This tradition remembers Rabbi Akiva’s beginnings as a shepherd. At age forty Akiva experienced a conversion based on an experience of Torah’s life-shaping power which led him to, along with his son, begin the study first of Hebrew and then of Torah. In keeping with Hartsock’s manner of explanation, it may have been his decades of sensuous labor that prejudiced Rabbi Akiva towards a practice of Torah study as a fundamentally embodied undertaking.

Here Rabbi Akiva’s internalization of this conflict comes to the fore. As an individual, he knew that he must visit his ill student. But reflected through his students’ inaction, we see that he has failed to incorporate this knowledge into his role as teacher. On this reading, Rabbi Akiva’s labeling those who do not visit the sick as murderers is not a realization of the urgency of caring work, but a breakthrough in his ability to formulate this urgency in the language of Torah, and to incorporate this awareness into his role as a teacher. And here again, Hartsock clearly portrays Rabbi Akiva’s struggle against the anti-caring ethos of the rabbinic academy, and the significance of his rupture with it:

the ruling group’s vision may be both perverse and made real by means of that group’s power to define the terms for the community as a whole... A standpoint... is achieved rather than obvious... [it] represents an achievement both of science (analysis) and of political struggle (Ibid., 39).

Now we can imagine a rabbinic figure who, like Rabbi Akiva, engages in caring work (visiting the ill student) but does not succeed in realizing the intellectual, religious, and political potential of this work.
Such a man would remain in Rabbi Akiva’s conflicted status: studying Torah and caring for others, including his own children, all the time preserving the privileged status of abstract Torah and never transforming his caring labor into a standpoint.

This character is the ideal type of rabbi, and my crisis of summer 2014 was the realization that I could not be a student or teacher of Torah in their mold, nor did I want to be.

On the one hand, the Talmud’s rabbis were, nearly without exception, fathers. And they understood themselves to be obligated to their children in diverse ways: to circumcise him, to teach him Torah and a trade, to help him find a wife, Rabbi Akiva adds—to teach him to swim (yKiddushin 19a). But they saw this paternal care, as intensive and extensive as it may be, as insignificant compared to the teaching of Torah. Considering a father who, like Rabbi Akiva’s father, could not personally teach his son Torah, the Mishna offers a values-clarification exercise that cements the supremacy of the teacher over the father. In considering the case of a boy who finds two lost objects, each of which he is obligated to return to its owner, the Mishna asks which one takes temporal precedence. It answers this practical question by creating a metaphysical hierarchy:

If he found [an object belonging to] his father and [one belonging to] his teacher, his teacher’s comes first. For his father brought him into this world, but his teacher who taught him wisdom brings him into the world to come (mBava Metzia 2:11).

We could scarcely ask for a tighter fit between theory and example than that provided by Hartsock’s characterization of masculinity:

[T]he male experience is characterized by the duality of concrete versus abstract. Material reality as experienced by the boy in the family provides no model, and is unimportant in the attainment of masculinity. Nothing of value to the boy occurs with the family, and masculinity becomes an

---

4 The absence of any of these sources or themes marks a major deficiency in Daniel Boyarin’s characterization of rabbinic masculinity in Unheroic Conduct: The Rise of Heterosexuality and the Invention of the Jewish Man. For his single, and unrepresentative, discussion of fatherhood, see p. 113.
abstract ideal to be achieved over the opposition of daily life. Masculinity must be attained by means of opposition to the concrete world of the household into the masculine world of public life. This experience of two worlds, one valuable, if abstract and deeply unattainable, the other useless and demeaning, if concrete and necessary, lies at the heart of a series of dualisms (Ibid., 45).

The Mishna employs a set of correlated, hierarchical dualisms to define masculinity: father/teacher; family/Torah; this concrete, necessary world/the valuable, abstract world to come. Hartsock’s last sentence, about the “experience of two worlds… at the heart of a series of dualisms” is uncannily apt. Elsewhere the Mishna labels the view that “there is only one world” as heresy (mBrachot 9:5): the belief in two worlds is not one belief among many, but sits “at the heart” of the rabbis’ life and worldview.

At stake here is not whether the rabbis performed childrearing work, but how they appraised the value of childrearing work—both theirs and, more broadly, that of their wives and their children’s other caretakers. The elevation of students over sons is not confined to this Mishna; it is a widespread and stable feature of the rabbinic deathbed scene, of the Talmud’s most prevalent type-scenes.

Rabban Yohanan ben Zakkai, the founder of the Rabbinic movement, used his final breaths to offer religious instruction to his closest disciples; his children, present or absent, were invisible (bBrachot 28b). While Rabbi Yehuda ha-Nasi, author of the Mishna, suffered from the disease that would kill him, his students fought with a female servant over the course of his treatment, and were the first to learn of his death. Again, his children were completely absent from the scene (bKetubbot 104a). Rav, the founder of the great Babylonian academies, was escorted to his final resting place by a group composed exclusively of his students, whose mourning is depicted with great pathos; his children’s coming-to-terms with his death receives no mention in the Talmud (bBrachot 42b).

The one deathbed scene featuring a son only confirms this generalization: as Rabbi Eliezer ben Hycanos was dying, his son Hycanos attempted to help his father remove his phylacteries. Rabbi Eliezer
responded to this attempt at care by rebuking his son and accusing him of erring in the evaluation of competing legal principles. Hyrcanos departs, and his father dies surrounded by his worthy students, not the failed student who is embarrassingly also his son (bSanhedrin 68b, yShabbat 2:7).

It is irrelevant whether these Talmudic accounts reflect “what really happened” in the last moments of these men’s lives. As religious literature, the message of these stories is a clear, consistent mirror image of the Mishna’s hierarchies. For the Mishna, students owe their teachers more than their fathers; the deathbed scenes depict the Talmud’s greatest teachers as desirous of the company of their students, rather than their sons, in the defining moment of death.

To summarize, the Hartsock’s categories reveal the conflicted roles of caring labor in the Talmud. The rabbinic academy itself is the scene of a conflict between abstract masculinity and a masculinity created, partially, through engagement in sensuous caring work. But the academy excludes those most intensively engaged in caring work, and denigrates the significance of its members’ childrearing work. But Hartsock’s project, like Feld’s, is not merely descriptive; it is also liberatory:

Generalizing the activity of women to the social system as a whole would raise, for the first time in human history, the possibility of a fully human community, a community structured by connection rather than separation and opposition (Ibid., 49).

With this framing in hand, the second half of the essay explores the liberatory potential of the four rabbinic texts that most clearly place human caring and the memory of caring and being cared for at the foundation of interpreting Torah. The first two of these are, like the story of Rabbi Akiva, Talmudic, and they make strong claims for the necessity of visiting the sick and other less-engrossing varieties of caring work for proper interpretation of the Torah. As such, these passages contain a partial liberatory potential similar to that of a male proletarian standpoint. The latter two are later midrashim, and represent the most theological potent realization of the potential of
childrearing in the classical Jewish canon. These are Judaism’s first hints “generalizing the activity of women to the social system as a whole,” our tradition’s embryos of a community structured by connection.

A Rabbinic Standpoint of Care

Though the Talmud occasionally employs the metaphor of father for God, Benjamin’s report that “one of the most important elements of human experience, childrearing, has been all but invisible to normative religious thought; a cavernous intellectual silence has reigned where centuries-long, voluble conversation ought to have been” is profoundly accurate. But other less intensive varieties of caring work—and the liberatory possibilities of their associated standpoints—appear. The two most significant are the decisive role of caring labor in Rabbi Hama’s characterization of God in the Torah (and the attendant normative implications), and Rabbi Yohanan’s claim that abstract interpretation of Torah is not only perverse, but the cause of Judaism’s greatest calamity, the destruction of Jerusalem.

The Partiality of Care-Free Torah

The central eruption of caring work’s revelatory power in the Talmud is a claim by Rabbi Hama son of Rabbi Hanina, audacious in its interpretive methods and its theological content. It is perhaps the earliest recognizable record of the sound of the Torah’s glistening black consonants spoken in the breath of caring and being cared-for—and leaves us yearning for a more complete fulfillment of its potential:

Rabbi Hama son of Rabbi Hanina said: … follow the Blessed Holy One’s attributes. As God clothes the naked, as it is written, “The Lord God made leather clothing for the earthling and his wife, and clothed them” (Genesis 1:23)—so you, too, clothe the naked. The Blessed Holy One visited the sick, as it is written, “God appeared to him near Mamre’s grove” (Genesis 18:1)—so you, too, visit the sick. The Blessed Holy One comforted mourners, as it is written, “And after Abraham’s death, God blessed Isaac” (Genesis 25:1)—so you, too, comfort the mourners. The
Blessed Holy One buried the dead, as it is written, “And [God] buried [Moses] in the valley” (Deuteronomy 34:6)—so you, too, bury the dead (bSotah 14a).

Rabbi Hama characterizes four varieties of caring work—clothing the naked, visiting the sick, comforting mourners, and burying the dead—as ‘attributes of the Holy Blessed One.’ The three we have not yet encountered are similar to visiting the sick: each is less all-encompassing, less definitive of a social role, and less gendered than child-rearing. Further, each state of vulnerability is one that could befall an able-bodied man, and each remedy maintains his dignity and connection to a larger community during a time of potential isolation and degradation. But none touch on the reproduction of humanity through child-rearing, nor do any address “caring for the severely developmentally disabled… distinguishable from the model of maternal care necessary for an ‘intact’ flourishing child” (Kittay 1999, 23).

The key to Rabbi Hama’s statement is its implausibility—but not impossibility—as a reading of the text of the Torah. As depicted in the Bible God creates the world, enters into covenants, grants fertility, delivers Israel from Egypt, sustains the Israelites in the desert, and reacts jealously to idolatry. Rabbi Hama is not wrong per se in his description of God, but he has moved God’s role of caring labor from its (at best) marginal place in the Torah to the very center of theology. And in parallel, he moves God’s might and miracles far into the background, denying them the status of a divine attribute demanding human emulation.

For Rabbi Hama, caring labor does not displace Torah as the means to describing God and the human response to God’s presence. Rather, in the Noddings-esque formulation I have been using, human caring and the memory of caring and being cared for provide for him the foundation of interpreting Torah. And just as for Rabbi Akiva, we should acknowledge Rabbi Hama’s innovative description of God, and the Jewish response to God, as an interpretive achievement. His achievement is not in the virtuosity of its linguistic play, but in its audacious centering of caring labor in the face of textual evidence to
the contrary—its insistence on both the incompleteness of the Torah’s consonants and the power of its caring-infused vowels. Given the now-canonical status of Rabbi Hama’s words, printed as glistening black consonants in every copy of the Talmud for all time, it is nearly impossible to appreciate the unprecedented nature of this caring-centered depiction of the God of Israel.\(^5\) Sparks flying.

Rabbi Hama was not alone. His colleague, Rabbi Simlai, extended his interpretation:

Rabbi Simlai taught: The Torah’s beginnings and ends are in *gemilut hasadim*. Torah’s beginnings are in *gemilut hasadim*, as it says “The Lord God made leather clothing for the earthling and his wife, and clothed them.” And the Torah’s ends are in *gemilut hasadim*, as it says, “And God buried Moses in the valley” (Ibid.).

Here we have an assertion that the fundamental nature of the Torah, its alpha and omega, is a type of caring work. Rabbi Simlai turns Rabbi Hama’s depiction of God into an open-ended interpretive program. The envelope of God’s caring actions means that even those Biblical scenes most resistant to care-centered interpretations will, when read correctly, yield up their meanings as templates of human care. It is hard not to be moved by the humanity and courage of these passages. We can only guess at the revelatory experiences of care that Rabbi Hama and Rabbi Simlai carried so deeply in their hearts as to supply the inspiration for their reimaginings of Torah. And it is equally hard not to feel frustration at what could have been realized had their caring labor gone further and deeper.

*The Perversity of Uncaring Torah*

Hartsock repeatedly labels abstract masculinity ‘partial and perverse.’ It is one thing to call a caring-deprived religious life partial, claiming that it is blind to certain essential religious motifs. It is something else entirely to criticize the pious practice of one’s own tradition as

\(^5\) Rabbi Hama is working from an earlier, similar passage in Sifrei Devarim 49. This parallel, however, describes a series of Divine virtues—kindness, compassion, grace—rather than concrete caring activities.
destructive, as Rabbi Akiva did in likening the students of his academy to murderers. Rabbi Yohanan, in a complex and layered text, does just this (bBava Metzia 30b).  

This Talmudic passage opens with Rav Yosef parsing Exodus 18:20, where God instructs Moses on how to guide the Jewish people: “And you shall warn them regarding the rules and instructions. And you shall make known to them the way they should walk in, and the deeds they are to do.” Verses such as these, replete with apparent redundancies, are easy fodder for rabbinic interpreters. Rav Yosef suggests that each distinct phrase within God’s instruction contains a different type of activity, beginning with the types of dependency work enumerated by Rabbi Hama, and culminating in legal judgment:

Rav Yosef taught:
“you shall make known to them”: learning a trade
“the way”: acts of lovingkindness
“they should walk”: visiting the sick
“in”: burial
“and the deeds”: the law
“they are to do”: beyond the letter of the law.  

Rav Yosef sees Exodus 18:20 as narrating the evolving responses to the fact that “dependency is inescapable in the life history of each individual” (Kittay 1999, 29). We are born without the means to sustain ourselves and require teachers to attain those means; we fall ill and find ourselves in need of the care of those who are well and skilled; we cannot arrange for our own dignified burial. By embedding the law within a litany of caring activities directed towards the

---

6 One other area of rabbinic practice is shaped by caring: the conception of the work of a teacher. I have omitted these passages because they are presented differently (the paradigmatic act of caring is preparing and serving food)—but they are worthy of attention, particularly as articulated by the influential 20th century orthodox rabbi Moses Feinstein. I hope to present this material in a future essay.

7 This phrase, literally “within the line of the law”, is famously difficult. Its classic treatment in English-language scholarship is Aharon Lichtenstein’s 1975 essay “Does Judaism Recognize an Ethic Independent of Halakhah?”. 
various needs of human creatures, Rav Yosef flatly denies any imperious claims the law might make as a program of obedience to be compelled on its subjects. Rather than presiding over individuals from the perch of authority, the law-practitioner is tasked with attending to the needs of vulnerable individuals who stand before him. And for this reason, the law culminates in creative responses to individual circumstances, going “beyond the letter of the law.”

The Talmud rightly sees the following statement of Rabbi Yohanan’s as an extension, radical as it may be, of Rav Yosef’s idea:

As Rabbi Yohanan said: “Jerusalem was destroyed only because the judges there implemented the law of Torah.”

Should they have used Zoroastrian\(^8\) law instead?!

Rather: They enforced the law of the Torah, and did not go beyond the letter of the law.\(^9\)

Rabbi Yohanan’s statement is astonishing. Rejecting the ancient traditions that blame the destruction of Jerusalem on Israel’s sins, be they idolatry (Deuteronomy) or injustice (Isaiah), Rabbi Yohanan sees Israel’s downfall as the product of a strict, mechanical, and ultimately devastating application of God’s own law. The Talmud hastens to add that the destructive effects of directly applying the Torah’s norms are not the result of any particular deficiency in the Torah, deficiencies which could be remedied by substituting a different body of norms in its place. Rather, the problem is in judicial activity which sees itself as a text-driven process of interpretation, rather than a world-facing act of caring. Just as surgery, stripped of its therapeutic aim, becomes vicious assault—enforcement of the law animated by

\(^8\) This is Michael Sokoloff’s translation in *A Dictionary of Jewish Babylonian Aramaic*.

\(^9\) The reading offered here is of the Talmud as presented in its final editorial stage. Chronologically, Rabbi Yohanan preceded Rav Yosef, and the section from “Should they have...” to the end of the passage is the voice of the Talmud’s anonymous editors rather than Rabbi Yohanan himself. Even if the position I have attributed was not that of Rabbi Yohanan himself, it is nonetheless the position attributed to him by the Talmud’s editors.
anything other than care for those affected is nothing other than wanton destruction.

Like Rabbi Hama, Rav Yosef and Rabbi Yohanan are aware of the possibility of interpreting the Torah based on purely internal, textual grounds. And again, like him, they both reject this practice, insisting—for reasons as mysterious as ever—that care and the memory of care form the foundation of Torah.

Rabbi Yohanan goes a step further, claiming that Torah unaffected by care is not merely partial and incomplete, but perversely destructive. The determination of whether a given judicial decision fulfills God’s plans for the world cannot be made on terms internal to the texts of the tradition themselves, but only from the perspective of a person who has themselves been shaped by extensive care-giving work. Caregiving occupies a critical hermeneutic function, insisting that Torah be lived with, and as, care.10

The First Sounds of a Parental Standpoint

This essay began six years ago in a search for spiritual ancestors, and it ends with notes of hope. Once or twice, sometime between the Talmud and modernity, rabbis have authored new Torah from the foundational role of caring and their memories of caring. These haunting stories—both retellings of the Exodus, pregnant as it is with the themes of upheaval and liberation—point the way to a more humane and more Divine future, to the recreation of holy time.

Children’s Memory of Care as Theological Paradigm

One rabbinic text, a retelling of the Exodus story, develops the poignantness of children’s memories of care as a theological paradigm (Devarim Rabba, Parshat Devarim).11 Beginning with the Israelite

10 A related text (tSanhedrin 7:3) requires judges in capital cases to have fathered their own children. It is unclear how much to make of this case: it may be a rare example of rabbis understanding fatherhood to have far-reaching implications on character and religious judgments, but it may also be a minor detail in the context of the general aversion to actually finding any defendant guilty of a capital crime.

11 My thanks to Elie Kaunfer for introducing me to this midrash.
mothers’ crushing inability to provide basic care to their infants during the most severe stages of Egyptian oppression, the midrash begins by depicting God as intervening to arrange for, or directly provide, the babies’ care:

“I made you grow like the grass of the field.” How so? When Pharaoh decreed that all newborn boys would be cast into the sea, what did the women do? When a Jewish woman felt contractions beginning, she would go out to give birth in a field. Once she had given birth, she would look upward and say, “You said ‘Be fruitful and multiply,’ and I’ve done my part. Now You do Yours.”

What would the Egyptians do? When the Egyptians saw the Jewish women going out to the fields to give birth there, they would watch them from a distance. Once the Jewish women had given birth and returned to the city, the Egyptians would pick up rocks and go to kill the babies. But the infants would be swallowed up in the field and would reappear far away, only to be swallowed up again and appear again elsewhere—again and again until the Egyptians got tired and went away.

And how did the children live in the fields? Rabbi Levi said that the Holy Blessed One would assign two angels to each one, one to wash her and one to clothe her, and He nursed and anointed them, as it says, “He nursed you with honey from the rock” (Deut 32:13), and “I washed you with water and clothed you in garments” (Ezek 16:10). Rabbi Hiyya the Great said, “It wasn’t the angels who did that, rather the Holy Blessed One Himself as it says, ‘I washed you.’ Had it said, ‘I caused you to be washed’ (hifil—with the addition of a yod), I would have thought that perhaps it was by an angel. But since it says, ‘I washed you,’ and not an angel. May the Name of the Holy Blessed One be blessed, since He Himself cared for them.

This is a story of an oppressive government’s policy of family separation. At this mid-stage of the story (the families will eventually be reunited), Rabbi Levi and Rabbi Hiyya the Great enter into a theological debate about the directness of God’s involvement in caring for the vulnerable Israelite babies. Rabbi Levi appears to believe that it is in directing, rather than directly providing, the children’s care that God takes on maximum dignity. Rabbi Hiyya the Great disagrees, seeing God’s direct engagement in caring work not as debasing but as elevating.
A foundational 1983 essay by Berenice Fisher and Joan Tronto illuminates this dispute by distinguishing between *caring about*, *caring for*, *caregiving*, and *care-receiving* (40-44). *Caring about* means that a person’s affective state is opened to someone or something else, but without necessarily taking any responsibility for or action on behalf of that someone or something—one can care about an election in a far-away country, the growth of a plant, or the winners of this year’s Oscars. *Caring for*, on the other hand, means taking responsibility for the wellbeing of someone or something—but not necessarily doing the work of the cause. Fisher and Tronto’s examples include the way that parents can care for a child by selecting a good school for them and communicating with teachers, or that grown children care for elderly parents by ensuring they receive proper medical care. We are capable of caring for far fewer entities than we can care about. Finally, *caregiving* is the actual, usually physical, work that addresses the needs of others: the work of teachers, nursing assistants, daycare workers, and of course parents directly involved in their children’s lives.

With Fisher and Tronto’s categories in hand, Rabbi Hiyya the Great’s critique of Levi comes into sharp focus. Both rabbis agree that God cares about the infants’ welfare, and that God cares for them; they differ on whether it is God or angels who are their caregivers. Rabbi Levi describes God as caring for the Israelite babies, arranging their care through angelic agents. God sits at the top of a managerial hierarchy, and for Rabbi Levi this is a privileged position, befitting God’s dignity; perhaps infants’ unruliness is incompatible with divine transcendence. But Rabbi Hiyya the Great inverts this hierarchy: it’s critical that God is the babies’ caregiver, performing the concrete dependency work necessitated by these children’s total vulnerability and forced separation from their parents. The implications of these views for the status of caring labor is stark: Rabbi Levi’s theology reinforces the marginalization of caring work and care-workers; Rabbi Hiyya the Great presents a theology that denies any metaphysical grounding to a hierarchy that elevates those who coordinate care over those who provide it.
The story concludes with a poignant set of reunions:

The babies grew in the field like grass, and after they grew, they returned to their homes in flocks—this is what Ezekiel said, ‘You grew like the grass of the field.’ How did they know which home was their family’s? The Holy Blessed One accompanied them, pointed each and every one to his parents’ home, and said, ‘Call your father this and your mother that.’

The children would say to their mothers, “Don’t you remember when you gave birth to me, on this day in that field, five months (years?!—JR)\textsuperscript{12} ago?”

And she would ask him, “Who raised you?”

And he would say, “A special, handsome young man, unlike anyone else. He brought me here, and he’s right outside.”

She would say to him, “Come and show him to me.”

And they would go outside and search all the alleyways and everywhere, but they couldn’t find him. When they came to the sea, they saw him, and they pointed him out to their mothers with their fingers and said to them, “This is my God, and I will honor Him”—this is the one who raised me.

God facilitates the families’ reunions, then vanishes. On the story’s internal evidence, it is clear that Rabbi Hiyya the Great is right: the intimacy established between God and the Israelite children through God’s direct caring sets the stage for the poignant final scenes of search and reunion.

Here we have, for the first time, a compelling depiction of “memories of being cared for.” In receiving attentive care from God, the children form an attachment to the Holy Blessed One. These small people’s touching mixture of love and wonderment towards their mysterious caretaker offers a paradigm for the human search for God. The connection between receipt of good-enough care and the capacity for trust in general, and faith in God in particular, is implicit in the very language of Biblical Hebrew, where both are signified by the

\textsuperscript{12} The Lieberman edition reads “months.” I’ve suggested the alternative reading “years” based on the developmental stage of the children at this point in the story: walking, talking, able to remember instructions and participate in dialogue.
Hebrew root *aleph-mem-nun* (Aranoff 2017). As far as I am aware, this midrash is the Jewish text to use a child's pursuit of her mysteriously missing mother as a model of the human quest for God.

Prior to this text, the tradition's exclusive paradigm for such an infatuated search was the lovers of the Song of Songs. By reusing imagery from Song of Songs (‘handsome’ (5:2), ‘he brought me’ (2:4), and ‘none like him’ (a paraphrase of 2:3)) the midrash signals that it sees itself as traversing the same terrain as the Biblical love poem. This shift from adult romantic preoccupation to a small child’s perspective invites the kaleidoscopic richness of their experiences of their parents—the inexplicable departures, anxious anticipation, and jubilant reunion—into the heart of religious life. Noddings’s formulation is unerring here: the memory of receiving care is placed at the foundation of a life of Torah.

*Parents, Neighbors, and Anti-(God’s) Militarism*

A final text makes audible the voices of mothers holding babies—their own, and especially their neighbors—in their desire to protect innocent children against every threat, even God. I know of no other classical Jewish text that harnesses the moral stance of devoted parents to such theological effect.

The scene is Egypt immediately after Moses’s declaration of the tenth and final plague: at midnight, God will strike down all the firstborn (Exodus 11:14), except those protected within the confines of Israelite homes. A minor problem in the Exodus narrative provides the opening for this piece of rabbinic storytelling: some Egyptians reacted to Moses’s announcement of the eighth plague, hail, by moving their servants and cattle indoors (vv 9:20-21) to protect them. Our later rabbis rightly wonder what efforts Egyptian parents, or firstborns themselves, would have gone to in those dreadful hours of anticipation (Exodus Rabbah 15:2):

> When Moses said: “I will smite all the firstborn” (Ex. 12:12), some of the Egyptians were afraid and some weren’t. Those who were afraid brought their firstborn to an Israelite and said: “Please, I beg you, take him in with you for the night.”
The image is devastating. Desperate Egyptian parents, fearing that their beloved children have only a few hours to leave, knock on the doors of their Israelite neighbors. Some of the Egyptian children are infants, carried by their parents and placed in the arms of Israelite mothers. Some are older, and walk alongside their fretting parents; their Israelite neighbors had watched them grow up and perhaps cared for them.

Like the Egyptian parents, we wait to find out if the Israelite parents will offer refuge to these otherwise-doomed children:

> When midnight struck, God killed all the [Egyptian] firstborn. As for those who were in the houses of the Israelites, God passed between the Israelites and the Egyptians, taking the life of the Egyptian and leaving the Israelite alive. The Israelites woke up and found the Egyptian children dead amidst their families as it says, “I will pass over you, and there will not be harm to you.”

The Israelite parents opened their homes in an effort to save the children of their Egyptian neighbors. They failed: God nonetheless struck down the Egyptian children taking shelter in their homes.

A cross-national network of Israelite and Egyptian parents cooperate to save their children; in Feld’s imagery we have here mothers—Israelite—holding the babies of their Egyptian neighbors. The very Israelite parents who, along with their children, stand to be liberated through God’s decimation of Egypt, nonetheless work to frustrate God’s plans.

It is hard to imagine a closer parallel than plate 6 of Käthe Kollwitz’s 1923 series War (Fig. 1). Kollwitz created the piece as a way of grieving for her son Peter, who was killed during the first World War—the type of loss the Israelite and Egyptian are endeavoring to prevent. Sara Ruddick describes a similar sculpture of Kollwitz’s as “a circle of defiant mothers, arms outstretched, joined to protect the children massed behind them” (Ruddick 159). More generally, the banding-together of parents in opposition to the military planning of those who claim to be acting in the interests of those very parents and their children is the essence of the “maternal antimilitarism” that
Ruddick sees as the culmination of caring work (Ibid.). Rather than assimilating God to a caring paradigm, as we saw in R’ Hama’s interpretation and Rabbi Hiyya the Great’s doting Divine caretaker, the rabbis who wrote our midrash imagine a circle of caring parents linking arms in defiance of God.

The midrash does not end here, perhaps because ending poses a threat to the religious commitments of its authors. A final line resolves this tension—unsatisfyingly—as it depicts the Israelites expressing not anger or horror, but gratitude upon realizing that their Egyptian neighbors had been killed:

The Israelites began to sing: “At midnight I arise to thank You”—which is why it says, “for all Your righteous judgments” (Psalm 119:62).
This last moment collapses the theological crisis by paying the price of rendering the Israelite characters incoherent—why would they thank God for an action they had tried to thwart? But perhaps this is not their entire meaning. The Jewish liturgy’s name for the blessing over devastating news, “asserting the righteousness of the decree,” is close to the Israelite’s mention of “all Your righteous judgments.”

The Israelites both thank God and mourn the death of the children of their Egyptian neighbors. And so—just maybe—this story leaves us with a capacious depiction of the irreducible ambivalence held by parents whose children are the beneficiaries of injustice. But the protest against God’s injustice, while muted, is never fully quieted. The sparks from reading the Torah with the vowels of feeling, once ignited, are hard to contain.

My search—for spiritual ancestors, and for an account of their relative lack among the Talmud’s rabbinic heroes—ends, for now, here. Among the rabbis, I discovered some heroes scattered here and there, the smoldering embers of the sparks they created by reading the Torah with the heavy, conflicted breath of engaged parents. Feminist ethics of care showed not only how and why such voices were so rare in the past—but also the unrealized redemptive potential in reading, teaching, and writing from a standpoint of intensive caring labor. I hope that these words have fulfilled some of the promise of Feld and Hartsock, Rabbi Akiva and Rabbi Hama, and the Israelite parents and children of the Exodus—and contribute to a Torah that is, for the first time in history, grounded in connection and care.

Works Cited


13 With thanks to my friend David Segal for this suggestion.


Introduction

This chapter discusses sex education in Slovakia from the perspective of feminist ethics of care in relation to sacredness as normative dimension of life. Sexuality is an integral part of human life and deserves respect and understanding in its complex diversity as essential for the maintenance and flourishing of the well-being of all people. Hence, taking care of this human dimension has to be one of our very important responsibilities to ourselves and to others with whom we are creating our environment as a web of mutual relations and interdependencies. Our environment and relationships are complex and the fulfillment (not only) of this responsibility exceeds the possibilities of the individual. Good care therefore requires, to varying degrees, the sharing and participation of all members of a particular community. In democracies, the mechanisms for allocating caring responsibilities are a key part of their political agenda (Tronto 2013). Education is one of the ways and tools of this allocation, because it allows us to understand, accept, and cultivate knowledge, values, attitudes, and skills as necessary prerequisites for caring for ourselves and for others in different areas of life. In addition, if certain people are subjected to oppression or violence because of their sexuality,

\[1\] I am extremely grateful to Inge van Nistelrooij for her inspiring advice and helpful recommendations in creating this text, as well as for her immense patience and understanding.
responsibilities for care need to become part of educational systems in all democratic societies that aspire to create equal opportunities to live a good life for all.

In the Slovak context, such ambitions are met with many challenges. Slovak society suffers from various forms of sexual violence, sexual harassment, sexual abuse of minors, and threats to reproductive health (e.g., pregnancy of minor mothers, especially from socially excluded Roma communities). However, the conservative groups supported by the Slovak Catholic Church caused postponing the ratification of such important policy documents as the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention). This reality is a threat to the personal and civic lives of many people. The most vulnerable in this respect are children, young people, women, the physically and mentally disadvantaged, members of ethnic, gender, and sexual minorities, socially deprived groups, and the elderly. Their vulnerability is conditioned by a combination of misinformation and lack of information on sexuality and gender stereotyping, as well as by a lack of willingness on the part of institutions to address related problems such as discriminatory attitudes, as well as the overall insufficient participation of all stakeholders.

These phenomena cannot be perceived as personal failures or as consequences of bad individual decision-making. Instead, they should be understood as the result of several factors, many of which are systemic and structural in nature. Therefore, the situation requires a responsible approach not only on behalf of individuals (i.e., in the private sphere), but also by communities, society and state and their institutions in the public sphere.

---

I consider sex education to be one of the most helpful means for achieving a responsible and caring approach to solve these problems. I argue that education as a practice of caring for growth and development of the individual student in her/his/their psycho-bio-eco-social complexity must focus on all kinds of relationships of the human being to her/his/their environment and to herself/himself/themselves. Then sex education as specific caring can be framed as helping people to grow in their understanding of sexuality as a meaningful aspect of their relation to self and to others. Quality sex education could be a tool for cultivating the sexuality of children and young people to contribute to their overall health, and to the comprehensive development of their personalities as relational social beings. Such sex education would make it possible to prevent violence, suffering, abuse, and discrimination in a host of inter-personal relations.3 The current way in which sex education is implemented in Slovakia, however, has serious shortcomings and detrimental consequences —especially for women and gender minorities.

An important factor in these issues is the high degree of religiosity in Slovak society and the strong influence of the Catholic Church in public opinion and public policy. This leads to a deep division between the religious and the secular parts of society concerning sex education. Religious attitudes and partisanship influence not only Slovak public educational policies regarding sex education, but especially the lives of people. The attitudes of the Church encourage setting boundaries between the private and public spheres, where the Church and families are both assigned to the private sphere. From there, they can exercise dominant control over all questions

concerning sexual morality. The effect is that sex education is divided into a religious (Christian, dominantly Catholic) sphere and a public sphere. In the religious sphere the curriculum is focused on the sacredness of the family, inviolability of home and the protection of all its members. In the public sphere the curriculum is focused upon human rights and sexual health issues. The main problem is the idea that the home and family are sacred, and that the sacred is the restricted and privileged area of the Church and of religious belief. If the idea of the sacred is exclusively claimed in such a way, nobody else can access it. This keeps the detrimental and abusive effects of the Church’s sexual ethics in place and out of reach of human rights claims.

Under the circumstances of such privatization of sex education it is not possible to carry out collective responsibility for good care for all children alike. But how is it possible to democratize the practice of sex education through public education in a way that it is not perceived as a profanation or sacrifice of the sacred values of home, family, and privacy?

I consider as useful in this context the concept of sacred values or protected values originated in cognitive psychology in the mid-1990s and formulated by J. Baron (2000) and P. E. Tetlock (2000, 2003). According to Tetlock the vital motivation of people to hold sacred values is to preserve their identity as full-fledged moral beings (Tetlock 2000, 293), and so as a member of the moral community. This argument makes it possible to think of the sacred as a universal spiritual need of the individual which must be attended and addressed in caring practice. Tetlock (2003) defines sacred values as values to which a moral community ascribes a transcendental meaning that precludes comparisons, compromises, or any mixing with secular values. Regarding this view, I suggest applying a caring approach, in order to focus on looking for the best way to care for what is sacred for us, and how to care and protect everything that is contained in the sacred. It could allow us to reframe the encounter between the secular value of democracy and the sacred values of home, privacy, and family, and to shift it from conflict to searching and dialogue about the best care for what is most valuable in our lives.
I also argue that to achieve this aim we need both to rethink the public – private dichotomy as well as a different understanding of what ‘the sacred’ involves and what it means to care for the sacred. The care ethics approach offers one such alternative. Here, I draw upon two care ethicists – Nel Noddings and Iris M. Young – who can help us rethink the core concepts of the sacred and the care for home as sacred and show how creation and critical interpretation can also be conceptualized as a practice of care for the sacred.

I will first analyze how Nel Noddings and Iris M. Young develop a new perspective on the home and family with regards to the role of sex education. I will then give an outline of the current state of sex education in the educational system in Slovakia. I conclude by proposing a non-exclusive, non-religious sacredness concept of the home which all human beings can share, and which can put an end to the exclusive access of the Church to sex morality in the public and private sphere. I argue for the democratization of sex education care practice in Slovakia through a vision of shared responsibility for caring and protecting the vulnerable.

Noddings and home as starting point for care

Noddings argues for the necessity to overcome boundaries between the home and the public domain. She claims that both schools and homes should be central to any discussion of moral life and social policy (Noddings 2002, 1). This is because the home is a space where the origins of care lie and we experience, accept, adapt, reject, or modify the first patterns of care there. These patterns then influence the way we form caring relationships in adulthood when building our own home, but also our public space, community, and society. It therefore depends on the home what kind of people we will become, how we will be able to take care of ourselves and others and how we will be able to receive and provide care. Noddings’ idea that good people develop in the best homes (Ibid., 4) is closely associated with her claim that a caring society should ensure that all children live in at least adequate homes (Noddings 2002, 283). However, not all real homes are the best and many are not conducive to the development
of a fully human caring self. As sites of public education, schools not only have the responsibility to care for children and young people, but also to establish and maintain a home and strengthen their commitment and competence as homemakers.

The above implies that the knowledge and experience from the best homes needs to be transposed into the public education system, so it could become possible to teach to establish and develop them (Noddings 2002, 283). Schools should educate in preparation not only for public life but also for the private life of the home. A curriculum for such kind of education gives serious and pervasive attention to the development of young adults who will be able of establishing better homes (Noddings 2002, 283-289).

According to Noddings, the definition of “home” has some universal connotations, although no ideal is permanent. The best homes can be characterized by a specific caring attitude and caring response. Every member of such a home can count on the response “I am here” when he or she calls. The best homes everywhere maintain relations of care and trust, do something to control encounters, provide protection, promote growth, and shape their members in the direction of acceptability (Noddings 2002, 123). Every act of coercion raises a question. When coercion is used, it may be to prevent members from doing harm to themselves, not merely to prevent harm being done unto others. Similarly, the best homes seldomly invoke the concept of negative desert (one who does something bad deserves something bad in return) (Noddings 2002, 4-5, 227). The ideal home recognizes and encourages a healthy attitude to the body and its pleasures, to places as extensions of the body, to living things and to our natural surroundings, to material objects, buildings, and the like, and to the reasons that all of these things are important to us (Noddings 2002, 227).

Noddings' view on a caring response being sacred (Noddings 2002, 132-133) clarifies the idea of the best homes. She sees the capacity for response to care as sacred. This understanding provides us with an alternative care ethical concept of the sacred that is non-religious, although potentially overlapping with religious understandings of the
sacred. What we need to take care of as best we can, what we need to protect as best we can, is hope and love in those we care about. Therefore, Noddings points out that “right from the start the response of the cared-for is central to the caregiver’s decisions and attitudes.” (Noddings 2002, 132) We must make sure that they do not stop believing in the good and expecting good from others. If we lost this, we would lose what gives meaning and significance to our actions, our care. According to Noddings the expectation of the good is fragile and that is why we must be careful to preserve it. Love and hope are not sacred qualities belonging somehow to the whole class of humans that could be abstracted from all human beings. Noddings is convinced that “the sacred expectation must be in each concrete individual, not in something abstracted from all human beings” (Ibid., 133, emphasis added). Love and hope for the good in any human being, while initially aroused in early childhood, however, can be destroyed by cruelty and carelessness. So, if the sacred is related to a particular person, as she argues, then the caring for the sacred needs to be very attentive to the situation and life’s conditions of each individual person. To paraphrase Noddings: the sacred has a concrete home and the sacred is found in everyday life. This relationality of the sacred means that actual events and real encounters influence the expectation of good in us, and so also affect our response to care. This understanding that every encounter between actual embodied beings matters is precisely what we can learn at home – at the best homes. Although Noddings’ concept can be characterized by a certain naturalistic element (caring response as a natural human disposition), the situatedness of the sacred in everyday life and its localization in concrete home refers to forming influence of the cultural and social context on the sacred, on the particular response to care. Noddings claims that the sacredness of the particular response of a particular Other lies not in its omission of the profane, absurd, cruel, or mistaken, but in providing us with the material by which we judge our own acts and their effects, helping us to establish or maintain relations of care (Ibid.). Noddings also argues that our response to care is sacred, “because it is the whole point of what we call our rationality”,
and through it we learn to correct our conceptualizations (Noddings 2002, 134). So, the sacredness of the response to care lies in its importance for developing mature human selves, mature relational human beings able to take care of others and themselves, and to receive care.

Caring for the sacredness of the home then does not consist in keeping it rigid and immutable. The stability of the sacredness of the home is to lie in its persistent effort to respond carefully to everyone we meet in it. However, this sacredness is fragile and needs to be cared for because these caring responses present a normative pillar that supports and orientates moral decisions and actions of the members of the home in question. The question then becomes how what we learn about and care about at home can be creatively and profitably extended to schools. Education must include (in addition to abstract disciplines focused on academic literacy and public life) subjects focused on personal life with all its dimensions. Noddings believes that themes central to private life should be incorporated into all subjects and considering that all of us establish homes, and most of us become parents, we need to be better informed and more adequately prepared for this. She understands sex education as a necessary part of the school curriculum and as enabling a fulfilling personal life (Ibid., 297).

Noddings not only helps to understand that the various dimensions of lives in home and privacy should be part of the public school’s curriculum. Her view shows that sex education should not encourage students to accept abstract principles and rules but should instead cultivate mature human beings capable of caring for themselves and others. This requires abandoning isolation from those who are different, whether they are members of my family and home or people of different sex, gender, religion or ethnicity in my school or community. On the contrary, it requires paying careful attention to them and their needs. Only through developing and maintaining caring attitudes and responses in homes and schools is it possible to care and protect from harm what is sacred for all of us.
Young and the caring for a home

Young’s conceptualization of the care for home (2010) focuses on caring about what we want to maintain and preserve. Her approach shows how the care for home requires creativity and critical thinking. She helps us to understand how the embodied and material living in a home is connected to education.

According to Young (2010, 43-95), care for the home includes the preservation of meanings through both the material and emotional care for people, as well as through the care for things. Caring for things allows for the preservation and protective actions of caring persons. Young argues that many of these caring activities enable and develop care for both our personal and our collective identities. They also preserve the sense for historical continuity. When Young understands home as the material aspect of our identity, which anchors it in its physical being, forming a continuity between the past and the future (Young 2010, 70-72), she challenges us to take our bodies seriously when creating a home. Home is personal because it expresses our self, our habits, our personal history—the events and values of our lives. This means that developing and cultivating the ability to establish and maintain a home is linked with developing the ability to carefully reflect the corporeality of those who are part of it. Young notices that this process is not just a question of responding to the needs of the body, but of constantly forming an identity of which the body is an integral part. Since both the living body and the environment are always changing, there is no fixed permanent identity (Ibid., 76).

In this regard, Young draws attention to the ambiguous nature of care for the home as preservation that can be conservative as well as re-interpretative (Young 2010, 78). Thus, preserving an identity in a meaningful way does not consist in enclosing it into immutability and rigidity. It means, on the contrary, opening it up for interpretation and for variability. According to Young the preservation of the home as a place of formation of identities of its members is based on
recollection and reconstruction of the connections between the past and the future in the light of new events and relationships, too. The preservation of this meaning of a home must therefore be attentive to changing life situations (Ibid., 78). Young’s view underpins that although members of the home may experience the past and present events together and similarly together expect the future, the meaning of what is experienced or expected is unique to each. Therefore, a caring response to each member’s past, present, and future is necessary for a home to be a part of each member’s life. If we want to create and maintain a home for everyone, we must create a space in which everyone can tell her / his / their story and be listened to, and at the same time a space in which is listened to the stories of others. It is necessary to create a safe space where everyone’s story matters, and an open space where each story can make a difference in each other’s narratives and understandings. This means that every story can be reinterpreted. As each reinterpretation changes context and perspective, it presents a challenge that requires a careful response. Sometimes it is necessary to create new, non-traditional ways of caring for people and things as for this changed situation the usual ways of caring are ill-equipped. However, to preserve homes as such safe and open spaces, in which each of its inhabitants can be themselves in their uniqueness, and at the same time be able to accept others in their uniqueness in the process of constant reinterpretation, requires creativity and imagination.

Young’s view so implies that caring for a home in which preservation is attentive to variability of context and open to interpretation is a creative and moral task. However, this task requires a normative standard – to have a tool for comparing reality or facticity with what we want to achieve and what is desirable for us. According to Young, there are at least four normative values represented by the home as an ideal that she proposes to consider as a minimum that should be accessible to all. Young sees the following regulatory ideals as helpful tools of criticism of existing homes: security, individualization, privacy as autonomy and control over one’s personal space, and finally preservation as the construction and reconstruction of oneself, one’s
identity (Young 2010, 91-95). Care for the home therefore requires the ability to distinguish what contributes to creating a home and what does not. Critical thinking is a part of care for all that matters.

Young helps us understand that education focused on caring for the home and for personal life, and consequently also sex education, needs to cultivate both creativity and critical thinking. Creativity can help us to find more adequate ways to give and receive care in various life situations. Critical thinking and sensitivity to changing living identities can also prevent the reification (objectification) of those identities. Only then will the things and homes they co-create not become a prison for us and for others. Only such form of care can respond adequately to the needs and development of the vulnerable. A society that has the ambition to educate caring people able to establish homes that could be a secure place for developing individuality, respecting privacy as autonomy of every member, and preserving open interpretation of their identity—should apply such way of sex education. Young’s idea of the democratization of the values of the home then will be more achievable. Then home will not be a privilege of some, but a given for all.

Sex education in Slovakia

To understand Slovak educational policies, which include sex education, it is necessary to situate it in its historical, political, and socio-cultural context. The beginnings of sex education in the Slovak environment date back to the period of the first Czechoslovak Republic. The content and terminology in use has since changed because of social and regime change, new scientific knowledge as well as discussions about who should teach it or what its content should be (Bosá et al. 2015). Shortly after the Fall of Communism (1989), various traditions of thought – the Christian tradition, medical, feminist, liberal, human rights, or conservative discourse – began to promote their own arguments concerning the form, content, and scope of sex education (Lukšík, Marková 2010). The formation of the independent Slovak Republic (1993) has gradually strengthened political,
religious, and cultural fundamentalism in various spheres of public life. As a result, sex education has been transformed first from gender education to sex education and then finally to education about marriage and parenthood. In contemporary school-taught sex education, the orientation towards preparation for family life has completely prevailed.

After 1989, compulsory syllabuses entitled “Sex Education” were introduced by the National Institute of Education (NIE). Later, in 1994, these were updated and issued as separate syllabuses for the 1st and 2nd levels of elementary school and high school. However, sex education did not have the status of an individual course, so syllabuses for sex education are intended for teaching in other subjects (ethics education, religious education, Biology, Physical training education, etc.) and they are marked as cross-sectional.

From a political perspective, the signing of “the Vatican agreement – a Fundamental Treaty between the Holy See and the Slovak Republic” in 2000 was a determining factor for the status and perceiving of sex education in the country. In 2004, two amendments to the basic treaty concerning Catholic education in state schools were adopted. They stated that the Bishops’ Conference of Slovakia is the main authority on the content and teaching and the educational process cannot be controlled or monitored without the consent of the bishop, or the bishop’s official office. No visit by a school principal or state school inspection member is allowed. Religious education is taught in mutually exclusive alternatives with ethics education (the choice of either of them is compulsory). Religious education is taught as

4 The National Institute for Education (NIE) is a national budgetary organization directly managed by the Ministry of Education, Science, Research and Sport of the Slovak Republic. It is responsible for providing the leadership, design and development of curricula, methodological and professional service for schools and preparing basic documents of educational policy.

5 It is understood as a trans-subject teaching—individual parts of it defined in the syllabus should be taught according to suitability and need in several subjects. It is in the competence of each teacher, when, to what extent and how she will implement its tasks and goals.
a confessional education of the Catholic religion. In schools, ethics education and religious education are taught as separate subjects.\(^6\)

The gradual dominance of conservative discourse in matters of education closed the door for numerous progressive reforms such as gender-sensitive education, recognition of LGBTQI rights, reduction of sexual harassment and domestic violence as educational topics. The syllabuses were renamed “Education for Marriage and Parenthood for Elementary and High School” (EMP), but the content was not changed, and they did not constitute a separate subject. In 2008, several sex education-related areas were integrated into the syllabuses of civics, ethics education, religious education, biology, and natural sciences. At the same time, there have been attempts to update the EMP syllabuses as a whole and make them a part of the State educational program, but it has become only an optional subject. In 2010, the subject syllabuses were reclassified as non-compulsory, and teachers were given the added responsibility of discussing their planned topics with parents. Teachers have a duty to consider parents’ comments and discuss their plans with the methodological board and then submit them to the school head (principal) for approval.

Conservative moods peaked in February 2015 when a referendum was held in Slovakia based on a civic initiative of the Alliance for the Family (Aliancia za rodinu). The initiative was officially supported by the Conference of Bishops and was entitled “Referendum on the Family”. The Referendum carried the question of sex education in schools into the public sphere and the media. It stimulated debates about how Slovak educational policies should be set up or

\(^6\) It is obligatory for students in primary and secondary schools in Slovakia to attend either ethics or religious education. Parents and students must decide between the two. Some students attend both subjects, but the possibilities to do so are limited because these lessons are usually scheduled at the same time. Miškolci et al. (2019) in their study examining young people’s attitudes toward sex education in the context of human rights in Slovakia present findings from quantitative research using a representative sample of secondary school students. In the research sample, 391 students (38.5%) reported having attended ethics classes, 408 (40.2%) religious education, and 212 (20.9%) reported that they had attended both.
who has the legitimate authority to provide sex education. Although the referendum with a 21.41% participation was invalid, it influenced narratives of public education policies, which were enforced and subsequently normalized thanks to media discourses. The initiators of the referendum also contributed to the normalization and mainstreaming of “anti-gender” rhetoric in the media, that they joined with a society-wide demand for “children’s protection” (Libáková, Valkovičová, Jesenková 2019, 141-142).

So, in the present system, sex education is clearly delineated to either the religious or public spheres. It is possible to identify basically two isolated forms of sex education—the traditional or conservative one based on sex ethics promoted by the Catholic Church and other Christian churches, which emphasizes the restrictive approach to sexuality, characterized by distraction from sexuality, emphasis on sexual abstinence, control, the punishment of the child and of early childhood sexuality and lastly, by not providing information. The second one is a progressive (comprehensive) type of sex education based on scientific knowledge, the concept of human rights and democratic values. Hence, debates about sex education are taking place mostly in closed communities. The contact between scientific and religious discourses is minimal, or rather non-existent. Whenever the debate on sex education is framed in human rights terms (by either actor), the arguments have a legal-formal, foundationalist and deductive character, disregarding the needs and interests of children and young people and the dynamically changing context (Jesenková and Minarovičová 2018).

It is a paradox that both parties express the need for informed and professional sex education, but both directly or indirectly accuse each other of an ideologically burdened approach and non-scientism. On both sides it is possible to identify a strong degree of distrust towards “those on the other side”, as well as towards institutions that are formally or informally linked to them — be they churches, universities, research and scientific institutions, NGOs, or civic initiatives. Caring for sexuality — and thus sex education — is a part and instrument of political discourse and its agents. However, such an
antagonistic setting prevents any meaningful and productive dialogue — a dialogue that would be a necessary precondition for any changes for the benefit of those who are affected by the above-mentioned discourses and those who need sex education the most. The current situation is that of a stalemate, which prevents responsible actors – teachers, parents, professionals – from identifying the vulnerable, ignores urgent needs concerning sexual health and sex relations, marginalizes the interests of children and young people, erases diversity and renders inequalities more difficult to recognize and target. These are the harmful consequences of sex education as it currently exists.

Care ethics and education as a democratic practice of care

The body of knowledge known as care ethics is defined by the belief that care is a fundamental activity upon which human survival and the quality of human life depend. If we start from the definition of Tronto and Fisher (1990), according to which care is “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”, and that “that world includes our bodies, ourselves, and our environment, all of which we seek to interweave in a complex, life-sustaining web”, we can recognize sex education as such an activity. We generally educate people – whether children or adults – so that they can live a good life and can become full-fledged members of society.

The starting perspective of care ethics is a relational ontology and the understanding of all persons as relational beings (Barnes 2012, Tronto 2013). This means that the “world” is a complex network of relationships and connections. From this perspective, we are always necessarily tied to the context. Our interdependence with other people and the social and natural environment is a source of our vulnerability. But only we, human beings aware of our actions, are responsible for whether we hurt and harm others or, conversely, whether we help protect everything that is vulnerable. Understanding the situatedness of everyone participating in care relations in their particularity and uniqueness is key to good care. Care ethics’ focus on the moral
sense of attention and on efforts to meet the needs requires us to be sensitive to specific circumstances such as age, race, class, gender, sexual orientation, ethnicity, religion, region, time, ideology, and even personality as determining factors of the needs of care. What is equally important is understanding how our own situation as care providers limits our ability to understand others in their uniqueness, and what the possible implications are for the quality of the care we give. Careful education must therefore be sensitive to the specificities of children, both not to hurt them and to meet their needs regarding their growth and development. From an education perspective, ethics of care raises important questions: How to consider relationality as an aspect of the life of all involved in education? How can we, despite the fundamentally limited educator’s possibilities to perceive, and to understand the situatedness of children, create conditions for the protection of the vulnerable?

If we understand education as a set of care activities and hence as a social practice (Sevenhuijsen 1998), then educational practice(s) “can be seen as a mode of acting in which participants perceive and interpret care needs and act upon these needs. Their interpretation and acting varies according to the situation, social and institutional context, and depends on a variety of factors, such as norms and rules about good caring and the relational dynamics between actors concerned” (Sevenhuijsen 1998, 22). This means that education draws, reproduces, and modifies specific conceptual and conative patterns concerning good educational practices in a specific context. These patterns refer to who is responsible for (concrete) education, to whom education is provided and who has access to it, and finally, what is the content of (specific) education. Its implementation in practice determines whether it is inclusive or exclusive, participatory, or based on privileges and restrictions, and thus whether it is a democratic or undemocratic education. With regards to sex education, specific models of sex education influence the extent to which a particular educational practice can distinguish and understand various aspects of vulnerability and be sensitive to the various needs of specific children and young people.
The basic forms of practice of care in different aspects of our lives are learnt primarily at home and in public schools. Joan Tronto (2013) argues that a democratic form of care represents the best form of care. Democratization of care involves more people in caring practices and so more perspectives can contribute to an adequate and complex understanding of caring needs and how to meet them (Tronto 2013, 156 – 157). Inclusive (equal) participation in care thus contributes to a more comprehensive understanding of other people and might reduce their vulnerability. According to Tronto, solidarity as a moral value creates the conditions for care among people and increases the sensitivity to democratic values (Ibid.). If we apply Tronto’s view we can see that solidarity, equality and democracy are mutually dependent. To achieve more caring and less injuring, society needs to support inclusive collective responsibility for education (children, parents, communities, and experts in different spheres of life, society). With respect to sex education, this refers to the necessity to proceed it in non-segregational way, i.e., not to segregate sex education in the home and in the school environment. Homes and schools are situated in a common environment, in one world, so they are connected and necessarily influence each other. Ignoring this connectedness prevents mutual cooperation in educational care for children. Isolation leads to one-sidedness, to the neglect of important aspects of sex education. No one—neither individuals nor institutions—is immune to the threat of abuse of power associated with reception, but in particular with the provision of care. Harmful and hurtful care practices are as common in schools as in families and homes. If public institutions such as schools apply their forms and practices of care regardless of the specifics and context of individuals’ private and personal lives, they can increase the vulnerability of those they wanted to protect, like in the case of sex education where a diversity of genders and sexual orientations is denied, resulting in the oppression of groups of people. Similarly, even a home can be dangerous and loved ones can easily become causes of harm and suffering, for instance where families deny the possibility of a variety of genders and/or sexual orientations. This is when it is important
that the boundaries between the public and private spheres are not fixed and impenetrable, but, on the contrary, that they are permeable and can shift. This allows us, as the inhabitants of a shared world/environment—whether as individuals or as a member of relevant institutions, to be attentive, to accept responsibility, and caring action to prevent or reduce the harm of other human beings and to initiate a change in those harmful and injuring practices of care.

If we want to care and educate better, we need to overcome dichotomously conceived boundaries between private and public life, but also between morality and politics (Tronto 1993). That is why according to Tronto a care approach to education should stress the need for individual development and developing the skills necessary both to provide/receive care and to care about being a citizen in a democratic society (Tronto 2013, 135). Regarding sex education, the above implies a necessity to teach sex education as part of an education focused on democratic values, enabling democratic care in all domains of lives, not only in public but also in private.

**Care for the Sacred - a starting point for the democratic practice of sex education**

Let us return to what presents the common motive and goal for both sides of the disputes over sex education in the Slovak context – the care and the protection of the vulnerable. Noddings advises us to take care of the home as a place where we can – if it is a good home – learn how not to hurt, how to carefully protect and develop everything vulnerable. We must therefore care for the sacred in a way that it can become accessible to all.

However, serious obstacles concerning both equal access to the sacred and the possibility to care for what is sacred remain. The conceptual framework that determines the thinking, decision-making and action of people in Slovak society is the most relevant factor. The framework is characterized by two gaps. The first one is the gap between the secular and religious understanding of life. The problem is not their difference but the essentialist conceptualization of them, which has a parallel in a similarly essentialist way of understanding
the profane and the sacred. The result is their dichotomous relationship determining their statuses as valuably significant and as sources of values.

The second gap is a division between the public and private. Again, the problem lies not in their differences, but in the conceptualization of their connection to morality and values. This connection follows the widening of the gap between the secular and the religious, which is related to the secularization of modern societies, in which the tendency to privatize religion as well as morality is strengthening. The private sphere then appears to be the exclusive normative source of values and morals for public life, while the public sphere, as a sphere of politics and power, is understood as non-moral, value-free, sometimes even amoral. Similarly, the secular and profane thus appear to be without values or less valuable in that they are seen as devoid of deeper (spiritual) meaning. The purposeful secularization of society and its emphasis on a scientific approach (positivism-oriented philosophy or ideology of Marxism-Leninism) in totalitarian communist regimes also contributed to the displacement of religious types of morality and values, but also of the “unscientific” concept of sacred (sanctity) in the public space. The consequence is that the interference of public institutions – such as schools or scientific institutions – in the private sector is not legitimate. On the other hand, institutions with the authority over private morality, such as the family and church, have the exclusive entitlement to shape, influence, and regulate private lives, including intimate relations and sexuality.

However, if religious understanding is the only way to achieve values, then those values cannot be available to anyone. Non-religious people are often excluded from discussions about values and principles concerning areas like sex ethics and sex education. A much more hurtful consequence of this exclusion can be the loss of home, as it ceases to be a safe place for the development of individuality, control of one's privacy and intimacy. If access to values that are perceived as sacred is restricted to the privileged few, protection and care for all who are vulnerable are impossible. If it is not possible to
meaningfully discuss the equality of the vulnerable in the context of the home and family, then just treatment is not achievable for everyone.

If we try to think about the sacred from a relational perspective as Noddings does, we can rid ourselves of the idea of the sacred as absolutely other and thus inaccessible and incomprehensible. Then the sacred matters because it fundamentally affects the quality of our lives. Its sacredness lies in its normativity that all human beings can share as it contributes to the good life of each of us. Although access to the sacred is not a privilege, it has certain preconditions. Sacredness consisting in human capacity of response to care requires a caring approach, because it is inherently fragile. Recklessness and carelessness result in its destruction. That is why a home as a place where we are encountered with caring activities and where caring relations are the first creative moment of our development as human beings, is one of the most important values in our life. For many of us the home has a sacred value. And because it has its weight and significance in the lives of us all, we all have a responsibility to protect and preserve it. Consequently, we all have the responsibility to care for the development of the ability to establish and maintain the best homes for all human beings through education in schools as well as in homes and families. However, I argue that only sex education based on a caring approach in which care for the vulnerable is not reduced to isolation from everything and everybody different, in which care for sacred values of home and family is understood as open, creative, critical, and interpretative dialogue and interaction between caregivers and care-receivers, can be the best way to care for sacred values. This kind of education can develop and cultivate abilities to establish concrete homes as a place where everyone can experience safety, where everyone can be unique along with others, where everyone can control her/ his/ their privacy and where all voices can participate in narratives forming and expressing collective identities. Such homes may or may not differ from (the religious views of) their caregivers. Its sacredness will stem from the fact that care will be a value and a practice at the same time in that home. If we accept
that care for the home as a sacred space requires such kind of sex education, then the caring for the sacred can be a starting point also for understanding the necessity of the democratization of sex education.

Conclusion

Noddings and Young turn our attention to the home as a place from which care stems and which has the potential to provide crucial (moral) goods and resources for the individual. In doing so, they also show the home as a place where inappropriate or failing care harms specific individuals in fundamental ways. Thus, they help us understand what needs to be protected via a democratic practice of sex education and under which circumstances this can be achieved. Noddings clarifies just how, in the best of homes, it is possible to cultivate, support and keep the belief of everyone in the fact that others truly care about them and will care for them in accordance with their needs to live the best possible life. Noddings shows us that what we need to cultivate and protect via care (and therefore also via sex education) is trust: trust in the good by others. This trust is a prerequisite for the ability to give and receive care also in the realm of sexuality, so to love and to be loved as a mature human being. Young allows us to understand that developing and flourishing the ability to love and trust is contingent on a home providing each member safety, a space for individual growth, autonomy in the sense of personal integrity and space for cultivating social and collective identities. Young then clarifies that creating and maintaining such a home requires creativity and openness in the interpretation of a constantly changing environment, and therefore also sexuality.

Our mutual dependency not only implies that we are all vulnerable, but also that each one of us can injure and harm others, or even ourselves. Our sexuality presents particularly vulnerable aspects of our lives that protection needs to be focused on accordingly, especially in the case of individuals and groups who are most vulnerable. It is necessary to stop thinking about the home and about school as places of conflicting interests and goals. The protection and care for
vulnerable persons is only possible when homes and schools take a joint responsibility towards creating and maintaining the best possible homes via sex education. Truly caring homes and schools have a common goal: to protect those most vulnerable from harm and suffering and to make sure that children grow to become mature human beings capable of giving and receiving care and love. To achieve this goal, it is necessary to democratize sex education. Only a democratic, inclusive practice of care in sex education that is responsive to pluralism and diversity of all those concerned and that takes into account the specific dynamic of power in relations of care can make our homes better places where we would be capable of truly protecting everyone.

Acknowledgments

This work was supported by the Slovak Research and Development Agency under contract No. APVV-15-0234.

Works Cited


Section III:
Justice, Community Building, and Preservation
In the Belly of the Whale: Theorizing Disability through a De-Colonial and Islamic Ethic of Care

Sarah Munawar

Introduction

“The time for miracles and faith is over, the time to make a decision is now.” With these words, a white man in a white lab coat looked my grieving mother in the eyes and advised her to “pull the plug” on my father. My mother replied with, “we are in full code.” To this day, I still do not understand the meaning of this utterance, but I know it was what we as a family had to declare to keep my father alive. In the summer of August 2012, I began the final year of my undergraduate degree when my father suffered a severe double stroke and cardiac arrest. My father had gone to a place “outside of time” and for the doctors the only return destination from this zone of non-being was another zone of non-being: a “meaningless” life imprisoned within a severely disabled body dependent on others (Maldonado-Torres 2007). Even if his body returned to its senses, his person would remain “out of this world” (Mbembé 2001, 173). As a student of political theory I was learning about the Arendtian subject and the miracle of natality; I wondered about my father who in this state could no longer speak and therefore, did not meet the anthropological minimum for the miracle we needed (Mehta 1999).

On one hand, Islamic epistemologies and practices of care such as making dua (supplication), giving sadaqah (charity), and salat (prayer), were as inconsequential and irrational in the “waiting room of History” as they were in that hospital waiting room (Chakrabarty 2009,
The doctors stared at my mother’s lament with the same eyes that colonialist writers perceived my ancestors as strange flecks at the edge of their maps (Garland-Thomson 2009). On the other hand, Muslims in our community and medical professionals both read my family’s story as a great tragedy. Islamic-medical discourses on disability cast my mother as the invincible and sacrificial carer and read my father’s disabled body as a mark of human frailty and the inevitability of death; both of their bodies were thrown into the “netherworld of dependency care” (Kittay 1999). My family’s situatedness in a complex relation of care continues to be marked as a boundary, an edge of the world, “God forbid,” any Muslim ever has to cross. Just as there was no space for my family to practice care Islamically in the hospital, there was no dwelling-place in the Muslim ummah as we knew it for disabled Muslims like my father, young carers like my sisters and primary care-givers and providers like my mother.

What helped us make a decision were not the Islamic-medical discourses on disability and dependency care, but rather, the reception of Revelation through care-based modes of knowing Islam by which we held in place a future for my father to live meaningfully. In this chapter, I introduce Islamic care ethics as a decolonizing intervention that helps us not only re-define disability and dependency care but also valorize care-based epistemologies of Islam. While many care ethicists centre the mother-child relationship (Fernandes, 2018), my mother shared with us the story of Prophet Yunus who recited Ayat al Kareema when he was swallowed by a whale. I remember tenderly the “emergency response care web” of community members who would visit our home to attend Qul ka Khatama and Khatam Sharif (prayer circles) and recite this dua for my father’s return (Piepzna-Samarasinha 2018).

1 My journey to develop a de-colonial and Islamic ethic of care originally began as a criticism of Eva Kittay’s notion of “some mother’s child” and the colonial politics of recognition that drives ethics of care scholarship. However, as I searched between the lines to find traces of the Great White Mother, I found myself falling in love, again, unable to let go of the “loving eyes” with which I first read Kittay (Jacobs 2009; Oliver 2001). Love’s Labour helped me find words to write and speak about my father as a person, to demand worlds in which my mother as a primary care-giver living with chronic illness, too, is cared for, and to build relations in which my sisters as young carers are not left behind (Munawar 2014).
Robertson, and Robertson 2018; Hollway 2007; Kittay 1998) and the event of birth as points of departure for theorizing dependency care and the neglect of mother-work and other mothers (Collins 1995, 117; Okano 2016, 88; Ruddick 1995), I begin with the transition of becoming my parents’ care-giver as a young carer. My point of departure is not the transition from the womb into the world, but rather, exile from the world into the desert with Hajar and into the belly of the whale with Yunus. The de-colonial potential of a care-based and Islamic approach to disability justice is that it enables Muslims to “read disability differently” (Titchkosky 2007) and read against how we are read by colonial systems of recognition. Medical frames of disability direct our attention to the event of illness as the defining feature of my father’s entire biography inscribing onto his body a chronology of illness that takes the shape of a tragedy. Such narratives read my father’s disabled body as wounded, damaged, or almost gone and my mother’s body as the invisible and invincible carer. Unlike the Islamic-medical model of disability that asks us to consider

3 In the Islamic tradition, Hajar was a poor and enslaved Black single mother who was both “rejected on the grounds of race, sex and class yet at the same time” and was a “recipient of divine Revelation” (Rahemtulla 2017, 152). Although she was “given to Abraham as a concubine spouse” (Wadud 2006, 122), she becomes the “heir of a household ruled by Abraham and Sarah” because in the case of “any offspring resulting from the liaison of the master with the slave woman…” the “descendants of a slave were full and legitimate heirs to the inheritance legacy of their father-master” (Wadud 2006, 124). The point here is not that it is proximity or relation to the master that entitles Hajar to an inheritance. But rather, although she is abandoned by society in the desert to find sustenance for her newborn child, her unmet needs remain visible to the Creator and are accounted for in the miracle of the zamzam groundswell.

4 In the Islamic tradition, Prophet Yunus (Jonah) is swallowed by a whale and is returned to land through the Creator’s care and mercy. The story of his delivery from darkness ends with an image of him enveloped in a gourd plant that Allah has evoked to heal his wounds. As Yunus was exiled from the land and into the sea, Hajar and her newborn Ishmael are also abandoned by Abraham in the desert to fend for themselves. The image of her desperately running between two hills in search of water for her child is evoked by Islamic-Feminist Amina Wadud in her demands to recognize the secondary dependency of single mothers and their Islamic rights to be cared-for as they care for their children.
the legibility of the disabled subject as a “Muslim” or as a living person capable of autonomy, an Islamic and care-based theory of disability justice obliges us to attend to my mother and father as situated within nested interdependencies.

**Code Blue: An Islamic-Medical Model of Disability**

In the state of code blue, one is thrown into a place outside of time, absolved of their place in the world; yet, they continue to hold space with their body in the hospital and must rely on others to hold space for their personhood, for their right to return and live a dignified life. Various care ethicists and critical disability scholars have exposed how the ableist, racialized and gendered discourse of eugenics underpins neo-liberal support for right-to-die policies. Here, I extend existing care ethics scholarship on the myth of the autonomous and rational subject to account for how systems of white supremacy, racial capitalism and anti-Muslim racism mark the racialized, disabled and Muslim body as a “defective body” that is unproductive and undesirable. In turn, caring for, and being cared for, as Muslim and disabled is inscribed as inconvenient, burdensome and lacking ethical and epistemological value (Whatcott 2019, 30).

**The Disabled Body as Dead or Dying**

“Multiple colonialisms” influence not only the treatment of disabled Muslims situated within the medical-industrial complex but also, representations of care and disability within Islamic legal scholarship (fiqh) on illness and care (Da Costa and Da Costa 2019). In both arenas, medical professionals and medical-scientific knowledge are empowered as the sole interpretive authorities of reading and translating the meaning of disability and dependency care. The “imperial

---

5 In the case of emergent treatment where an individual is hospitalized due to a critical event of illness, individuals or their family members must declare a code status in case the patient’s heart or breathing stops. An individual’s body is literally coded and marked to be resuscitated (or not). In cases where one has not previously declared DNR status, his moral (and legal) personhood, as well as narrative fate, are seized and displaced by medical imaging.
attitude” with which medical professionals located my father in a place outside of time, as a body without a being, also permeates Islamic legal scholarship on illness and disability (Maldonado-Torres 2007; Mignolo 2018).

In my father’s story, the “coloniality of power” is a complicated matrix of ableism, anti-Muslim racism and the religious/secular binary that not only marks my father as an abnormal, dispensable body, but also writes off the authority of Islamic epistemologies as a way to read disability and dependency care. The violation here is that within an imperial setting, in which medical professionals are granted an inscrutable and secular interpretive authority, my family was refused the capacity to respond to and address such moral injury in an Islamic moral vocabulary. In conversations in which my father’s life was at stake, the doctors attempted to sterilize our Islamic sensibilities (Asad 2018, 119). We could not speak and interpret in a “religious” manner because the hospital was a public space and my father’s body could only be read as a “secular body” (Asad 2011). As Eva Kittay observes, such neo-liberal secularism erases the relationality of the subject, as a “self in relation to God” (474, 2007). Building upon the scholarship of Tanya Titchkosky (2017), disability is an interactive scene, or as an intertextual relationship, in which the shape and texture of individual and collective narratives are co-authored. We work together to co-create “the type of world that grounds the possibility of having the meaning that it does” (20).

To counter the violence of such Islamic-medical discourses and build a world in which my father could live meaningfully, my family and I searched tirelessly for knowledge on the Islamic ethics of “pulling the plug.” Charting the ethical terrain of such a decision lead us through the murky waters of defining what constitutes a “statistically foreseeable disability”6 in the case of severe brain injury and figuring

---

6 I am pulling the exact words of the doctors which are buried in memories of the trauma. The phrase “statistically foreseeable disability” is itself deeply triggering and ableist and should be interrogated within an Islamic model of disability justice and care-ethical decision-making.
out the relational orders of caring responsibility within Muslim networks of kinship. Interpretations of Islamic hadiths and fiqh on disability were just as violent as the medical discourse in demarcating a distinction between a normal life and a non-life, comparing those categorized as the latter as incapable of input (awareness of oneself) and output (the purposeful manifestation of one’s will through action) (Sultan 2017, 11–12). Deferring interpretive authority to the medical discourse, the writings of Islamic legal scholars were laden with ontological imperialism (Corker 2001). Islamic fiqh mostly provided insight into the ethics of guardianship in contexts of “disorders of consciousness” (Ibid.); yet because of its reliance on the medical discourse it could not be extended to our uniquely contextual and relational situation and offered very little conceptual space to imagine the possibility of living a dignified, “normal” and intelligent life as a person with disability after such an event of illness. There is also very little information readily available on the distribution of care-work in Islamic networks of kin, possibilities for sentient and relational modes of selfhood after suffering from “disorders of consciousness” and the duties of building communities that support care-givers and our “nested dependencies” (Kitray 2011, 56).

Although the Quran calls for empowering the disabled, and marginalized members of society, as full and equal participants of society, the social and cultural textures that shape what disability and care have come to mean in Muslim communities and Islamic legal scholarship remain deeply ableist and disempowering (Rahemtulla 2017). Islamic approaches of reading disability and care defer to the authority of the medical model (Arneil and Hirschmann 2016; Ghaly 2010). A religious-medical model of disability renders my father’s disability and our situatedness in a relation of dependency care as a test for our moral character (Schuelka 2013); a burden to bear in this life to advance to Paradise in the Hereafter; as a tragedy or a punishment intended by Allah (Al-Aouf, Al-Zyoud, and Shahminan 2012; Ghaly 2010; Larsson 2011); or interpreted as noble pain that makes us more proximate to Allah (Olsen 2016). In addition, our relationship to the Divine is read to be rooted in non-consensual care in which Allah as
carer can choose to inflict harm in the form of illness or disability for our well-being (Ghaly 2010, 30).

During my father’s stay in intensive care, many family and community members came to visit from near and far. The emergency-response care web (Piepzna-Samarasinha 2018, 98) that gathered around my father for the most part had dissipated by the end of hospitalization. When family friends do visit, they come anticipating my father’s return to able-bodiedness, a return to familiar ways of relating to and identifying with him. They ask my father questions like: are you walking yet? Eating? Talking? Or worse, they ask my mother these questions about my father while he is sitting next to them in the room. Invites to social gatherings, especially dinners, and the phone calls have stopped as friends and family realize that there are no more miraculous health updates, stories of recovery or “return” of the man they once held close as one of their own. And just as my mother remains beyond the reader’s reach in this text, the daily pilgrimage she makes to meet my father’s care and access needs also remains illegible and unattended to by the Canadian settler-colonial state and within Islamic kin-based networks of care. The banality of homecare, the multiple hospitalizations for aspiration afterwards, the loss of relationships and the enduring medical trauma we have experienced together as a family are de-centered in the narrative sequencing of events as long as the scene in the intensive care unit is signified as a descent into the netherworld of dependency.

Secondary dependency as Divinely Ordained Misfortune

If, “Allah does not burden a soul beyond that it can bear…” (2:286), then why did He have to choose my mother to be the testament of strength for us all? Why is my family’s plight a sign of his miracle and rahma (mercy) and not a demand for others to assume responsibilities to care for my mother and father? Our bodies are not signs, or signifiers, but ever-changing shapes that carry stories (Bynum 1991). As our bodies have changed shapes with age, illness, or disability, the shape of my family’s story, how we fit together in a care web, has also transformed. Today, in our narrative sequencing of events, my father’s
stroke no longer represents a rupture or interruption but as an experience (like many others) that has ontologically, materially, relationally and affectively transformed our sense of place, embodiment and connectedness with one another. Lack of support for my mother and sisters as primary care-givers, but also as neurodiverse persons living with severe chronic illness, has led to their health deteriorating. Yet, how we inhabit and live our shared story, and the shapes it takes, and how we move together runs up against how our story is told, whose and which needs are focused on and how “we are told” by the medical model of disability (Trinh 1989).

In some corners of classical Quranic scholarship, disabled peoples were seen as those who have been fated to suffer “muṣība (affliction/calamity) and sayyi‘a (misfortune)” as a test of their faith in Allah (Ghaly 163). Disability is read as a divinely ordained ailment, abnormality or void; and the moral obligation to care is draped in language of sacrifice, suffering and punishment. Such narratives of pity, tragedy and fear not only undermine my father’s agency as a moral person, but also discredit my mother’s moral choices and unique struggles as a dependency worker (Kittay 1999). Through this ableist lens, my mother’s story is written as the tragedy of a young wife doomed to be a care-giver for her sick husband. The emotional plots that underpin the Islamic-medical model serve to “engage the listener’s attention” by appropriating the sick and disabled body to stir feelings of

7 Although the event was indeed traumatic and shattering, it no longer makes sense to describe it as a singular event, or moment in time, by which my family was transformed into a care web. Rather, the cosmology of our care web has always been shaped by various chronic illnesses, types of neurodiversity and disabilities that my siblings, parents and I live with. There are multiple chronologies of this event of illness, from multiple perspectives. Just like my sisters, my mother too was a young carer for her father. And, after my father witnessed his father die from a lack of access to affordable care in Pakistan, he made the difficult decision to migrate with us to Canada so his children would not have to face a similar struggle. And so, another layer within the ableist undergird of the medical model of disability is composed of the intergenerational and global barriers to accessible, consensual and affordable care caused by the impact of colonial violence on the Global South, as well as, settler-colonial violence against Indigenous peoples.
sympathy and threat about the reader’s “own potential fate” and the care-giver’s body to signify self-sacrifice, promise and moral triumph (Bauer 2017, 17). The “arc of feelings” evoked by the text function as a “straightening device” for the believer who bear witness to return to a state of God-fearingness and return to face the prayer mat. In the trajectory of this emotional plot, illness and disability are sequenced in the narrative as a premature departure from this world. Such plots are driven by a matricidal impulse because they uphold subject formation as predicated upon the death of the mother. Here, one’s life trajectory from birth to death is a linear ascent from the darkness of the womb into the world as an independent and self-sustaining subject. Dependency, in any sense, is marked as a disruptive or decaying force that returns one to the state of darkness and chains them to the home/domestic sphere. Here, caring for disabled kin, and to be disabled, entails the righteous endurance of disability as a trial. There is no space to even consider cross-disability support, collective access, disability as socially constructed or dismantling interlocking structures of oppression that endanger the lives of disabled persons. The power to make meaning of disability is also deferred to the carer, the one burdened with being charged with the care of disabled kin.

In a study of the perspectives of Arab-Muslim mothers on raising children with autism, Pamela Olsen (2016) argues that disability in the form of autism was interpreted as a challenge and a blessing from Allah. The Muslim mothers who participated in the study noted that their children’s disability often “disrupted” collective prayer spaces and prevented those with caring responsibilities from participating in key religious rituals such as hajj (78). Many mothers made reference to the Islamic concept of agir (Allah’s recognition of good deeds) as a measure of one’s capacities and aptitude as a good mother (Ibid). In this context, failing such a test, by not practicing sabr (patience) or embodying agir places one among the ahl al-balâ (the people of affliction), and not the ahl al-‘āfiya (people of wellness) on the Day of Judgment (155). Similarly, Islamic scholars also read disability as an opportunity to develop one’s capacities for sabr (patience) and
shukr (gratitude) in addressing the difficult question of: how can blindness, deafness, and other types of disabilities in the world be compatible with the belief in a perfectly good Allah who is compassionate, merciful, just and omnipotent (155)? In this paradigm, Muslims afflicted with disability must practice “thinking of the good reward that lies ahead”, “hoping for a time of ease”, “thinking of Allah’s countless blessings” (57). Not only is the ability to “read disability” deferred to the carer, but the ability of the Muslim carer to read, or to care competently, is cast as suspect.

What is concerning about this study on the “perspectives” of Muslim-mothers on disability is that the authors argue that religious and cultural beliefs shape the mother’s perceptions of disability as a test, burden, or punishment. The care-based epistemologies of Muslim care-givers are captured and framed to tell the tragic story of unfit, incapable and burdened mothers who are stuck in a religious and backwards mode of reading disability. There is little space to consider the agency of individuals in shaping, interpreting and (re-)writing cultural dimensions of the Islamic or how the interlocking forces of US imperialism, settler-colonialism and colonialism threaten Muslims situated within relations of dependency care (Ahmed 2016; Tungohan 2019, 237). The authors not only rely on a homogenous and fixed interpretation of “Arabic-Muslim culture” as necessarily ableist (Nahal et al. 2017, 228) but also reduce the (settler)colonial violence against Palestinian-Muslim communities as merely a setting where such stories of disability take place but are not shaped by (Puar 2017). In addition, the mothers in the study speak of feeling as if having a child with disability is a result of negligence during pregnancy or personal moral failures (236). Such feelings are not signs of personal neglect or personal beliefs constitutive of a culture but rather impressions of heteropatriarchal and ableist readings of maternity by medical professionals onto the Muslim mothers’ bodies. Such medical professionals who claim authority as knowers of the Islamic, and guardians of women’s bodies, place the cause of miscarriage, disability and stillbirths “not in the hands of Allah, but deep within the
maternal body” (Kueny 2013, 70). What remains beyond their orientalist horizon is that the same mothers they speak of as being broken, but hopeful, are also living and re-writing anti-ableist modes of reading Islam through their experiences as care-givers and as interpretive authorities of knowing and making the Islamic.

Dependency as Narrative Foreclosure

Within Islamic legal discourses on disability, medical professionals are authorized as time-keepers and only their tools can hold hope for “a distant horizon of impressionable possibilities” or a “therapeutic plot” that is focused on preventing “deterioration” and not cure or improvement for the patient (Antelius 325). For example, through CT scans of his brainstem, countless blood tests, and various diagnostics, the only future inscribed for my father through the medical discourse was death or a living death—both in which the story of my father’s life, his life’s work, had ended. Such a narrative foreclosure signified that for my father it was “simply too late to live meaningfully” (Freeman 2010, 125). All there was left for us to do was “play out the prescribed ending” (125–126) and reconcile ourselves with my father’s “narrative fate” (126). A critical feature, or turning point, within the chronology of tragedy is a sequence of medical events that disrupt one’s life trajectory and entrap one within a form of time where death may not be near but their narrative horizons, due to severe disability, are closed off or foreshortened (Antelius 2007, 333). The sequence of medical events that disrupts one’s life trajectory with

8 “To keep hazards at bay, medieval physicians assert knowledge of, or control over, every stage of the reproductive act by surveying and circumscribing the female body, and by working to cure any problem within it that might interfere with man’s desire to replicate himself. As a result of their efforts, physicians privilege the Qur’an’s more traditional reproductive roles for men and women over and against its more ambiguous and open-ended treatment of sex and gender in the procreative act. Assuming the role of custodian and surveillant of women’s bodies, male medical scholars and physicians, like the Qur’anic Allah, claim both the knowledge and power to generate life. By gaining access to what the Qur’ an holds to be the exclusive preserve” (Kueny 2013, 53).
disability, illness or trauma, not only foreclose one’s narrative horizons, but also, dislodges one’s self as a knowing self.

The chronology of care in the medical discourse is aporetic in which the only intention and aim of caring for a person with severe disability is to delay the death of the body of a person. The timespan, as well as the living body, of the disabled person is read as vulnerable and fragile. Such a frame of analysis de-limits the narrative possibilities available to a person; it fixes the meaning of care-work as a string of repetitive tasks with no specific end other than maintaining the upkeep of a body that has reached its half-life. In this chronology, the course of necrosis consumes with it not only the body of the disabled person, but also the bodies and labour of her care-givers, as well as the resources of the Canadian “welfare” state. In reading my father’s body as dead, dying, or already gone, the doctors gestured to us a world in which our father as “homebound” would no longer be capable of intelligently and meaningfully inhabiting his relations.

The doctors framed dependency care as a narrative foreclosure, a future in which my father would no longer “have a world”, for without the capacities of hearing, speaking, eating, or walking, he would cease to exist as a person. Framing severe disability as a death sentence, the doctor then asked us to speak in our father’s name as his guardians, to ground our decision in rationality, not faith, to wonder if our father would desire for himself such a meaningless and miserable life of depending on others. What was placed on trial was not the statistical foreseeability of brain death (which for the most part remained uncertain) but rather, the intrinsic worth of life with disability, a life of caring for a disabled loved one (Titchkosky 2007, 91), of my father as a disabled Muslim and of Islamic sensibilities of caring. The discursive violence of the medical model of disability is not just limited to narrative foreclosure but also what Sarah Bracke identifies as narrative encapsulation: when “the cultural story of one people” is “subordinated to and reframed by the terms of another” (Bracke and Fadil 2008, 53). As theorized by various care ethicists, in this scene, medical professionals assumed the dominant subject-position of the Eurocentric subject over my father’s Muslim body and
my mother’s Islamic interpretive and decision-making authority as his next of kin (Braidotti, 2003). Reading my father’s hospitalization through the Islamic-medical model of disability offers little space for plot speculation beyond the medical narrativization and reads Islamic rendering of the situations as subversive acts of resistance (Bracke 2008).

A Maternalist Paradigm of Colonial Guardianship

From this relational positionality, as my father’s daughter, as a Muslim, I worry whether a care ethics approach to disability justice, that relies heavily on the mother-child paradigm, also runs the risk of naturalizing the kind of colonial guardianship upheld by Islamic-medical discourses on personhood (Engster 2015, 177). The care provider, theorized as a guardian, is empowered as the sole interpretive authority in our relations who is charged with the work of reading and making sense of disability and the experiences of disabled Muslims. Whether it’s presenting the doctor as all-knowing or the Muslim mother with a disabled child as not-knowing, both Islamic-medical and orientalist discourses rely on a capacities-based approach to personhood. Here, the capacity of the disabled Muslim to be recognized as a human teeters on how they are perceived by (in)competent guardians while the personhood of the carer, the mother or the doctor, remains unchangeable.

Care-knowing (Dalmiya 2016), for example, engages attentive love, “a kind of knowing that takes truthfulness as its aim but makes truth serve lovingly the person known” (Johnston 2016, 19). Inspired by Sarah Ruddick’s work on maternal thinking, Johnston notes that attentive love requires the mother to hold close the child while letting her grow into herself by “knowing when an affirmative feedback loop needs to be altered to better respond” to the child’s changing care and access needs (Ibid.). Johnston’s interpretation of Ruddick, as well as Hilde Lindemann’s notion of holding and letting go, rely on the recognition and response model in which the care-giver must both hold in place the “narrative sense” of another person as well as let go of “stories that no longer fit” (25). It is only through the intricacies
of care-work we can seize the forces that strive to foreclose and encapsulate the narrative agency of disabled Muslims.

For the child to transcend into personhood through the parents’ care, the child must illustrate “sufficient mental activity to constitute a personality”, express this personality bodily, be recognizable by others as an expression of personality and be capable of responding “to what they see” (24). I worry whether such a capacities-based approach relies on a “misopedic” representation of childhood and the child in which the parent is responsible for translating and reading the child’s personality (Rollo 2016). It is equally troubling (and triggering) to use Islamic-legal vocabulary as it is to use a care ethics approach to disability to make sense of my father’s hospitalization. The mother-child paradigm empowers care-providers, care-givers and doctors in this case, with an undue authority of deciding which (in)actions constitute a personality, and therefore suffice as personhood that is worth holding onto. Johnston observes that during critical transitions such attentive love plays a critical role in identity formation. In the few months after my father awoke from the coma, doctors fixated on his inability to move his eyes to track movements. His hand movements, his tears, his heartbeat were all read as rudimentary, reactionary, spontaneous, but never intended by him, as a confirmation of personhood. For medical professionals, these movements were results of their decision to continue his body’s breath with life support, and not the breathwork of Ar-Rahman. This model forecloses the possibility of imagining children as “simply human beings with different ways of interacting with the world and others”; instead, “they are a lesser, deficient, or otherwise incomplete form of human being” defined by the “absence of distinctly human agency” (Rollo 2016, 62). Here, only the care-provider meets the anthropological minimum (Mehta 1999); this power differential in the relation of care means that the care recipient’s self is not relationally held in place, but rather is displaced, seized or captured, for the sake of her “well-being.”

9 Allah as a merciful and compassionate carer.
What may seem like a matter of semantics in the written word unfolds into serious abuses of care against persons with disability and Black, Indigenous and racialized peoples in situations of colonial guardianship. Here, using whiteness as a “straightening device,” space is given to the charge only as the care-provider sees fit based on her evaluation of the extent to which the charge has “developed” (Ahmed 2006). In the transition by which we became primary care-givers for my father, it was not that my mother as my father’s guardian took my father’s place, or affirmed my father as a person, but rather for our family, my father had never ceased to exist as a person; my mother held a place for him in our world in response to the doctor’s foreclosure. She held out a light for his return that he could sense us from within the belly of the whale. My father was, is, and remained fully capable of possessing personhood. As his bodymind changed with illness, we assumed responsibility for changing the shape of our home, our world, our life, to create for my father a world (just relations) in which he continues to fit and live meaningfully within. This is more than just affirmation or recognizing the worth of another sentient being. Attentive love entails sustaining access intimacy and collective accessibility (Mingus 2011, 2017). Relational selfhood goes beyond affirming or misrecognizing one another. It means remaining responsive, and response-able, to the moving puzzle pieces, how our bodies fit together, and continually adjusting to ensure that no one is left behind.

Failing to hold someone in place, does not mean failing to honour another’s “proper identity”, but rather, complicity in building inaccessible worlds that enslave, colonize and displace. We must remain responsive to how we care as the care and access needs of others are always in flux. Here, a consensual relation of care also means we must hold space in our care relations for the care-giver and charge’s respective “autonomy to exit socially sanctioned, yet abusive relations” that have “turned oppressive” (Dalmiya 2016, 47–48). An Islamic vision of disability justice, and of care ethics, must call into account the moral, ontological and epistemic inscrutability of the carer and whether her care is competent and consensual.
Of Hajar’s Plight: Caring for the Carer and Colonial Economies of Attention

An Islamic and “care-based theory of disability justice” asks us not to consider the legibility of the disabled subject as a “Muslim” or as a living person capable of autonomy, but rather, our responsibility to care for and attend to my mother’s and father’s needs as situated in nested dependencies (Engster 2015, 177). If we follow the maternalist paradigm that underpins a care-based approach to disability to argue that the birth of the political subject is induced when the child dis-identifies from the mother, we assume mutual identification as a natural and unchanging condition of maternity. Stories of pain, trauma, disability and illness teach us that identification between a carer and her charge waxes and wanes, can be disrupted and can cease to exist. Whether it’s estrangement from one’s identity as a child that comes with being a young carer, or the carceral state’s policing of affection between migrant mothers in detention camps or the removal of Indigenous children through residential schools, narratives that fix maternity as a trajectory of linear dis-identification, from the womb into the world, sideline the ways in which colonial “economies of attention” force us to turn away from our mothers (Ahmed 2006, 2010).

In witness of my mother’s extremely precarious position as a dependency worker, in the daily pilgrimage she makes to keep a roof over our heads, as well as for my father to “have a world” (Solomon and Lawlor 2018), she is differentially forced to make many compromises to her well-being in order for others to survive. Whereas Kittay’s paradigm of doula is grounded in the notion that care-givers are also “some mother’s child”, I find more resonance in Amina Wadud’s Islamic-feminist paradigm of maternity that centres the plight of Hajar. For Wadud, the issue is not a lack of empathy or identification with the mother but rather that motherhood “has never been purely natural, it has always been shaped by religious systems, power relationships and material structures” (Wadud 2006, 129). Reflecting on her experiences as a single, Black, Muslim mother in the US, Wadud
calls to open up maternity as a category of analysis within feminist and Islamic (con)texts (Abugideiri 2001; Rahemtulla 2017; Wadud 2006). She asks:

How does a saying about “paradise at the feet of the mother” fit the struggles of poor and single mothers? or “women with disabled or unable fathers, husbands brothers in a Muslim community that pretends such an expression is a statement of fact and therefore ignores the agony of these women, making them invisible (Wadud 2006, 126)?

Modelling intersectional analysis, Wadud extends the story of Hajar to wonder about the rights and reparations owed to enslaved Muslim (m)others who were forced to care for the master and his children through the institution of slavery, as well as what is owed to Muslim women who differentially carry the brunt of care-work in Islamic kin networks.\(^\text{10}\)

She has a hard time reconciling Hajar’s narrative with her own experiences as a single, Black-Muslim mother alienated within her kin networks. There is no doubt an Islamic cosmology of *doulia* and maternal rights exist. Yet, why is it that we only care about the mother in so far as it concerns our position in the afterlife? Why do we disregard our complicity in the oppression of other mothers and the denigration of mother-work and maternal subjectivities in Muslim communities? Like Wadud, I too have a “painful response” to the saying “Paradise lies at the feet of the mother” as if “unconditional honor belongs to the one whose biology was created with the capacity to hold life under her breast and then in due time release it” (125).

The story of Hajar teaches us that the ideal of the Muslim mother makes an impossible demand of Muslim women: to be both the “bearer of the child” and also, to “make a way for that child to survive in a harsh world—like our beloved Hajar in the desert” and how she “was forced to make a way where there was none, for herself and her

\(^{10}\) *lil-rijadi nasiban min-maa-ktasabu wa lil-nisaa’ nasibum min-maa- kta sabna*, for men shall have a share of what they earn and women shall have a share of what they earn … truly Allah has knowledge of all things” (Wadud 2006, 141, 161).
son” (Wadud 2006, 147). I read in Hajar’s movements between the mountains of Safa and Marwah how material precarity (as signified in the harshness of the desert) and micro-banishment compel her to run in search of water (Sassen 2018). How do these movements shape her relationship with her son as she is forced to turn away and estrange herself from him in order to find sustenance for him to survive? I wonder about how she feels about having to turn away from her baby. How do such stretches of separation shape how the baby relates to his mother? What estranges Hajar from her child is the lack of structural and community care that denies her access to resources and support as she cares for her child. Similarly, how does this daily pilgrimage shape my mother’s body, or my parents’ marriage, or the shape of our family home, or our friendships as we must all turn away from the world into the home to care for one another?

What a care-based approach to disability justice offers is connection-based modes of knowing one another. Yet, when we unravel the colonial maternalist paradigm of recognition from our conception of attentive love, love becomes a complex site within which encounters between mother and child are experienced differently and involve healing wounds to our sense of maternity created by multiple colonialisms. For example, post-colonial scholar Kadiatu Kanneh (1994) wonders what disidentification feels like for Black mothers and white-passing mixed-race children, “when the racial story suffers a radical break between one’s mother and oneself”, when “color and culture do not coincide” (33). She argues that the formation of “Black feminist cultural traditions have largely relied on notions of community or heritage; on oral communications between mother and daughter; or on mourning and imaginatively reconnecting links broken through historical violence” (Ibid.). Instead of framing love as a “form of natural communication between mother and child”, Kanneh explores how our capacity to love and the practice of loving are “perverted” when one is denied the ability to identify with her mother or her child, or when colonial or racist violence forces you to dis-identify from your mother(land) (33–34). Here, the issue is not a failure of recognition or empathy, but rather the structural conditions that
inhibit or delimit “reading the self in reference to the mother’s history” and embodiment which results in a sense of self that is “fraught with contradictions” (Ibid.).

Instead of romanticizing the event of birth, naturalizing identification as a static inscrutable and uncontested feature of the mother-child relation, or glorifying stories of the mother as a saint that sacrifices her body to care-for others, we should explore the “historicity of motherhood” (Wadud 2006, 129) as “an unnatural and socially constructed institution” experienced in different ways. Taking for granted “the sanctity of motherhood” makes us ignore “the burdens of care-work for all mothers” and constrains us from mapping how this myth has “failed to protect those who gave birth and raised children in urban poverty or rural slavery (Wadud 2006, 129). What wadud invites investigation into is the multiple ways in which Hajar’s plight are (re)produced:

Such women were assaulted by their status and still expected to be paragons of the virtues of selflessness and sacrifice useless for their and their children’s plight – survival in a contemptible margin of invisibility” (Ibid.).

We must assume responsibility “for the character of its reconstruction...to incorporate critically the paradigmatic implications in the life of Hajar as relieved in various ways by Muslim mothers today” (Ibid). How, and who, do we silence, erase and harm in interpretations of Fatima and Zaynab as loyal, obedient and caring daughters, or Maryam’s womb as a vessel for Allah’s plan, or Khadija as a generous and giving maternal figure to the prophet, or Asiyah as a sacrificial and devoted surrogate mother to Moses? The maternal body in all of these interpretations is read only as a vessel, an instrument, or resource meant to nourish the formation of man as prophet or a site upon which the signs of Allah are marked. In contrast, the womb also is used as a signifier that marks the political boundaries of the ummah, or as an invocation of beginnings, in “bi smi Allah ar-Rahman ar-Rahim” as “In the name of Allah the Compassionate Caring” and more literally, a tie between Ar-Rahman (care) and rahm (which means the womb in Arabic, Urdu, Farsi and Pashtun).
What is ignored is Muslim women’s pivotal role as witnesses, judges, and receivers of Revelation within Islamic (con)texts and the persecution they faced in their societies for laying claim to interpretive authority. As argued by Ash Geissinger (2008), the “Mothers of the Believers”, the wives of the Prophet, played a pivotal role as witnesses of his reception of Revelation. Their homes were not only loci for “exegetical debates” but also “place[s] where Revelation descended” (59). Because the Mothers of all Believers carried care-based and “intimate knowledge of Muhammad’s personality, along with the possibility of an affective bond with him”, they were direct eye- and ear-witnesses to the reception of Revelation, as well as the embodiment of sunnah (158). It is through such proximity, that their emulation and description of sunnah and hadith bears interpretive leverage (157). Yet, Muslim women continue to be seen as “intellectually deficient and unfit” to embody interpretive authority and if they do intervene through the written word, they are perceived as inciting social unrest (fitna) and are marked as a sign of the apocalypse (Geissinger 2008, 35, 210; Saleh 1999, 136). Suspicions about women’s epistemic and ontological capacity as knowers of Revelation fold into either the absence or erasure of tafsir and hadiths by women or a “blighted” location within the isnad (Richardson 2012). It is through such b/ordering of interpretive authority that “the Home” is territorialized as a place for care-work and not epistemic or political activity (Geissinger 61). Just as the patrilineal b/ordering of kinship excludes women as inheritors of property, heteropatriarchal and ableist conceptions of personhood deny Muslim women from inheriting interpretive authority as knowers and keepers of Islam.

In colonial narratives of disability and dependency within Islamic and European-Christian contexts, dependency continues to be institutionalized as the master-slave relationship of domination in which the mastery of the Self is co-constituted through the subjection of an enslaved and dependent Other. Muslim women cast as carers and disabled Muslims are cast into the domesticity of able-bodied Man—marking them as “constitutive outsiders” who are anthropologically incapable of intelligent embodiment (Bracke and Fadil 2008, 58–59).
With their bodies, care-based epistemologies of Islam are also rendered unfit accounts of Islamic historiography.

Colonial economies of attention orient us to read maternity and dependency care as sites of sacrifice and rupture; in turn, such ableist narratives underpin the Islamic-medical model of reading disability and disrupt our ability to pay attention, and attend to, the needs of Hajar’s plight.11 The same force that makes legible my father’s stroke as a site of concern but remain not-knowing of my mother’s needs as a dependency worker also compels us to focus on the event of birth as a point of origin for personhood and not the birth-work with which we are delivered into the world and held in place in our relations. Just as the myth of the rational and autonomous individual relies on signifying birth as a child’s separation from her mother, my father’s stroke as an event of illness is also highly visible in the subject formation process as a site for gathering; like birth, the stroke and cardiac arrest were legible as events of illness that could be witnessed, seen and heard, and spoken about as something to gather around through medical discourses and the ethics of visiting the sick in Islam. However, whereas birth is rendered and celebrated as a breaking-free, acquired disability is read as an imprisonment—a return to the darkness of the womb. The Islamic-medical model of disability shapes how (and if) communities of care arise around the care and access needs of Muslims situated within relations of dependency care.

11 Joan Tronto names attentiveness as a constitutive sensibility of care by which we are able to recognize the needs that arise from dependency through a “suspension of one’s self-interest and a capacity to genuinely look from the perspective of the one in need” (Tronto 2013,23). In my mother tongue, Urdu, the words for care and attention are closely tied. Attention is not something we pay, lend, or make but rather, it is something we must repeatedly do as a mode of caring about someone or something. The words for care (parwa, tawaja, khayal) and attention entail watchfulness, vigilance and focus.
Conclusion

A de-colonial and Islamic ethic of care requires us to disinherit the imagined secular/religious binary that defines care ethics as a tradition and as a mode of theorizing (Kittay 2007). Guided by the stories of Hajar and Yunus in the Islamic tradition, and feminist ethics of care, an Islamic and care-based approach to disability justice holds multiple possibilities of returning my father’s person to his body, of resisting and healing from anti-Muslim and ableist forms of medical trauma and addressing the denigration of care-work in Islamic cosmologies. A care-based epistemology of Islam is inherently relational and helps us understand how multiple colonialisms, in this case, ableism, anti-Muslim and heteropatriarchy, interlock to disenfranchise disabled Muslims and Muslim caregivers (Da Costa and Da Costa 2019; Dhamoon et al. 2013). Care is a critical sensibility by which Muslims can re-orient how we read, write and think about what is “Islamic”, whose bodies we identify as interpretive authorities, and which types of knowledge we authorize as “Islam.”

Works Cited


Jacobs, Margaret D. 2009. White Mother to a Dark Race. Nebraska: University of Nebraska Press.


Mother Eberly’s Coin: Care Ethics, Democratic Politics, and North American Mennonite Women’s Movements

Jamie Pitts

Introduction

Veronica Ulrich Eberly and her six children migrated in 1727 from the Palatinate area in the German Rhineland to Pennsylvania. Born in Switzerland in 1685, Eberly and her husband Heinrich planned a new life for their family free from the persecution that they experienced as Mennonites in Switzerland and southwest Germany. But after changing ships in Rotterdam, Heinrich claimed to need to go back for something onshore. He never returned. Mother Eberly, as she came to be known, was left to tend to her family during the Atlantic crossing and later in Lancaster County, Pennsylvania.

Mother Eberly’s son Jacob, married and dedicated to farming his mother’s land, occasionally visited the village of Lancaster for supplies. One day Mother Eberly drew from her few funds and gave Jacob a small coin to purchase molasses for her at the village store. He took the coin but used it instead to purchase a cowbell, which he “rang… exuberantly as he approached home”. His mother, though, “was so disappointed that she wept bitterly” (Rich 1983, 30–31).

This story, passed down orally for generations and included in a twentieth-century history book on Mennonite women, illuminates central claims made by care ethicists over the past forty years. Although care ethicists have at times disagreed about the gendered character of care—is care an essentially “feminine” ethics, as Nel Noddings argued early on (2003 [1984])?—there is widespread
consensus that the moral interests and perspectives of women, arising at least in part out of their involvement in socially mandated care work, have been ignored. To use Carol Gilligan’s famous terms, the different moral voice that arises out of attention to concrete needs for care, and so typically out of women’s experience, has repeatedly been silenced (1982).

The fate of Mother Eberly’s coin represents the devaluing of her interests, of what she saw as valuable for her work of caring for herself and her family. Instead of the molasses she asked for, Jacob purchased something that was valuable for himself and his own work. That purchase may of course have contributed to his caring for his family—a cowbell is useful for farm work. But in overriding his mother’s expressed request, he participated in the exploitation of value generated by women’s care work and in the silencing of women’s expression of their desires. While not morally equivalent to his father’s likely abandonment of his family, Jacob’s decision follows a similar logic of devaluing women, their caring labor, and their voices.


Both Mennonite Women and Women in Search of Mission narrate the development of “sewing circles” and other women’s organizations by nineteenth-century and early twentieth-century Mennonite women interested in using their abilities to sew, cook, can, fundraise, and pray, among other forms of support, to meet needs beyond their own homes. The sewing circles were an integral part of Mennonite
mission work in North America and abroad, and they provided women opportunities to gain leadership skills that they later leveraged for denominational power. Though the narrative is not linear—they faced opposition from some Mennonite men and feminists—the women’s organizations were training grounds for leadership in denominational institutions, congregations, and social movements. Rich’s and Goering’s books give voice to Mennonite women’s struggle for their voices to be heard, for what mattered to them to count in determining the direction of their lives and communities (see Laugier 2009 on care ethics and value).

The present essay utilizes care ethics to interpret this struggle, as told by Rich, Goering, and by now, many other historians. In doing so I show how care ethics can function as a theoretical framework for making sense of religious movements and, moreover, how religious discourse can express concerns central to care ethics. In particular, I am interested in how religious movements and discourses can contribute to and expand our understanding of the democratic work of care ethics. Whereas leading advocates of justice ethics, such as Rawls and Habermas, see religious discourse as inimical to democratic flourishing, or at least as needing to be restricted in some way from the “public sphere”, I will suggest that caring religious discourse can have a democratizing effect within and beyond religious communities.

After sketching out my approach to care ethics, democratic politics, and religion, I turn to the main subject of my essay: North American Mennonite women’s movements. I first provide a brief introduction to Mennonites and the larger Anabaptist tradition, and then tell a story of the growth and development of Mennonite women’s movements in three overlapping stages. These stages are (1) domestic and congregational caring, (2) women’s service organizations and mission activity, and (3) the turn to social activism and academia. Given the essay’s focus on care ethics, I necessarily provide highly condensed summaries of activity in each stage, attending throughout, and especially in the conclusion, to interpretive questions raised by care ethics.
Care Ethics, Democratic Politics, and Religion

Over the past forty years, there have been various attempts to define “care ethics”. Prominent early offerings envisioned care as arising from the “dyadic” mother-child relationship, and so including responsibilities for “the one caring” and “the one cared-for” (Noddings 2003; cf. Ruddick 1980). In Noddings’s formulation, a “categorical imperative” emerges within our close relationships, directing us to tend to one another’s needs (2003, 86). Yet this caring imperative is experienced, according to Noddings, not as a duty, but as an “ethical ideal” guiding our conduct within caring relationships (chap. 5).

Carol Gilligan’s In a Different Voice took a somewhat different approach, linking women’s expressions of care not to maternal experience or instinct but to socialization (1982). Nevertheless, Gilligan employed a similar vocabulary for her construction of care ethics, emphasizing its relational character, focus on responsibility for the concrete needs of self and other, and difference from modes of ethics that insist on the priority of principle (justice, utility) over context.

Whereas Noddings’s articulation of “caring” largely employed a philosophical idiom, Gilligan’s psychological analysis rested on her empirical studies of girls and women considering moral dilemmas. The empirical basis of Gilligan’s work was its strength and liability: discussion of responses to “the Heinz dilemma” became staples in care ethics and other fields, but Gilligan’s findings were challenged by many other empirical researchers (see summary in Tronto 1993, 82–5). Joan Tronto added a far-reaching political critique of Gilligan, charging her with an elitist commitment to linear moral progress and with reinforcing the boundary between a private feminine sphere, oriented by care, and a public male sphere, oriented by justice (1993, 80–1, 85–91). Tronto, Virginia Held, Daniel Engster, and others have subsequently sought to integrate a conception of justice within their care ethics, construing the latter as a public, democratic political ethics for all citizens, regardless of gender (Tronto 1992 and 2013; Held 1995 and 2006; Engster 2007; Engster and Hamington 2015).
The similarities and differences among these proposals are instructive, and lead to a consideration of connections among care ethics, democratic politics, and religion. Within liberal political theory, the relationship between religion and democracy is often figured negatively: since democratic politics thrives on public deliberation—on an exchange of reasons that, in theory, are available to and comprehensible by other citizens—religious discourse, based as it is on convictions that are not universally held by other citizens, must be restricted from the public sphere. For philosophers John Rawls and Jürgen Habermas, religious persons may participate in public deliberation only insofar as they find ways to render their discourse intelligible to other citizens, for instance, by “translating” it into secular terms (Morgen-Olsen 2012).

Although care ethicists have not investigated the question of religion and public reason—or for the most part religion at all—what they have said points to general agreement with the standard liberal perspective. For example, Noddings repeatedly contrasts care ethics with religious ethics, locating the superiority of the former in its basis in the universal experience of maternal love (2003, 29, 43–44, 90, 97–98, 99–101, 116, 125, 130–131, 184). Religious communities, according to Noddings, can be judged according to external criteria of care—but a genuinely caring religious community “becomes a collection of persons who share an attitude and a commitment but not necessarily a set of beliefs” (117). Virginia Held similarly distinguishes care ethics from any form of religious ethics. “When a morality depends on a given religion”, she contends, “it has little persuasiveness for those who do not share that faith” (2006, 21). Since care

1 While other care ethicists do not go as far as Noddings in suggesting that care ethics should replace religion, Daniel Engster (2007, 95–109) does see his construals of care ethics as sanctioning government intervention into religious and other cultural communities when these fail to guarantee care for their members. Cf. also Held 2006, 122. My argument against such a view is not that religious communities should be unaccountable to standards of care, but that such standards should be developed through engagement with the communities themselves, and especially with their most vulnerable members.
ethics “appeals to the universal experience of caring”, its potential for transcultural reception is far greater. Like the liberal theorists, Noddings and Held view religious ethics as having little public utility.

The proposition that there is or can be a neutral, universal form of ethics has been sharply challenged by “postmodern” philosophical and sociological currents that highlight the situated character of all knowledge (e.g., Gadamer 2004; MacIntyre 1989; Foucault 2002). Feminist philosophy has taken part in the challenge, for instance, through claims that “standpoint” is an intrinsic feature of knowledge production (Harding 2004). Care ethics, with its broad argument that caring praxis makes a legitimate contribution to moral knowledge, may also be viewed as part of this general move toward situated reason. As Held puts it, the validity of the inherently partial moral claims arising out of concrete caring relations defies the liberal presumption that impartial rational deliberation is the only or the superior grounds for ethics (2006, 100). Held, moreover, suggests that identifying care relationships as the basis of civil society facilitates the acknowledgment of both equality and difference within any political order (152–153). A democratic politics rooted in care ethics, on this view, does not seek to prevent the sharing of particular, partial reasons in public, but rather welcomes such sharing as sustaining the pluralism endemic to democracy.

This endorsement of cultural pluralism within democracies, which is strongly echoed by Daniel Engster (2007, 95–109), should have implications for how care ethicists approach culturally-specific discourse, including religious discourse. Whereas liberal political theorists have sought to control such discourse in the name of public reason, care ethicists have disputed the use of the public-private distinction to depoliticize concerns about power and politics that emerge from the experience of caring and being cared for (Tronto 1992; Held 2006, 148–149). Moving beyond such a distinction, philosopher Sandra Laugier argues that democracy is created and sustained as members of a political community come to understand their personal needs and desires—including, especially, needs and desires for care—and give them voice (Ogien and Laugier 2014, chap. 6). Defining
democratic discourse in terms of claims to care means denying a priori delimitation of what counts as “public”. That claims to care are couched in explicitly religious terms should not inherently invalidate them as contributions to democracy, and claimants should not necessarily be forced to translate their claims into purportedly neutral terms as the price of admission to the public sphere. Rather, members of “caring democracies” (Tronto 2013) ought to be prepared to learn to listen and care well for a variety of culturally- and religiously-different others, through and in spite of translation difficulties.

These points could be drawn out further theoretically, but perhaps the most convincing approach will be to show the democratic nature of care as embodied within a specific religious community. By “democratic nature” I mean both that caring relations within that community display democratic features—they enact and are the basis of struggles for liberty, equality, justice, and so on within the community—and that these relations draw on and contribute to compatible democratic aspects of their wider societies. The point is not that all religious communities always and everywhere exhibit democratic forms of caring. The point, rather, is to show that a religious community can facilitate democratizing care, and so to undermine generalizing claims about religion, care, and democracy.

North American Mennonite Women’s Movements, Democratic Politics, and Care Ethics

Introduction to North American Mennonites

The religious community I will focus on to make this case is North American Mennonites. Mennonites are a branch of the Anabaptist tradition, which began during the sixteenth-century Protestant and Catholic reformations in Central Europe. Anabaptists drew on currents within Catholic humanism and mysticism, as well as on Protestant anticlericalism, to contend that Christian community should be reserved for those who, following the guidance of the Holy Spirit,
explicitly requested to join it. A successful request was followed by water baptism as an initiation into a community life dedicated to following Jesus (“discipleship”). Since each community member, at least in theory, could interpret the Scriptures under the direction of the Spirit, each had the opportunity and responsibility to share with the others their understanding of discipleship. This conception of community roles meant that space was to be given in worship services for each member to speak, and that women, as well as men, could share their views openly. A relatively high degree of gender equality was especially notable in those Anabaptist communities that welcomed “prophetic” speech thought to come directly from the Spirit. There was thus a strongly “democratic” character to early Anabaptism, both in its egalitarianism and in its rejection of the state church concept through the insistence on believer’s baptism.

Anabaptists were accused by Catholics and Protestants of heresy, and particularly of the capital crime of “re-baptism”, which is the literal translation of “Anabaptism”. Under conditions of heavy persecution and after various debacles, Anabaptist leaders quickly downplayed both charismatic phenomena, such as prophecy, that might attract public attention, and any ambitions they had to broader public influence. They withdrew into increasingly isolated, patriarchal communities. Menno Simons, a second-generation Dutch leader of the northern Anabaptist movements, was so successful in describing his congregations as peaceful and nonthreatening that Anabaptists in Switzerland, eastern France, and southern Germany eventually began to use his name to defend themselves against further persecution. His name had already been taken by some of his own followers after his death, and when the northern and southern groups began to migrate to North America in the seventeenth and eighteenth centuries, they both took the name “Mennonite”.3

3 Technically they took a variety of names derived from “Menno,” settling on “Mennonite” in the nineteenth century. See Bender and Sawatsky 1989. Another group of Anabaptists, the Hutterites, developed in Moravia and did not take on the Mennonite name. Disputes among the Swiss-German Anabaptists in the 1690s led to the Amish Division. The Amish were known as “Amish Mennonites” upon
Although conditions improved for Mennonites in the Netherlands during the seventeenth century, some refugees had already relocated to Danzig (Gdansk) in Polish Prussia where their hardworking communities were eventually tolerated and exempted from military service.\(^4\) When Danzig became part of the Kingdom of Prussia in the late eighteenth century, Mennonites came under increasing pressure to conform to Prussian militarism. By the end of the century many Mennonites had left Prussia for South Russia, where Catherine the Great had offered an exchange of toleration and autonomy for productive farm work. Thousands of Mennonites left Russia for the Americas in the 1870s when the imperial government began to curtail their autonomy, and thousands more made the same journey after experiencing persecution during the Bolshevik Revolution and under Stalin, and then after the destruction of their communities during World War II.

Mennonites in North America who are descended from the European Anabaptist communities therefore tend to identify either as “Swiss-German” or as “Russian”. Due to the differences in their historic experiences and migration patterns, these two groups of Mennonites have different theological emphases and initially organized into two distinct bodies: the (Old) Mennonite Church (MC), made up largely of Swiss-German Mennonites, and the General Conference Mennonite Church (GC), made up largely of Russian Mennonites. Increasing collaboration over the twentieth century eventually led to the composition of a shared confession of faith and an institutional merger. The merger, however, was also the occasion for a division on national lines, and Mennonite Church Canada (MC Canada) landing in America. The (Old) Mennonite Church that I discuss below was initially comprised of both Amish Mennonites and non-Amish Mennonites, but during the nineteenth and early twentieth centuries the Amish either withdrew into their own organizations or assimilated. I do not focus on the Amish in this chapter.

\(^4\) Although the earliest Anabaptists differed in their ethics of violence, prominent leaders thought discipleship entailed the refusal to bear arms or perform military service. This became the default view from roughly the second generation onward.
Stage 1: Domestic and Congregational Caring

Mother Eberly’s story illustrates some persistent features of Mennonite women’s experiences in North America. Mother Eberly was a migrant, a land owner and head of her household, and a woman whose goods and desires were vulnerable to the whims of men. Migration has defined Mennonite life in North America for generations, and Mother Eberly was, in the early eighteenth century, among the first waves of Swiss-German migrants. A later wave of Mennonite migration, this time from Russia after World War II, would see an entire generation of women who, like Mother Eberly, migrated without husbands or fathers or other adult men, as many had been killed in Stalin’s gulags or during the war (Epp 2000). These women were responsible for the survival of their families as they crossed the ocean and created homesteads in difficult conditions. Their responsibility, in turn, gave them significant authority in day-to-day decision making and in the education of their children, including in spiritual education.

Historian Marlene Epp observes this pattern—in which Mennonite women take religious leadership in migrant communities that are dependent on families for social reproduction—repeated in communities with or without men, including in late twentieth-century Canada among refugees from Central America and Southeast Asia (Epp 2008, 172–3). However, she contends, the centrality of family in North American Mennonite history has been both empowering and limiting for women (61–62, 174). Mennonite families, whether in rural villages or urban neighborhoods, have typically been patriarchal, resulting in gendered divisions of labor and the susceptibility of women’s authority to male prerogative. Elaine Sommers Rich further describes how a historic Mennonite ideal of marriage as a partnership between equals with different roles developed into a gendered separation of spheres during the early twentieth century, as pressures of
urban assimilation and fundamentalist theology took hold (Rich 1983, 41, 43).  

If the authority Mennonite women have gained in and through the home should accordingly be viewed with some ambivalence, the nature and shape of that authority should not be overlooked either for its immediate or later contributions to the story of women’s movements. Rich suggests that a Mennonite women’s “heritage” has been passed down from the early homesteading experience, a heritage of working with one’s hands, offering hospitality, frugality, and community service (35). The next section will show how women leveraged that heritage to create a variety of service organizations in the late nineteenth and early twentieth centuries, as well as to take leading roles in the burgeoning Mennonite missionary movement. At this point it is sufficient to note some of the concrete forms taken by that heritage, especially as they shaped Mennonite congregational life.

For Mennonite women on rural homesteads, working with one’s hands has involved, among other activities, sewing, quilting, gardening, cooking, and canning, and of course bearing and raising children (77). By taking on—and being made to take on—these basic responsibilities of care, Mennonite women have sustained and reproduced Mennonite life. Though twentieth-century sociological transformations would lead many Mennonite women and their families off of farms and into cities, the importance of domestic handiwork continues to be affirmed, for instance, by popular cookbooks written by and for Mennonite women (Longacre 2003; Schellenberg et al. 2011). Mennonite women past and present have, moreover, taken central roles in their congregations through their work of cooking and sewing for events and charity auctions.

---

5 This conception of marriage can be seen as an effect of rural life, in which “the Mennonite family, either nuclear or extended, was a central institution for organizing community life and transmitting beliefs. A family functioned as an economic unit, and was the building block for village and settlement formation” (Epp 2008, 61). It also has roots in the Anabaptist theological conviction that marriage is a partnership between two committed disciples of Christ. See Snyder 1995, chap. 19.
Mennonite women’s hospitality and home management has taken a variety of notable forms. Elaine Sommers Rich tells the story of two Pennsylvania women who harbored Native Americans fleeing settler violence in 1767 (32). Another woman calmed tensions between her nonresistant husband and the soldiers who showed up unannounced at their farm by inviting the men to dinner (34–5). In the late nineteenth and early twentieth centuries, Susan Ressler Good Hostetler wrote a regular column in the Mennonite press advising women on housekeeping; one column counseled ministers’ wives on gentle ways of guiding their husbands’ theology (47–8). The related impulse and effort to foster social connections among rural homesteads led not only to the women’s organizations described below, but in several cases to the establishment of congregations (180). Congregations were also birthed out of some urban boarding homes for Mennonite girls working as domestic servants, homes that were largely led by women (Epp 2008, 45–8).

The patriarchal character of most Mennonite congregations meant that, even if women founded and sustained them, they typically did not have formal roles in congregational decision-making or leadership until the mid-to-late twentieth century. As Epp details with respect to Canadian congregations, women’s quest for participation in decision-making processes was long and often arduous (132–44). Women’s formal participation only became widespread in the 1960s, partially in response to sociological changes in North American culture toward more horizontal and inclusive organizational structures, and toward the involvement of women in the waged labor force.

It is, again, important to note that I am limiting my discussion to those Mennonites that would later form Mennonite Church Canada and Mennonite Church USA. Many conservative Mennonite congregations and conferences do not recognize women pastors, including Lancaster Mennonite Conference (now LMC), which was a founding member of MCUSA but left in 2018 due to disagreements over the denomination’s response to pastors who performed same-sex wedding ceremonies and regional conferences that ordained gay and lesbian pastors. It is also worth noting that by focusing on women’s movements within Mennonite communities, I am not discussing women who left those communities altogether. Their lives, including their relations to Mennonite women’s movements, are an important topic for further study.
When women began financially supporting the church out of their own incomes, it became difficult to justify excluding them from decision-making (141). Women, moreover, had gained leadership experience in women’s and missionary organizations, and were prepared to agitate for their own inclusion.

Epp and Anita Hooley Yoder further describe the influence, in both Canada and the United States, of feminism on these debates. Women, and some men, began to contest the patriarchal character of the church itself, arguing on biblical and theological grounds for gender egalitarianism (Epp 2008, 123; Yoder 2017, 57–70). The goals of this contest were not only the right to participate in congregation-wide votes and committees, but also to serve in official pastoral roles. Explicitly feminist theological arguments to this end overlapped with personal testimonies from women who felt they had been called by God to serve as pastors. In Epp’s view, this attempt to root women’s access to pastoral ministry in divine vocation enabled women to advance toward formal equality with men while perpetuating the image of women as submissive and obedient (Epp 2008, 127). Furthermore, Epp notes that the opening of ordination to women at the end of the 1970s coincided with the devaluation of ordination, as theologians argued for a more horizontal conception of church leadership (123–4).

Stage 2: Women’s Service Organizations and Mission Activity

A significant strand in the argument for women’s participation in congregational decision-making and leadership drew on women’s experience in mission and service organizations. The nineteenth century has been called the “Great Century” of Protestant missionary activity, and during this period North American Mennonites began to shift their orientation from rural isolation to vigorous public engagement. Here “mission” meant not only issuing evangelistic calls to conversion to Christian faith, but also attempts to address hunger, poverty, illiteracy, and other modern social issues. Both major Mennonite denominations created mission agencies in the mid-to-late nineteenth century, and in 1920 these and related denominations
formed Mennonite Central Committee to focus on relief, development, and refugee resettlement. Mennonite women, shut out at this point from official leadership, founded their own organizations to promote mission and meet concrete needs.

Many of these organizations began as “sewing circles”, groups of women meeting regularly to sew bed sheets and clothing, make quilts, can food, and otherwise prepare materials for people in need. Some of these materials were for local needs—a family whose house burned down, a nearby community destroyed by natural disaster—and some of it was for Mennonite mission projects in North America and abroad. In Gladys Goering’s terms, for many women, participating in such activities was an extension of their ordinary, domestic care work—they were “just being neighborly” (1980, 23). The circles also served the women’s own social and spiritual needs, as described by Anita Hooley Yoder: “In their organizations, women came together to work, to meet the needs of others, often with amazing dedication. But they also came together to work—to meet their own needs of fellowship and community” (2017, 28).

The developing circles often collaborated, and eventually, organizations emerged in each denomination to coordinate their work. These organizations raised considerable funds for their activities and were able to hire staff, support missionaries, and issue publications. As such, they were crucial institutions for generating solidarity and training women for organizational leadership (Redekop 1996, 61; Yoder 2017, 42, 58, 86). Writing about (Old) Mennonite Church sewing circles, Sharon Klingelsmith suggests that, while sewing and related activities were “the foundation upon which the work could be built”, ultimately the circles’ leaders viewed them as “a stepping stone to more significant work” (1980, 189). That work was full participation in their churches’ mission.7

7 Cf. Goering 1980, 105, writing on the GC women’s organizations: “Not all groups sewed. The term ‘our mission and sewing societies’ in the first year indicated a difference of approach”.
Men, and some conservative women, resisted the women’s organizations. The most extreme act of resistance occurred during the 1920s, when the MC mission board unilaterally dissolved the Woman’s Missionary Society and created new leadership and funding structures for the denomination’s sewing circles (Klingelsmith 1980, 199–201; Rich 1983, 201). Later organizational struggles have included the challenge of incorporating Black, Latina, and Indigenous women as participants and leaders (Hinojosa 2014, 149–73; Yoder 2017, 99–118); criticisms from feminists that the organizations were too conservative (90–8); and a general decline in participation after the 1970s (Redekop 1996, 103–110; Yoder 2017, 143–55).

A paradoxical contribution to the organizations’ decline was their own success. Although feminist critique of patriarchal church structures stood in some tension with the traditional women’s organizations, as will be explored below, the combination of both resulted in the opening of denominational boards and committees to women’s participation (Epp 2008, 169). In many cases, the first women to serve in the churchwide structures were in fact the leaders of the women’s organizations (Yoder 2017, 119–22).

Anita Hooley Yoder suggests that, although the women’s organizations have declined, they remain important sources of social and especially spiritual connection for their members (135–42). The spiritual character of the organizations is also highlighted by Gloria Neufeld Redekop, who contends that the Canadian organizations historically “functioned as a parallel church for Mennonite women” (1996, 73, 98–99; Epp 2008, 161). As evidence, Redekop points to the structural similarities between typical Mennonite worship services and the schedules of the conferences and other gatherings hosted by the women’s organizations. Yet in doing so women were not merely imitating services designed by men, they were contesting the normative shape of Mennonite worship—Redekop reports that one woman wrote publicly that the women’s gatherings were more likely to model the New Testament pattern for worship than were male-led congregations (1996, 73). Similarly, Felipe Hinojosa tells the story of how two women, Gracie Torres and Seferina de León,
introduced music influenced by the Civil Rights Movement and popular styles from South Texas into Latina Mennonite conferences during the 1970s. This music was eventually taken up by many Latino Mennonite churches, becoming an identity marker for Latinos within the white-dominated church (2014, 168–71).

Even as priorities have shifted during the past several decades of decline, Redekop and Yoder both argue that mission and service remains an important feature of Mennonite women’s organizations (Redekop 1996, 129; Yoder 2017, 174, 207). Yet, their understanding of mission began to change in the 1970s, when it became increasingly common to criticize traditional mission work as culturally imperialistic (138). Prior to that decade, it was common for women’s organizations to support many women missionaries. Since the beginning of the mission movement in the nineteenth century, becoming a missionary was “a way in which [women] could effectively function as religious leaders but far away from the watchful eye of church authorities” (Epp 2008, 145). Missionary women were some of the first women to be ordained and to preach in North American congregations (147–8). Male leaders gave women some leeway in missionary roles because they saw traditional feminine virtues, such as nurture and self-denial, as beneficial on the mission field (149–50). Once again, women found ways to leverage their identification with care work into space for the development of their interests and capacities. It therefore came as a surprise when, in the late 1970s, they began to find that their sponsoring women’s organizations were losing interest in their work (Yoder 2017, 138).

Stage 3: The Turn to Social Activism and Academia

As Anita Hooley Yoder points out, it is possible to see the Mennonite women’s organizations as shifting their focus from traditional mission and service work to issues they had previously neglected, such as domestic violence and sexual abuse (138–9). When the women’s organizations began addressing those issues in the 1980s, they were catching up to feminists who had been busy writing and organizing around them for over a decade.
The primary institutional vehicle for Mennonite feminists was the Committee on Women’s Concerns, formed in 1973 under the auspices of Mennonite Central Committee’s Peace Section. In Yoder’s analysis, the Committee served needs that were not being met by the traditional women’s organizations (67–68). A major part of the Committee’s work was the publication of a *Report*, which over thirty-one years featured regular articles criticizing the exclusion of rape, child abuse, domestic violence, and related topics from typical Mennonite peace theology. The articles, however, were not merely critical. Carol Penner describes how *Report* authors developed a distinctive interpretation of Jesus based on their understanding of their Anabaptist tradition, their personal stories, and their feminist commitments (Penner 2020a, 38–47). In place of the Jesus of male Mennonite theology—a Jesus who emphasized redemptive suffering and nonresistance—this Jesus was dedicated to radical equality and nonviolent resistance to patriarchy and other forms of oppression. In summary, “writers asked vital questions and wrestled with God. They had suggestions about how followers of Jesus could work for change in church and society” (35).

This shift to consider how the historic Anabaptist-Mennonite peace witness might extend beyond the church to counter violence in “society” participates in a wider movement among Mennonites after World War II. As the story is usually told, many North American Mennonite men, after being mocked and humiliated by their fellow citizens for refusing military service, felt a sense of “restlessness” and responsibility to get involved in social change (Loewen 2015, 66–69). Since World War II was quickly followed by the Cold War arms race, the Civil Rights Movement, and the Vietnam War, Mennonite men had plenty of opportunities for nonviolent activism in the coming decades. However, as historian Rachel Waltner Goossen has detailed (1997), many Mennonite women also lived and worked in alternative service camps during the war, also experienced abuse from their militaristic neighbors, and also were motivated by their experience to engage in social service and peace activism after the war.

Likewise, the story of Mennonite peace theology typically tracks the post-war shift from traditional theologies of nonresistance toward
theological justifications of active nonviolence—all as written by men. The publications of the traditional women’s organizations and the feminist Committee on Women’s Concerns represent an alternative tradition, one focused on the concrete needs of women, children, and communities around the world. This tradition is perhaps most clearly seen in the ongoing series of Women Doing Theology (WDT) conferences, which began in 1992. Carol Penner (2020b, 59–64) describes how these conferences have integrated worship, academic and ordinary women’s theological reflection, and creative dialogue among an increasingly diverse set of participants. Penner suggests that this format is rooted in Mennonite women’s feminist reclamation of their Anabaptist heritage, yet shares significant features with the Catholic Women-Church gatherings that began in the early 1990s (64–75). This interpretation strikingly places the WDT conferences in continuity with earlier gatherings of Mennonite women’s organizations which, as discussed above, have been viewed as creating a parallel church structure.

The presence of women academics at the WDT conferences reflects the growing number of Mennonite women who have obtained advanced theological degrees and academic positions since the 1980s. Mennonite women have made significant contributions to a variety of theological disciplines, including biblical studies, church history, ethics, practical and pastoral theology, and systematic theology. The numerous academic publications by Mennonite women include studies of power in communal biblical interpretation (Neufeld Harder 1998 and 2018); suffering, forgiveness, and Christ’s death on the cross in light of violence against women (Gerber Koontz 2015; Guenther Loewen 2016); and the central role of women in Anabaptist-Mennonite history (Snyder and Hecht 1996; Schmidt, Umble, and Reschley 2002). After the public exposure of the most famous twentieth-century Mennonite peace theologian, John Howard Yoder, as a serial sexual abuser (Krall 2013; Waltner Goossen 2015), Mennonite women theologians have engaged in a full-scale reevaluation of what it means to follow Jesus (Soto Albrecht and Stephens 2020).
North American Mennonite Women’s Movements, Care Ethics, and Democratic Politics

To return to the language of care ethics, the history of North American Mennonite women’s movements can be viewed as a history of women bringing to voice their experience as carers so that the full scope of their interests and values might be taken seriously within their communities. In doing so, they help us comprehend the tears of Mother Eberly and other women like her, tears shed over misuse of their “coins,” taking that term metaphorically as well as literally— their desires have been silenced, their value has been exploited.

Mennonite women, like most women, have belonged to patriarchal cultures in which men assigned them caring roles and defined them as carers. The leaders of the first Mennonite women’s organizations, the sewing circles, embraced these roles and identities, in order to simultaneously show the value of caring work in their communities—of feeding, clothing, and educating—and as a means of empowering women for leadership and social service. Some of the participants in the women’s organizations have resisted a feminist politics aimed at abolishing traditional gender roles and identities. At the same time, the organizations facilitated the participation of women in congregational decision-making, pastoral and denominational leadership, and mission work. Those women who did embrace feminism often looked elsewhere than the women’s organizations, starting new organizations and joining new social and theological movements.

Care ethicists should have little trouble describing this history as driven in large part by women politicizing their care work in a way that, through much struggle, is resulting in the democratization of their communities. In the present case, the primary communities in question are Mennonite church communities, but through mission work and social activism these women have also been involved in democratic social change beyond the boundaries of their churches. Although there has been tension between members of the traditional, mission- and service-oriented women’s organizations and the feminist activists and academics, both have drawn attention to the ordinary
experiences of women caring and being made to care, and otherwise being violated in interpersonal, communal, and socio-political relations. In other words, North American Mennonite women can be understood as engaged in a practical project of care ethics, of insisting on the ethical priority of concrete relationships in which mutual care can be nurtured or refused. This insistence on care has brought about justice, it has expanded the distribution of power within and without Mennonite communities. North American Mennonite women have enacted a democratic politics of care.

Accepting this analysis requires grappling with the explicitly religious and theological dimensions of North American Mennonite women’s movements. These movements, in both their traditional and feminist forms, have prioritized Christian worship, biblical interpretation, and theology. Reinterpreting and claiming their identities as Anabaptist-Mennonite Christians, expanding the “moral boundaries” (Tronto 1993) of their religious communities, has been their central organizing strategy. North American Mennonite women’s democratic politics of care has been enacted through claims about the nature and identity of God; about the shape of Jesus’ ministry, especially vis-à-vis women; about what the Bible says or does not say; about the church’s mission and ministry and the gifts of the Holy Spirit. What is visible in these movements, in this politics, is not a drift toward a secularized, universal version of care ethics, but rather a particular, religious version of the same. It is care ethics in a religious voice.8

Works Cited


8 I am grateful to Rachel Miller Jacobs and Mary Schertz for their comments on an early version of this chapter.


In *A Theory of Justice*, John Rawls offers a unique conception of justice as other philosophers have before him, such as Plato, Thomas Hobbes, and David Hume (Pomerleau n.d.). From a different angle, ethics of care philosophers have addressed justice too (Bubeck 1995; Engster 2007; Held 2006; Tronto 2013). For Western ethical and political thought in general, justice has been important, and existing political orders have made justice a significant, genuine virtue. In the United States, the Preamble of the Constitution includes establishing justice as one of its goals; respect for justice molds American youth as they pledge allegiance to the flag, a recitation ending with the phrase “with liberty and justice for all” (Okin 1989, 3). Furthermore, James Madison believed that “justice is the end of government”, and the principles of justice help the majority to unite despite many parties and various interests (2003, 254-255). Arguably, Western society has failed to realize justice, whether this relates to race and police brutality, economic inequality and exploitation, oppression of women or people with different gender identities, or colonization and genocidal practices against Indigenous nations and peoples; some may claim Western societies have done more to promote injustice. In this essay, I will reimagine justice and offer an alternative interpretation: justice as preservative care for sustained peace.

First, the traditionally accepted interpretation of justice will be explained, which focuses on humans getting what they deserve.
Second, Book I of Plato’s Republic and Cicero’s On Duties provide reasons for rethinking the concept of justice as a necessary component for being an excellent, thriving person. Plato and Cicero create space for partiality and care when considering justice, so the relevance of ethic-of-care approaches for reimagining justice becomes obvious. An ethic of care foregrounds partiality and urges people to remember how necessary care is in daily relationships, institutions, and societies, but it also provides a normative component that spurs people to make caring relationships more just. With some exceptions (Engster 2006; Puig de la Bellacasa 2017), care philosophies tend to be human-centered and underdeveloped regarding responsibilities to nonhuman relatives, specific localities, and ecosystems. Consideration of Indigenous philosophies helps to broaden understandings of justice and care (Whyte and Cuomo 2017); they cultivate greater concern for nonhuman relatives, respect for place, religio-spiritual framings of creation, and a positive peace that moves beyond the mere absence of violence. They foreground giftedness and advocate cultivating balance, harmony, and a lasting peace in all relations. From this exploration, justice as preservative care for sustained peace emerges.

This essay’s orientation is influenced by the philosophy of Gilles Deleuze, a thinker who has shaped assemblage theory, cinema studies, moral philosophy, and more (Bogue 2003; Buchanan 2021; Jun and Smith 2011; Rajchman 2000). Deleuze emphasizes the creation of concepts in philosophy, an affirmative process that generates new concepts, connects concepts in novel ways, and gives voice to new problems or reframes old ones (Conway 2010; Deleuze and Guattari 1994). Concerning criteria for new philosophical texts, Deleuze wrote the following words in a 1986 letter to Arnaud Villani:

I believe that a worthwhile book can be represented in three quick ways. A worthy book is written only if (1) you think that the books on the same or a related subject fall into a sort of general error (polemical function of a book); (2) you think that something essential about the subject has been forgotten (inventive function); (3) you consider that you are capable of creating a new concept (creative function). Of course, that’s
the quantitative minimum: an error, an oversight, a concept.... Henceforth, for each of my books, abandoning necessary modesty, I will ask myself (1) which error it claims to correct, (2) which oversight it wants to repair, and (3) what new concept it has created (Dosse 2010, 112).

The error I seek to correct is an overemphasis on merit in the “long tradition” of justice, an error that continues to shape contemporary societies and political structures (such as those found in the United States) leading to the “tyranny of merit” and its harmful consequences (Sandel 2020). An oversight in Western philosophy, and in most writings on care ethics, relates to the natural world and our non-human relatives; in this essay, I want to reorient justice and care by connecting them more to the natural world and nonhuman beings. The new concept I put forward is one that unites some of the best elements in Western philosophy from Plato and Cicero, care ethics, and Indigenous philosophy. In the end, I hope this essay will help us to rethink relationships and the socio-political contexts we inhabit, so we can live better lives and make the world a better place for all sentient beings and for future generations.

A Commonplace Understanding of Justice

Some believe egalitarian conceptions of justice conceal the traditionally accepted concept of justice, which is discernible in the work of Simonides (c. 548-468 B.C.E.). In Republic Book I, Polemarchus clarifies Simonides’s view of what is just: “[Simonides] stated that it is just to give to each what is owed to him. And it’s a fine saying, in my view” (1992, 331e). In The Four Cardinal Virtues, Josef Pieper foregrounds this “long tradition” of justice as what one deserves:

Nevertheless there is a notion of the utmost simplicity to which that bewildering variety [of conceptions of justice] can be reduced. Indeed, Plato already mentions it as if it were handed down by long tradition. It is the notion that each man is to be given what is his due (1965, 43-44).

From this, a clear understanding of injustice emerges for Pieper:
All just order in the world is based on this: that man give man what is his due. On the other hand, everything unjust implies that what belongs to a man is withheld or taken away from him—and, once more, not by misfortune, failure of crops, fire or earthquake, but by man (1965, 44).

Justice concerns the ways humans interact and how societies ought to treat people; the concern is with what each person should or should not receive based on who they are, what they have done, and the consequences of their actions. Emphasis is on merit, and this generates the idea of justice as desert.

Philosophers have challenged this understanding; John Rawls emphasizes luck’s role in people’s talents and genetic inheritances: what people think they deserve is often based on a “natural lottery” that does not originate in merit (1971, 64-65). John Kekes, however, criticizes views that attempt to isolate justice from desert. He asks readers to contemplate two societies; the first distributes benefits and burdens randomly, and the second distributes benefits and burdens according to people’s actions and the characters that produce those actions: good people get benefits, bad people get burdens (2006, 88-89). Unlike the random society, the ordered society enables people to have reasonable expectations about outcomes based on their characters, choices, and actions. Kekes has asked people, “Which pattern would you impose?” He claims, “I have yet to meet one who would not impose the ordered pattern” (2006, 88). The ordered society allows people to get what they deserve; people can predict that if they perform specific good actions, they can expect certain good outcomes. In a random society, however, people would know that “hard work, intelligent choice, and self-discipline, for instance, have exactly the same chance of success as sloth, stupidity, and self-indulgence” (2006, 89). The ordered society allows people to meet their needs, to cultivate the life they want to live, and to have reasonable expectations about benefits. People prefer the ordered society because they will get what they deserve.

Kekes emphasizes an important point; he claims “justice is essentially inegalitarian” (2006, 106). Alluding to Aristotle, Kekes claims justice as desert is compatible with treating “equals equally and
unequals unequally” (2006, 106); people interact with others in dissimilar ways, they meet or fail to meet their obligations differently, and what they have done (along with the associated consequences) will warrant disparate advantages or disadvantages. People acting in beneficial ways should be treated equally and receive similar benefits; people acting in deleterious ways should be treated equally and receive similar harms. The two classes ought to be treated unequally. This is why egalitarian views of justice are misguided: egalitarians overlook the centrality of characters, actions, consequences, and the cultivation of merit based on how well people have lived in society; according to Kekes, egalitarianism may be argued for based on other concepts or values, but it is not grounded in justice. In the end, justice as desert is hierarchical, it reinforces inequalities concerning who receives benefits and burdens, and it exploits a prima facie consensus for order over randomness by focusing principally on the link between character, actions and their consequences, and related earned benefits or harms.

Some doubts exist, however. First, merit and desert are based on a society’s values and norms; descriptively, certain characters and actions may be valued, but that does not mean they ought to be valued. What is thought to be just in one society may later be seen to be unjust by future generations; simply because a society is well-ordered and facilitates people getting what they are due does not mean that justice exists. Oppressed people have often lived in well-ordered societies and have gotten exactly what they deserved according to established standards, so desert alone is insufficient. Second, justice as desert fails to address whether the conferred benefits and burdens improve individuals, their communities, and the common good; justice as desert is partly decontextualized and offers little to no guidance concerning whether what people deserve will actually work toward the good of the recipient or those in a relationship with the recipient. Winners of lotteries, for example, have deserved their winnings, but the financial windfall in some cases has led to worse lives through deleterious extravagance. Third, by simply focusing on merit and individuals, it is unclear whether justice as desert will move
beyond negative peace (as the mere absence of violence) to cultivate a positive peace in society. Plato and Cicero were aware of similar deficiencies.

**Revising Justice: Plato and Cicero**

In Book I of Plato's *Republic*, Polemarchus amends the idea of justice: “friends owe it to their friends to do good for them, never harm”, and “in my view what enemies owe to each other is appropriately and precisely—something bad” (1992, 332a-b). Socrates is uncomfortable with this; justice is a “human virtue” (335b), and a human virtue makes people better or excellent. For this reason, Socrates resists injury-causing descriptions of justice as desert because they support harming people. Instead of improving people, giving others what they are due by harming them will lead those who are injured to be worse off (335a-e). Socrates claims,

> If anyone tells us, then, that it is just to give to each what he’s owed and understands by this that a just man should harm his enemies and benefit his friends, he isn't wise to say it, since what he says isn’t true, for it has become clear to us that it is never just to harm anyone (Plato 1992, 335e).

What has been identified by Pieper, Kekes, and others as the “long tradition” of justice is misguided: justice as desert supports harming others.

Cicero foregrounds the beneficial nature of justice in *On Duties*; his Latin title (*De officiis*) was meant to allude to the Greek Stoic emphasis on cultivating “appropriate behaviour directed towards virtue” (Walsh 2000, xvii). Justice is one of the four virtues that make a person a moral human being; the other attributes are wisdom, courage or a lofty spirit, and temperance or moderation. From these four attributes, human obligations or duties emerge. Cicero indicates justice is primarily concerned with social obligations:

> Of justice, the first office is that no man should harm another unless he has been provoked by injustice…. We are not born for ourselves alone, to use Plato’s splendid words, but our country claims for itself one part of
our birth, and our friends another. Moreover, as the Stoics believe, everything produced on the earth is created for the use of mankind, and men are born for the sake of men, so that they may be able to assist one another (1991, 9-10).

Cicero emphasizes the negative and positive aspects of justice: do no harm (unless to protect oneself from harm), and support the welfare of others and the common good. He connects the positive dimension with beneficence, generosity, or kindness. In being beneficent, the person must be sure to not harm the recipient or others in the process; such actions should not exceed one’s capabilities or resources, and they must be appropriate to the recipient’s character. For Cicero, beneficence has its roots in love, fondness, and obligation to others, and he writes that we ought to “enrich above all the person who is most in need of riches” (1991, 21). Such assistance is embedded in various spheres of human social relationships: our connection with the entire human race, one’s country, and one’s family and friends. Cicero’s cosmopolitan outlook shapes his view of justice with beneficence, an outlook emphasizing respect for humanity and the belief that human beings should be treated as ends in themselves, never merely as a means (Nussbaum 2019, 27).

The juxtaposition of justice as desert with Plato’s and Cicero’s amendments is relevant to Reinhold Niebuhr’s insight:

The most perfect justice cannot be established if the moral imagination of the individual does not seek to comprehend the needs and interests of his fellows… Any justice which is only justice soon degenerates into something less than justice. It must be saved by something which is more than justice (1960, 257-258).

Justice as desert is too thin because the effects on individuals and the common good remain unaddressed; it overlooks how desert may diverge from improving the recipient of a benefit or how a burden may cause unneeded suffering. Socrates raises this issue: suppose a friend has lent you a weapon, and that friend comes back for it, but is furiously insane; Socrates makes it clear that to give back the weapon would be unjust, even though the friend deserves it (Plato
Justice as desert must be supplemented with a concern for the person’s well-being, which should limit the criterion of desert. Cicero embraces the good of the individual person and argues that justice should support the common good and bind people together as a society and as one large human community. The implications of Plato’s and Cicero’s views are significant; they challenge the enduring belief that impartiality should guide the distribution of desert. Justice cannot be impartial because concern with bettering individuals, the common good, and humanity as a whole cannot be realized through abstract, disinterested, and delocalized ways of distributing benefits and burdens. Concern for individuals embedded in context-dependent relational networks should be included as an essential part of the concept of justice, and such concerns move us closer to a positive peace.

Justice and the Ethics of Care

Ethic-of-care history is grounded in feminist oppositions to abstractions, universality, impartiality, delocalized justice, and principle-based moral philosophy, which have been nurtured historically by a “male” voice that excludes, underrepresents, or misrepresents women (Collins 2015; Nye 1990; Rachels 2012, 147-58; Sander-Staudt; Shafer-Landau 2018, 276-90). For example, Lawrence Kohlberg posited a six-stage ethical framework of development, and women supposedly occupy a lower level of development because they concentrate more on social roles, relationships, and interpersonal expectations. The highest stage, however, is associated with abstract reasoning, universal ethical principles, rights, justice, and a Kantian-influenced orientation. As Carol Gilligan observes,

Prominent among those who thus appear to be deficient in moral development when measured by Kohlberg’s scale are women, whose judgments seem to exemplify the third stage of his six-stage sequence. At this stage morality is conceived in interpersonal terms and goodness is equated with helping and pleasing others (1993, 18).

To move beyond this level, women would have to enter the realm of traditional male activity:
Kohlberg and Kramer imply that only if women enter the traditional arena of male activity will they recognize the inadequacy of this moral perspective and progress like men toward higher stages where relationships are subordinated to rules (stage four) and rules to universal principles of justice (stages five and six) (1993, 18).

Devaluing women is consistent with traditional Western philosophical biases: Aristotle believed men are superior to women by nature, Aquinas evaluated women as defective, and Kant thought that laborious education weakened women’s charms (Shafer-Landau 2018, 276). Resisting this, feminist care ethicists have argued not only for equality between men and women, but they have challenged traditional moral philosophy by foregrounding care, partiality, and localized relationships; the role of parenting gained significance as a way to think ethically.

In the early stages of development, conflict existed between care ethics and justice; in The Ethics of Care, Virginia Held asserts,

As thinking about [how] care developed, care and justice were often seen as alternative native values. “Care” and “justice” were taken to name different approaches to moral problems and characteristically different recommendations concerning them. Care valued relationships between persons and empathetic understanding; justice valued rational action in accord with abstract principles (2006, 62).

Nel Noddings agrees: “The language of the mother concentrates on relationships, needs, care, response, and connection rather than principles, justice, rights, and hierarchy” (2013, xiv). This shift supports particular concerns about individuals and accepts emotions, caring, and partiality in moral philosophy and ethical decision-making. Noddings claims,

Caring preserves both the group and the individual and… it limits our obligation so that it may realistically be met. It will not allow us to be distracted by visions of universal love, perfect justice, or a world unified under principle (2013, 100-101).

Early care ethicists and those who embraced justice as desert could agree with one another: care and justice diverge.
The ground between ethics, justice, and the personal caring realm has shifted over the years. Susan Moller Okin supports including justice in the sphere of the family:

the family... must be just if we are to have a just society, since it is within the family that we first come to have that sense of ourselves and our relations with others that is at the root of moral development (1989, 14).

Annette C. Baier values sentiments, gentleness, and sympathy, but she specifically values trust, which she argues is a fundamental component in human relationships; yet she also believes that justice and care should not remain antagonistic, but must be harmonized (1995, 18-32, 95-202). Daniel Engster's project is that “of developing care ethics into a theory of justice”, and he claims that “the principles of care theory are central to any adequate theory of justice” (2007, 5); Engster argues that through care theory, justice can be improved making sure all people get the care and support they need (2007, 7). Finally, Held embraces this stronger association between justice and care; she indicates care ethics is in its infancy compared to justice’s long history in Western thought, and she advocates that “the ethics of care can and should include the concerns of justice, the general welfare, and the virtues” (2015, 34). Ethic-of-care approaches have become more inclusive: justice and care do not have a predetermined, enduring hostile relationship; they can work together.

Joan Tronto supports this view: “We need to demand that caring responsibilities be reallocated in a way that is consistent with our other values, such as equality, justice, and freedom” (2015, 38). Tronto reimagines democratic societies; they ought to be based on care and should care more about caring practices. She defines care in the following way:

in the most general sense, care is a species activity that includes everything we do to maintain, continue, and repair our world so that we may live in it as well as possible. That world includes our bodies, our selves, and our environment, all of which we seek to interweave in a complex, life-sustaining web (as quoted in 2015, 3).
Care includes five dimensions: (1) being more attentive, (2) being more responsible for others, (3) being more competent in caring, (4) being more responsive to those cared for, and (5) being a citizen who cares with other citizens (2015, 5-16). People have needs, which are supported through the work of others. Others care for us, and we care for others; this occurs on a spectrum from receiving to giving care. To care, however, is to be more discerning and attentive of those in need (caring about); it is to identify who is responsible for another’s care (caring for); it is to identify who should competently give care to another (care giving); and it is about being responsive to those we have cared for, listening and responding to their feedback (care receiving). Caring is a two-way relational process supportive of communication between care giver and care receiver, and some who give care today will receive care tomorrow. A level of reciprocity is often present as we give back to those who have cared for us, or we care for others based on the care we previously received. Tronto weaves this into the democratic political structure: we want a democracy that is attentive, responsible, competent, and responsive to its citizens and helps them to live in the world as well as possible, while supporting them in caring for each other. A just democratic political system will cultivate a more caring society.

Eva Feder Kittay agrees based on her philosophical expertise and her experience as a mother with a daughter who has a severe intellectual disability; U.S. society needs to provide more support for caregivers, care-receivers, and families with loved ones in need (2001, 566). While society can support the flourishing of some with disabilities, Kittay argues other disabilities resist well-intentioned reforms:

Someone such as my daughter could not survive, much less thrive, without constant and vigilant attention, without someone performing for her nearly all the tasks of daily living, as well as providing for her—and her caregiver—the material resources required for her existence and flourishing (2001, 566).

Her daughter is a person, however, no matter how different she may seem when viewed through a liberal conception of personhood. In
different ways, Aristotle, Locke, and Rawls have focused on rationality, reasonableness, and being a productive member of society; her daughter, Sesha, will never meet the criteria established by their marginalizing standards. Through compassionate, attentive interactions with Sesha, Kittay is clear that her daughter is an active member in forming her own world:

The shaping of one’s world is a gift that each individual possesses and that some make more use of than others. Sesha, in spite of all her limitations, makes ample use of this gift. To be with Sesha is to enter her orbit, to gain a glimpse of the world as she constructs it. Even those who are still more limited than Sesha have this capacity. It requires an openness to experience it (2001, 568).

All humans exist in relationships with various levels of dependence and independence; through more receptive, attentive interactions caregivers and care-receivers can learn from one another. Kittay reminds readers how the boundaries of justice should expand to value various levels of dependency and the importance of care:

Justice that is caring begins with an acknowledgment of our dependency and seeks to organize society so that our well-being is not inversely related to our need for care or to care; such justice makes caring itself a mode of just action (2001, 576).

In harmony with Kittay, Barbara J. Lowe offers a relationally-based moral philosophy that weaves together justice and care; she avoids including care as a supplement. Care is a component of justice: we cannot have “a comprehensive notion of justice” without special attention to the role of care (2007, 96-97). The concept of justice includes care, and contextualized ways of bringing justice into the world should emphasize ways of caring and relating. Unlike Rawls, Lowe embeds justice in a relational ontology: human beings enter the world within a network of relationships, and they live their lives within networks of relationships. Lowe, however, divides the concept of justice in two; there is an abstract realm that respects basic human needs and rights, and it is oriented around nonmaleficence. The particularized realm, however, takes shape within the space of specific
relationships that, ideally, cultivate beneficence and flourishing lives; this honors localized relationships, roles, and obligations that constitute unique human lives. Both realms are grounded in, and seek to cultivate, a deep respect for persons, but to focus solely on abstract justice would lead to shallow relationships.

Lowe makes it clear that the vibrancy of life emerges from relationships that allow people to enter reciprocally into each other’s lived reality, to come to understand the other person intimately for who they are, and to mutually make each other’s life better and more fulfilling; this receptive relationship is based on loving perception and actions. This is juxtaposed with arrogant and sterile perceptions and actions; the first is based on conquering others, non-mutuality, and an instrumental use of others. The second involves detachment from others, a rigid way of interacting, and a lack of emotional connection. These approaches are non-receptive. Because the world involves non-receptive interactions, which means particularized justice is not realized, a second receptive mode of perceiving and interacting is necessary. The sympathetic approach is cautious in nature with all new relationships and with those who perceive and relate in an arrogant or sterile way, but it is always ready to move to the intimate, reciprocal mode of loving perception and actions when trust and reciprocity emerge. Lowe’s relationally-based moral philosophy brings justice and care together as one: justice ought to be grounded in care, and care ought to lead to justice at the abstract and particular levels. With supportive social conditions in place, it is through loving perception and interactions that justice can be realized most fully in the world; through loving relationships, people ideally become their best self and promote more just relationships, communities, and international associations.

Justice and Indigenous Philosophies

Doing philosophy in North America means being mindful of the colonizing past and present and the confluences of intellectual influences (Pratt 2002); minimally, this should involve considering what non-Western wisdom can contribute to conversations about justice
and being committed to using that wisdom to improve society. Indigenous nations and peoples embrace and embody different sets of attitudes, beliefs, and values; the resulting philosophical orientations and insights that emerge are distinct from those in the Western lineage (Whyte and Cuomo 2017). Pieper believes that justice concerns how humans treat one another; Kekes follows this line of thought when discussing ordered societies and how they meet human needs. Similarly, Plato and Cicero think of justice as aiding only fellow human beings. The consistent concern in ethics of care is how human beings care for one another; while Tronto’s definition of care includes the environment as part of the sphere of human caring activities, care ethics tends to include the environment in a supplemental way. In fact, most writings on care ethics are delocalized; they may be focused on the United States or Western societies, but the absence of caring for a specific geographical place is obvious; place-based concerns are largely absent. With some exceptions (Engster 2006; Puig de la Belloca 2017), dominant emphases on nonhuman relatives is lacking, as is the spiritual dimension and how it can shape reflections on care. Nussbaum argues that justice needs to be more inclusive; it should be more attentive to people with mental and physical impairments, should focus on international relations and inequities between wealthy and poor nations, and should broaden its concern for nonhuman species (2007, 1-8). Indigenous wisdom can expand our understanding of justice.

Creation is important. From the Haudenosaunee in North America to the Maori in New Zealand, a common belief is that creation is not owned, but has been given to all beings for their use, so all beings can flourish; there is a sense of belonging to Earth and place (Mohawk 2010, 242; Whitt et al. 2001, 4-12). The Maori make this clear; instead of thinking about owning Earth and its resources, they speak of being owned by Earth: “One did not own land. One belonged to the land” (as quoted in Whitt et al. 2001, 7). The Haudenosaunee have a similar orientation:

The world does not belong to humans—it is the rightful property of the Great Creator. The gifts and benefits of the world, therefore, belong to
all equally. The things that humans need for survival—food, clothing, shelter, protection—are things to which all are entitled because they are gifts of the creator. Nothing belongs to humans, not even their labor or their skills, for ambition and ability are also the gifts of the Great Creator…. all people have a right to the things they need for survival, even those who do not or cannot work, and no person or people has a right to deprive others of the fruits of those gifts (Mohawk 2010, 242).

This orientation opposes a common view extending from John Locke and Karl Marx to today’s capitalist-socialist debates, namely, the idea that we own ourselves and our labor; instead, everything is a gift from the creator, even our bodies and the labor we engage in.

As gifts, they are not our property but part of a larger network of relations, embedded in the same understanding that creation exists for the betterment of all beings, human and nonhuman alike. Indigenous philosophies resist uses of justice to buttress merit and ownership of property as one’s desert; such deployments of justice may allow some to flourish at the expense of others. We have been given the gift of life within fragile networks of relationships that sustain life, communities, and well-being; we did nothing to deserve this, and part of being a good human being is to be grateful for the gifts we have and to remember that we belong to creation and place, not the other way around. Within our roles on Earth, we are urged to be mindful of how we live, so we can coexist in ways that allow all aspects of creation to flourish, while not taking part in exploitative, zero-sum interactions; Glen Sean Coulthard highlights this reciprocity:

Within this system of relations human beings are not the only constituent believed to embody spirit or agency. Ethically, this meant that humans held certain obligations to the land, animals, plants, and lakes in much the same way that we hold obligations to other people. And if these obligations were met, then the land, animals, plants, and lakes would reciprocate and meet their obligations to humans, thus ensuring the survival and well-being of all over time (2014, 61).

Along similar lines concerning “mutual relatedness” and “mutual responsibility”, Winona LaDuke makes an important observation:
what people normally call religion or spirituality is identified by her and the Anishinaabeg peoples as “a way of life”, which means attempting “to live a good life in the best way we can” (LaDuke and Smith 2006, 40-43). Unlike some common ideas about religion or spirituality that focus on the individual or institutional nature of worship, ritual, or honoring a transcendent creator, LaDuke asserts that spirituality grounds her political activities; it regenerates her and prepares her to engage in long-term struggles for change. This struggle comes at the intersection between the past, present, and future; her work is grounded in remembrance of the Creator who placed her people in a specific woodland territory, and it is mindful of her relatives who have helped her people to flourish for thousands of years, both two-legged and four-legged relatives. This remembrance is never separated from the Creator who has given her people the gifts needed for ceremony and physical sustenance, which is indicated in the name for the Creator, Gichee Manitou (from the Ojibway/Anishinabe language); this term means “a gift from the creator”, and these gifts are intended to support not only the body but the mind and spirit as well (LaDuke and Smith 2006, 44). This giftedness extends to non-human relatives, plant life, and water systems; by observing these various dimensions of creation, Anishinaabeg peoples learn how to be more human. Being more human is dependent on knowing our relationships with nonhuman beings and what they can teach us about life, reciprocity, and balanced living.

As part of the sturgeon clan, LaDuke reflects on the relatedness of life and learning from nonhuman relatives, such as the sturgeon:

They are amazing fish who teach you about your humbleness in the big picture of things. They can go so far, live so long, and have so many descendants. They teach us through their existence. Over time our whole clan system, our government system, is related to them. That way of life… is related to our whole ecosystem and to our land (LaDuke and Smith 2006, 46).

This mindfulness allows them to live according to the Creator’s law (what they also call the natural law). For LaDuke and other Indigenous peoples, ceremonies celebrating the natural law, all human and
non-human relatives, and creation are intimately connected to place and manifestations of the sacred (hierophanies) that emerge only in that place, bringing a medicine for the soul. Hierophanies make the world habitable, orient Indigenous peoples, and become an axis mundi (or center of the world); this location orients activities, ways of being, and ways of relating, but it is largely about habitation, which means it is better to speak of religion or spirituality from an Indigenous perspective as being about habitation (Arnold 2012, 17-19). To degrade the land, to decimate nonhuman populations, and to separate Indigenous peoples from their land and ecosystems is to threaten or to undermine their connection to the Creator and to threaten their identities and traditional ways of life; their identity, their personhood, and the relational web of life are inseparable from place.

Religion or spirituality as habitation (linked to hierophanies and axis mundi) is often absent in discourses about justice and care, but another overlooked topic is sustained peace; very little is said about nurturing and sustaining positive peace when discussing desert or the proper division of resources. Indigenous philosophies address this oversight. For example, peace is an important value for the Haudenosaunee; the significance of peace is grounded in the story of their origins (Arnold 2008). Over 1,000 years ago in what is now New York State, five Indigenous nations were locked in a cycle of violence; Mohawk, Oneida, Onondaga, Cayuga, and Seneca were spilling blood over minor offences. A person called the Peacemaker crossed what is now Lake Ontario, landing on its southern shore (Lyons 1991). This person slowly persuaded people to throw down and bury their weapons of war, but one person resisted; Thadodá·ho’ was twisted in physical form, had snakes in his hair, and was a frightening person (Gonyea 2014, 9-10; Lyons 1991). In some versions of the story, he consumed human flesh. The Peacemaker and others united with words and songs of peace, and they gently transformed Thadodá·ho’ into a peaceful person. Interestingly, his name is now the title for one of the highest positions within the Haudenosaunee Confederacy; it reminds people of the violent past and how peaceful means were used to cultivate a sustained peace, but this peace is more
than the cessation of violence (negative peace). It is a long-term positive peace that should be maintained throughout society and in all relationships by each generation for seven generations into the future (Lyons 2010, 42); this peace is focused on the flourishing of all beings, human and nonhuman alike, and it is concerned with protecting balance and harmony, so all creation can thrive. Furthermore, this is not an abstract peace, but one localized through a deep connection with place and the unique attributes of the beings living in that region. In other words, the cultivation and maintenance of peace does not exist in an abstract realm, but is grounded in relationships in a specific place with a unique history.

Vine Deloria, Jr. has been clear that one of the most important dimensions of Indigenous thinking is a relational outlook: “We are all relatives” (Deloria 1999, 33-34). Not only are humans related, but they are related to nonhuman beings. Furthermore, these relationships exist only because of the place that supports them. In other words, this is a shift in thinking that foregrounds the importance of place and the relationships that emerge and are nurtured by that place and the power of spirit manifested there: meaning, life, and identity are grounded in geographical places with their spiritual energies. But the uniqueness of every being should be honored, and this is clearest in Haudenosaunee stories about the origins of lacrosse and the game played by nonhuman animals. The land animals and the animals of the air had picked their teams. The land animals had the agile, quick deer and the strong bear; the animals of the air had the strong eagle and the vision of the owl (Calder and Fletcher 2011, 31). However, the bat was left over, and neither side wanted him. Eventually, the animals of the air accepted the bat, and in the end, the bat scored the winning goal for the animals of the air. The lesson is clear: “This particular story teaches us that everyone is important, everyone has a particular talent, and these talents can make a difference in the final outcome of events” (Calder and Fletcher 2011, 31). When we graft this insight onto the story about Thadodá·ho’, we understand that even the most violent people can be transformed; people’s gifts can enhance the community; societies
can transform themselves to be more inclusive and receptive to those with unique gifts. In this way, the relational dimension is grounded in the exchange of gifts: each person shares their own gifts and cares for others to nurture their unique gifts; this reciprocity creates mutually enriching relationships allowing all to flourish, both individuals and communities. Inclusion, diversity, and the sharing of gifts benefit all (Arnold 2012, 1-2).

Indigenous philosophies provide a unique lens for reimagining justice. First, reflections on justice must be grounded in place; each unique place with its unique ecosystems and nonhuman relatives cannot be thought of on an abstract, impartial level. Instead, justice needs attunement to one’s local environs, all beings living in the region, and how each contributes in a unique way to the flourishing of life through balance and harmony. Second, justice is not only about human beings; from the Osage Nation to the Haudenosaunee, nonhuman beings (from rocks and rivers to birds and trees) are part of a larger familial network (Stokes et al. 1993; Tinker 2010). Humans are one line of descent in a much larger family tree, so justice concerns the cultivation and maintenance of balance and harmony in all relationships and between all beings. Third, based on Haudenosaunee insights, justice must be thought of in terms of peace; this is not a negative peace (the absence of violence) but a positive peace that seeks to cultivate and sustain thriving relationships and lives for seven generations to come (Lyons 2010). Justice through this lens creates an extensive obligation network that urges people to think about actions and relationships with a long-term emphasis that honors the many dimensions of creation; justice foregrounds the distant future, interdependence, and an inclusive relational ontology that embraces ecosystems, nonhuman relatives, and those human beings who live there. Finally, justice cannot cause harm; those struggling for justice should not be using violent, hate-filled, or derogatory means. To bring justice is to use words, songs, actions, attitudes, and values that are peaceful; peaceful means must be used for bringing about an enduring justice that nurtures beneficial relations with all beings. This must be done in a spirit of humility and gratitude.
grounded in the realization that our personal existence is a gift from
the Creator, our ancestors, and the cultivation of life in our mother’s
womb and on Mother Earth—not based on merit but on giftedness.

Justice as an Ethic of Preservative Care for Sustained Peace

The long tradition of justice is grounded in desert; this is based on
merit generated through one’s character, actions, and the conse-
quences of those actions, especially whether they benefit or harm
society. Those who benefit society according to the established tradi-
tions, values, and other evaluative criteria deserve benefits; those who
harm society according to the established traditions, values, and
other evaluative criteria deserve harms, with little to no indication
that harms must lead to the improvement of offenders. This is prob-
lematic because justice, in this sense, normalizes harming others
without the idea of betterment. Justice is classified as a virtue, how-
ever, so if somebody is to be harmed, the harm must—in some way—
improve that person. Human improvement is a central concern of
justice, so justice as desert has to be tempered by how what people
deserve benefits recipients and those around them. In other words,
well-being, improvement, and human excellence ought to be consid-
ered for all humans affected; harms can only be justified to the extent
that they cultivate human excellence for all people affected. Kekes,
Pieper, and others like Polemarchus who envision the concept of
justice in narrow terms are misguided. The first component of the
broadening of the concept of justice and the development of
the conception of justice as preservative care for sustained peace is
this: Justice is concerned with human benefit and the cultivation of
better human beings, so desert is not a sufficient criterion.

Some revision is needed: People, whether we classify them as
“good” or “bad”, should get what they need to make themselves bet-
ter. Returning to Thadodá·ho’, it is clear that his brutality would lead
many in the justice-as-desert camp to say that he deserved to be
harmed, but the story shows something different: what Thadodá·ho’
deserved (needed to become a better human being) was people
approaching him in a peaceful way to help him overcome his own
wounded nature, so he could be in healthy, reciprocal relationships with others. This points to something that not many who support justice as desert are willing to accept: sometimes “good” people who live well with others deserve less attention and resources because they are already “good” people; in other words, often those people who are seen as “bad” deserve more of a society’s peaceful attention and resources to transform them for the better through consensus, unity, and peaceful perseverance. It took time, energy, and love from the five nations’ inhabitants to transform Thadodá·ho’, bringing him to a position of peace and love. Instead of turning away from those who have harmed others and injuring them as punishment (justice as retribution), the Haudenosaunee story reveals that sustained peaceful attempts are needed to transform, heal, and reintegrate those who have caused harm. While such sustained peaceful, caring interactions and support will look different in different contexts, the goal is to bring a lasting peace that honors people’s unique gifts and the well-being of the environment they live in; while there may be resistance, that resistance will be met by all in a courageous, compassionate way guided by an enduring commitment to sustained peace.

Behind this expanded view of justice is the relational dimension: “We are all relatives” (Deloria 1999, 33-34); this interconnectedness is present in ethic-of-care philosophies with the emphasis on a relational ontology sustaining life (Lowe 2007, 86). The traditional interpretation of justice conceals this relational ontology and undermines the interdependent nature of human beings with one another and with all creation. Justice should not concentrate on what individual people deserve in isolation; doing so will separate them from their relational context and conceal how the treatment of one impacts others. While we may be angry and hurt because of a person’s actions, to harm that person may bring about more serious injuries within the relational web, cultivating greater imbalance and disharmony. Nussbaum reminds readers of the dangers of pursuing justice through anger; she examines movements for peace and justice, and leaders such as Martin Luther King, Jr. have approached social change through nonviolence and non-anger (2016, 211-246). For example,
while in a Birmingham jail, King’s anger transitioned from focusing on harms (and the possible desire for payback or status correction) to the idea that something must be done to improve society for all members, so everybody could live in peace: “a substantive and positive peace, in which all men will respect the dignity and worth of human personality” (2015, 410). Agreeing with Gandhi and King, Nussbaum claims “that anger is not only not necessary for the pursuit of justice, but also a large impediment to the generosity and empathy that help to construct a future of justice” (2016, 8). Non-anger, caring relations, nonviolence, justice, and peace go together.

It is important, however, to think about how justice extends to nonhuman relatives and all creation. Even if we accept the concept of justice as a human virtue, human beings are intimately connected with nonhuman relatives, and these extended relationships play an important part in allowing us to exist: to destroy nonhuman relatives brings harm to ecosystems, and the effects of that harm often impact other ecosystems. Justice needs to be conscious of this. As a human virtue, justice ought to bring betterment to all human beings in a way that reinforces the delicate web of relations that sustain us. Justice needs to expand and become more inclusive: this interpretation of the human virtue now embraces, at least minimally in a consequentialist way, the reality that humans cannot exist and flourish without nonhuman relatives, so justice must protect and cultivate the well-being and flourishing of our nonhuman relatives.

This emphasis on the relational dimension and the improvement of human beings so they become their best self has serious implications for ethical and political thought: It is no longer acceptable to remain at an abstract, universal, impartial level. Part of the process of cultivating justice must be to turn to the concrete, particular, partial level and actually engage flesh-and-blood human beings and our nonhuman relatives and their needs and gifts. Following Tronto, this means becoming more attentive to the needs of particular human beings and their communities, becoming more responsible for the well-being of others, and this means doing things in a competent way to help others become better and being receptive and responsive to
them through their feedback. It is unwise to believe that every being can be benefited in the same way; to help beings thrive and to move them beyond suffering, discontentment, or a sense of not belonging cannot be done on an abstract, universal, impartial level. Helping others is a process grounded in direct contact: being present, receptive, listening carefully, and actually caring about their well-being and betterment. Merging ethic-of-care and Indigenous philosophies on this point, the idea of gifts returns: an important aim of caring is to preserve the unique gifts in others to allow them to flourish and to help those gifts benefit society in a reciprocal way. This is the preservative care component of justice: to better others and society, justice urges us to care for others in a way that will mutually better the recipient and society through preserving the unique gifts each person has (Groves 2009).

This must be grounded in long-term thinking. In today’s world of new markets and products, rapidly-changing technologies, and the unconstrained generation of new information, short-term interests and instant gratification dominate. A lack of long-range thinking exists; from failures to look decades into the future concerning the environment to economic imprudence in a debt society, globally many nations and their citizens fail to grasp the big picture as geographical interdependence and future generations are overlooked. Indigenous philosophies help to undermine this myopia; temporal re-orientation is given clear articulation through the words of Oren Lyons: “In our way of life, in our government, with every decision we make, we always keep in mind the seventh generation to come” (quoted in Lyons 2010, 42). This provides a long-range focus; understanding a generation as 20 to 30 years in length, the Haudenosaunee are urging people to think 140 to 210 years into the future for every significant decision. This is not simply a temporal declaration, however, for those making the decisions must consider the interconnected nature of their decisions to make sure that the effects do not move outward to impact others in a negative way. Each decision cannot be contained in the place the decision was made. From an Indigenous philosophical outlook, long-term thinking is necessarily complemented
by a deep appreciation for lateral geographical and ecological effects that respects interconnections and responsibilities arising because of those connections. Caring justice is not a short-term, transactional, one-time event but a long-term commitment to others that demonstrates that others are worthy of our time and trust (Groves 2009).

An example of this long-term, reciprocal thinking can be found in Robin Wall Kimmerer’s *Braiding Sweetgrass: Indigenous Wisdom, Scientific Knowledge, and the Teachings of Plants* (2013). Kimmerer, a biologist of Anishinaabe ancestry, unites science with Indigenous wisdom in a way that helps readers to understand the close, mutually-beneficial relationships humans can have with nonhumans, especially plant life. While explaining traditional ecological wisdom, known as the Honorable Harvest, which cultivates respect for the gifts of creation and an attitude of self-restraint instead of greed and overconsumption, Kimmerer writes,

Collectively, the Indigenous canon of principles and practices that govern the exchange of life for life is known as the Honorable Harvest. They are rules of sorts that govern our taking, shape our relationships with the natural world, and rein in our tendency to consume—that the world might be as rich for the seventh generation as it is for our own. The details are highly specific to different cultures and ecosystems, but the fundamental principles are nearly universal among peoples who live close to the land (180).

The principles help to preserve the various species on the land and their relationships with other species, and through the maintenance of this balanced preservation, future generations will be able to thrive. As previous generations preserved creation for today’s generations, today’s generations have an obligation to protect creation for future persons, human and nonhuman. Kimmerer lists some of the principles that guide daily actions and how people are to nourish themselves through agriculture, gathering, and hunting: “Take only what you need”, “Never take more than half. Leave some for others”, “Harvest in a way that minimizes harm”, “Use it respectfully. Never waste what you have taken”, “Share”, “Give thanks for what you have been given”, and “Sustain the ones who sustain you and the earth will last
forever” (183). When thinking about the seventh generation, then, this wisdom orients people to cultivate a specific attitude toward life and all creation, an attitude valuing respect, reciprocity, gratitude, balance, harmony, self-restraint, and the fragile interdependent web of creation that extends from the past through the present to the future. To be guided by seventh-generation considerations is to embody this attitude and to leave the world in a thriving condition, which will allow others in the future to thrive because of our self-restraint and reverence for all of our relationships.

All of this generates an apparent paradox, however: ethical particularity leading to greater ethical universalism. Care ethics and Indigenous philosophies focus on the specific, whether particular people to whom we offer preferential support or specific geographical places and their surrounding ecosystems. However, each locus of concern, care, and direct support is connected to another person, another place, or another link in the chain of successive generations. A caring-just approach becomes a way of sustaining peace through long-range decisions that are grounded in the realization that all places and beings are interconnected with other beings and other locales (no matter how tenuously), so the peace that is being advocated is one in which the spatio-temporal dimensions of preserving the gifts of all human and nonhuman beings takes on new significance: Not only should justice be sustained across generations, but also in ever-expanding circles to other regions and ecosystems. Justice needs to move beyond individuals and their communities and nations to become more inclusive by focusing on the relational networks sustaining every living being. In other words, justice must become more inclusive, must be more attentive to all human and nonhuman beings, their interdependence, and how present decisions and actions may drastically benefit or harm future beings. Unlike Kohlberg’s abstract universalism, this approach is one of expanding ripples of care leading from caring-for obligations (“encounters characterized by direct attention and response”) to caring-about postures toward the world and future generations (which includes “concern but does not guarantee a response to one who needs care”) (Noddings 2013, xiv).
Because of limits placed on us by time, space, and other resources, we can only offer so much direct caring for others (Noddings 2013, xiv); however, this does not mean that we cannot care about, and dedicate some of our attention to, the welfare of others around the world or in future generations. In our caring for some human and nonhuman animals or place-based ecosystems, we can do so with a caring, compassionate eye for those outside our direct sphere of influence. A caring attitude and a commitment to justice as preservative care for sustained peace can guide all we do and all of our interactions.

Recapitulation

Two texts in the Western philosophical tradition, Plato’s Republic and John Rawls’s A Theory of Justice, bracket approximately 2,400 years of philosophy. During that time, justice has maintained a level of significance and gained intellectual texture: in writings from Plato and Aristotle to Augustine and Thomas Aquinas to Thomas Hobbes and David Hume, justice has resurfaced. While early feminist theorists distrusted justice, whether they rejected it because of its paternalistic associations or wanted to downgrade its significance, considerations of justice have been unavoidable. As care ethics developed, scholars such as Engster and Tronto have emphasized the need to weave care and justice together; Lowe has endorsed a shift that harkens back to Plato and Cicero: justice, benevolence, and care are not separate. To have justice, whether at an abstract or particular level, is to have care; in other words, justice does not exist without care.

Whereas justice as desert tends to be abstract and focus on individuals, ethic-of-care philosophies have helped to reorient justice in a better direction. Some limitations affect care ethicists’ outlooks on justice; nonhuman beings tend to be absent, there is little to no focus on religious or spiritual foundations for justice, and Indigenous inclusion is largely absent. For philosophers writing in territories with a legacy of past and present acts of colonization, this is problematic. This essay offers a correction: its aim is to act as a philosophical intervention (Bartky 1990, 4-5). The important dimensions of Indigenous thought in this essay are the giftedness of creation and
belonging to Earth, the fact that we truly own nothing, honoring each being’s unique gifts, and the significance of long-term peace grounded in a relational worldview that seeks to preserve and nurture balance and harmony.

In the end, the traditional concept of justice as desert is clearly problematic; minimally, it is too narrow and needs to be broadened, but what is worse is that in some contexts this understanding actually supports injustice. This traditional concept did not come down to the present without challenges; Plato and Cicero made it clear that beneficence, human improvement, and unique individual needs had to be part of the consideration. Being mindful of this inclusion of beneficence broadens the concept of justice to include care for those who are taking part in the relational cultivation of justice, and this opens the space for the obvious inclusion of care ethics for considerations of justice. Justice and care unite.

Indigenous philosophies help to flesh out what care can look like. They offer a long-term approach for decision-making and how actions will affect others; this does not focus solely on human beings but expands to consider how our actions will harm or benefit nonhuman relatives, from rocks and trees to birds, bears, and Earth. This concern is guided by the assumption that each being has special gifts (unique attributes and skills or ways of being) that are crucial to thriving; consideration of these gifts is important, and this transforms an ethic of care into an ethic of preservative care: the focus is on how to preserve and sustain all the conditions that will allow the unique gifts of all beings to grow and flourish. Grounded in the Indigenous relational outlook, the cultivation and preservation of these unique gifts reciprocally enhance the larger community; as the larger community thrives, this in turn preserves and nurtures the unique gifts of those who make up the community. This includes a long-range concern that focuses on seven generations to come and a religious or spiritual recognition of place that urges us to mindfully inhabit the land on which we live.

Justice is no longer simply about the here and now, but it is grounded in a long temporal chain; today’s beings exist because of the
preservative care of beings in the past, and future beings will exist because of long-range thinking today. In this way, justice as desert and egalitarian distributive justice face a third alternative; justice as preservative care for sustained peace provides a new way to think about what justice can mean.

Coda

An initial possible concern may emerge relating to cultural appropriation. This focuses on how information, wisdom, and ideas from an oppressed group or culture are used, whether they are used peacefully or in a violent, unjust way (Ruehl 2019). Minimally, instead of contributing to direct behavioral violence, cultural violence, and structural violence (Galtung 1990), the incorporation of Indigenous information, wisdom, and ideas should contribute to sustained direct behavioral peace, cultural peace, and structural peace. Scholars should approach such inclusions as an ally to Indigenous nations and peoples and attempt to generate dialogues across cultures to make the world a better place for all sentient beings, their ecosystems, and Mother Earth. To avoid cultural appropriation and further harms, scholarly work should embody—to the best of its ability—the idea of justice as preservative care for sustained peace. As I concluded elsewhere:

It is important to structure research and publications in a way that includes an ethic of preservative care, making sure that all research, publications, and teaching are not grounded in exclusionary, non-reciprocal practices, but also grounded in inclusive practices intent on nurturing the unique gifts of others for the mutual well-being of all those we encounter and for the betterment of future generations (Ruehl 2019).

A secondary concern may emerge relating to the peaceful approach supported throughout this essay, which has guided my response to the concern about cultural appropriation: violence in the world will not end with completely nonviolent means and aims; those who are violent and unjust will use violent and unjust means to maintain power, wealth, and privilege. However, one simply has to look to the great
leaders who have cultivated courageous nonviolent, non-angry, and caring responses to injustice and violence. The Haudenosaunee, Gandhi, King, and Mandela offer counterexamples that show how nonviolent, non-angry, or caring responses are quite powerful, unifying, effective, and supportive of long-term positive peace. We need more of these examples—and many more supporters—to make sustained peace a reality.

The above issues are important, but the limits of space do not allow for a full philosophical exposition; however, this much can be said: engagement with and use of another culture’s ideas can be done with preservative care with long-term peace in mind, and if this is not done, scholars should respectfully hold each other accountable for violations. The struggle to change the world for the better through peace, nonviolence, non-anger, and care take courage; this just may be one reason why so few are able to be as brave as those who have embodied these character traits as they have struggled against domination and oppression around the world. We need more of this courage in our personal lives, but we also need it in our academic, professional, and civic lives. May we encourage one another to be better and to work for justice as preservative care for sustained peace in all we do.

Works Cited


Nature’s Hospitality, Human Prodigality: From Environmental Consumption to a Care Ethical Devotional Ecology

Kimberley D. Parzuchowski

Touch the earth lightly, use the earth gently, nourish the life of the world in our care: Gift of great wonder, ours to surrender, trust for the children tomorrow will bear.

New Century Hymnal, United Church of Christ

The natural world is suffering. Humans are suffering and will suffer more as a result of the blind and abusive disregard for our natural home by technologically advanced countries. We have fouled our nest, as they say. But, while we are flooded with data for imminent doom, many people remain unpersuaded of our need to press for corporate ecological changes or to make many changes themselves. The demands for change come from experts who see the danger to our ecosystems and ourselves, but these experts do not seem to sufficiently investigate the psychological and philosophical roots of the attitudes and behaviors that underlie our consumptive behavior. Their data, rationale, and arguments too often fall on deaf ears. Innumerable practices, corporate and private, have brought us to this crisis, but, if we ignore the philosophical and psychological underpinnings of climate change denial and indifference, the conscious and unconscious beliefs that ordinary people hold, we will not achieve the real cultural and political changes necessary for long term sustainability.

The problem, in my view, is twofold: 1) We need to see the need, 2) We need to actively care. Nel Noddings (1984/2013) calls the moral motivation of ethical caring “I must” as in, “I must do
something” (82). The urgency of this feeling demands action; it is what psychologists call a prosocial urge (Hoffman 2000). And it helps us to act for the good of others. But, if we do not recognize the moral subjectivity of the other, we may not feel the “I must” urge. Care ethics, which centers ethics in caring relations, is the most apt moral theory for thinking about environmental ethics because it provides a paradigm through which we can learn to see Earth and all her inhabitants as moral subjects on whom we depend for our lives and thus owe a response of care. But, while I will argue for care ethics as a moral paradigm for ecological values and practices, such a shift in academic theorizing will not be sufficient to change broad-scale practices.

In order to persuade more of us to change our ways, we must change our hearts. The ancient Stoics understood that humans need practices to reinforce beliefs and develop character, so they established communities of practice to help practitioners cultivate their lives. Nature\(^1\) was a primary teacher and due reverential regard. Stoics taught disciples to observe and contemplate Nature to understand themselves, their world, the path of wisdom, and God (Hadot 2002, 139; Kenny 2004, 282). Stoic communal practices indicate something important for us today. Humans are ultrasocial creatures (Haidt 2006, 48). Community practices inculcate, activate, cooperate, and keep us accountable. The spiritual dimension of communal engagement can deepen our sense of Earthly dependence and humility if our anthropology is understood as fundamentally ecological. Our centuries of arrogance have numbed us to this sensibility, however. According to Douglas E. Christie (2013) and Jeremy Yunt (2017), our ecological crisis needs to be understood as a spiritual crisis (Christie 3; Yunt xi). Consideration of the spiritual aspect of our ecological crisis

\(^1\) I will, in this piece, be capitalizing both Nature and Earth in recognition of the spiritual reverence that I think is essential to the work of changing our behavior and to acknowledge my own bearing toward the gift of life that I receive every day, by the grace of Nature. Whether we view the natural world as having agency (divine or otherwise) or not, we are nevertheless daily recipients of its gifts of food, air, and water—gifts which we have not merited, but simply received.
leads us to consider the role of religion in working to heal our climate. Religions are pervasive and powerful communities and thus are apt for facilitating moral growth. Religion, from the root *to-bind*, has a way of getting to our hearts, for good or for ill, that reasoned discourse often does not. Care ethics and most religions share the view that we are embedded in webs of relation and that this is morally binding upon us. Together, care ethics and a religious sensibility can lend themselves to the development of green virtues.

Thus, in this chapter, I argue that in order to create genuine and lasting change in human hearts and practices (both private and corporate), to instigate conviction and guide broad-scale cooperation, we will need the help of the moral theory of care ethics to reconceive ourselves in our moral relationality, and the support from faith traditions for the moral motivation and means of cultivating the necessary habits of perception, thought, and practice to enact care for Earth. I will show how the Care Ethical anthropology whose two important descriptors, dependence and relationality, is essential for our moral imagination in understanding our intersubjective dependence upon and our moral obligation to Earth. Theory, whether philosophical or scientific, tends to be less effective in creating convictions, however (Haidt 2006), thus, we need spiritual and faith traditions to help inspire and nourish the caring moral imagination. Reaching beyond the halls of the universities into the communities in which they dwell, an ethos of caring for Nature can take root, germinate, and perhaps thrive in ways that can help us step by step toward ecological balance.

It must be noted that religions have been culpable in the harms done to Earth, however. Writing over 50 years ago, Lynn White, Jr. (1967) exposes a problem in traditional Christian theology, noting that Christianity has conceptualized nature as inert, and humans as separate from and above nature, with the right to dominate “creation” (1205). Unfortunately, our ecological situation has worsened, 2

---

2 Note that this problem predates Christianity however, as Greek thought (Aeschylus’ Oresteia) and even Babylonian (Epic of Gilgamesh) celebrate human power over nature.
but White also contends that healing our ecology cannot be accomplished by science and technology alone: “Since the roots of our trouble are so largely religious, the remedy must also be essentially religious, whether we call it that or not. We must rethink and refeel [sic] our nature and destiny” (1207). White mentions that lovers of animals like St. Francis of Assisi may point the way. Where theory alone does not convict us, devotional regard for Nature might be what is needed for a Care Ethical Ecology.

In Dependence, Care is the Primal Virtue

_We are not our own. Earth forms us. Human leaves on nature’s growing vine. Fruit of many generations, seeds of love divine._

New Century Hymnal, United Church of Christ

The first step toward correcting our view of nature is acknowledgement that we are in a dependent relation to Nature. Western thought is entrenched in an ontology of individualism that prevents us from fully comprehending our social, biological, ecologically-dependent reality. By contrast, Petra Tschakert and Nancy Tuana (2013) claim that a relational ontology more accurately characterizes the fundamental realities of the human condition both socially and existentially (75). Contrary to historical Western thought, humans are neither radical individuals, nor immune to extinction. Care ethics thus provides the moral and conceptual framework for a relational ontology in shifting the moral focus from a rational subject choosing the good to a web of intersubjective relationality embedded in care.

For decades, Care Ethicists have argued for the need of our recognition of our profound relationality and dependence upon one another for existence in contrast to our national myths of independence (Gilligan 1982; Noddings 1984; Kittay 1999). Even our notions of independence rely on dependence, as Kelly Oliver (2002) argues:

It is not just that the notions of independence and dependence are fundamentally dependent upon each other—which in itself makes dependence the primary relationship—but also that the notion of
independence itself is based on the acknowledgement of the primacy of our dependence on others, (emphasis mine, 324).

So, the independence that we feel is still embedded in dependence. As Eva Kittay (1999) states, “[T]here are identifiable states of our life history in which dependency is unavoidable, either for survival or for flourishing” (29). This is our human condition.

Our cultural idealization of independence in the West, especially in the U.S., is based on delusions made possible by technologies, wealth, and privilege that have enabled Anglo and Euro-descended Westerners to colonize, dominate, marry, and/or hire others to provide for our caring needs. We are profoundly socially dependent, but, we are even more fundamentally dependent upon Earth for our very ability to strive, philosophize, and create (Mann 2002; Johns-Putra 2013; Whyte & Cuomo 2016). Care ethics offers a moral vision and narrative that counters this delusion:

Ethics of care understand moral agents as deeply and inextricably embedded in networks of ethically significant connections and conceive of caring as exercising responsibilities and virtues that maintain and positively influence relationships and general flourishing within those overlapping networks (Whyte & Cuomo 2016, 3).

Coming to understand the human condition properly requires that we see more honestly how dependency defines moral life and obligation.

Nel Noddings’ (1984/2013) analysis of the mother-child relation reveals the foundation of our ethical orientation as we mature from childhood. This analysis provides an apt analogy for our relation and duty toward Nature. Noddings names the moral agent in caring relations, one-caring (41). The one-caring (agent) provides care to the cared-for (patient/recipient). Family relations compel us, out of love, to care. This Noddings calls natural caring. We have each been provided care which allowed us to become adults. Ethical caring extends natural care toward non-kin others. This extension of natural caring is motivated by the compelling urge to care which Nodding names “I must” (80). Ethical caring is more effortful and requires moral
commitment, activated by the moral impetus of the “I must”. We choose to act on the urge to offer ethical caring because we as humans value care. “The source of my obligation is the value I place on the relatedness of caring” (84). Our shared humanity calls upon us to respond to the needs of another with care.

This human to human extension of care from kith and kin to strangers is rooted in our biological urge for belonging in social groups, according to social psychology (Haidt 2006, 47). By extending our care from family to neighbors to strangers, we stretch human connections and community, thus increasing wellbeing and security. But the inclination must be cultivated in order to become a virtue. As Noddings (1984/2013) said, caring is hard work (126-127). Any good parent will remonstrate, chide, and encourage her child hundreds of times a week to “Think of whether you would like that”, or query “How do you think that makes him feel?” This moral induction, as Martin Hoffman (2000) terms it, pushes our empathic regard to stretch beyond self to ever larger inclusion (143, 150). Without such training, children can be cruel and insensitive to the suffering of others. Care is a virtue that requires work to move it from natural inclination to ethical action.

Care is not only an obligation, however, it is “a mark of our humanity” (Kittay 1999), one that we have hidden from ourselves. Our denial of this fact of our condition “dismisses the importance of interconnectedness, not only for purposes of survival, but for the development of culture itself” (Kittay 1999, 29). So, our dependence and relationality define the meaning of human life and thriving. Car- ing is how we ensure that our web of interdependence is strong. But, what exactly is care? Can it include Nature? According to Berenice Fisher and Joan Tronto (1990), it does:

Care is a species of activity that includes everything that we do to main- tain, continue, and repair our ‘world’ so that we can live in it as well as possible. That world includes our bodies, our selves, and our environment, all of which we seek to interweave in a complex, life-sustaining web” (40).
Our ethics must include the Earth and our fellow creatures to accurately represent the depth and breadth of our web of interdependence. Our blindness to both our human and natural relations has left us isolated, bereft, and in profound alienation. Kittay hopes, “that once we understand the implications of the clearest cases of dependency, we will appreciate the full range of human interconnection, and see how all moral and political concepts need to reflect these connections” (1999, 30). Care ethics provides an apt conceptual and moral framework for understanding the complexity of our socio-biological dependence to help us see ourselves and our situation more honestly, but getting beyond non-conscious biases still poses a challenge.

**Attentive Care: Moral Perception & Caring About**

*We are not alone. Earth names us.*

New Century Hymnal, United Church of Christ

We suffer from a spiritual amnesia of who we are, from a denial that we, as animals, need Earth’s bounty to live. We have forgotten that we are just “one of the myriad creatures” as the ancient Chinese sage Laozi says, (D.C. Lau 1976, 6). In our naïve arrogance, we have deluded ourselves that we as a species are capable of somehow existing without Earth and our fellow creatures. This has left us alienated and endangered. Our humanistic and scientific attitudes have made us wary of viewing the Earth and her inhabitants as moral subjects to whom we owe a duty. But, rather than exhibiting the virtue of epistemological responsibility, this wariness reflects our arrogance and blindness, according to Native American theorist George Tinker (2004).

---

3 References to “creatures” is a term of convenience and is not meant to include or exclude a view of their origins. This author values the evolutionary biologists’ accounts of the development of all Earthly species and believes that these accounts need not preclude a variety of religious ideas about the natural world or various theistic perspectives.
Our theoretical and moral failure here follow from our belief that only humans have consciousness or that ours is superior to all other beings. Tinker (2004) claims that our narrow conceptualization of consciousness is rooted not in scientific evidence, but in our Euro-Western scientific worldview which does not recognize the world as ALIVE. Tinker claims that Euro-Western scientific conceptualizations are rooted in unfounded presumptions about the preeminence of human subjectivity. Not only do the flora and fauna of Earth have consciousness, “but [they] also have qualities that are either poorly developed or entirely lacking in humans” (106). American Indians by contrast, view humans as lower in status than their “elders” who have been on Earth longer.

The primary focus of creation stories of many tribes placed human beings as among the last creatures who were created and as the youngest of the living families…our job was to learn from other older beings and to pattern ourselves after their behavior…to gather knowledge, not dispense it (Tinker 2004, 108; Deloria, Jr. 1999, 131).

We are subordinates in Earthly relations.

Awareness of our absolute dependence and relatedness evokes reverence in Native American rituals and songs, but also knowledge. In his article, “Relativity, Relatedness, and Reality”, Vine Deloria, Jr. (1973) claims of Earth’s inhabitants, “We are all relatives” (34). But, more than this, Deloria asserts that this empirical and moral description can be used to acquire knowledge. Seeing through the lens of the claim we are all relatives can provide a “methodological tool for obtaining knowledge”.

[This concept of relatedness] means that we observe the natural world by looking for relationships between various things in it… This concept is simply the relativity concept as applied to a universe that people experience as alive and not as dead or inert (34).

Some Care Ethical theorists have extended caring responsibilities to environmental concerns (Held 2006, 30; Palade 2019) but most do not follow Tinker in seeing non-humans as subjects. Fiona Robinson (2011) shares the traditional suspicion of viewing nature in terms of
a relation of moral obligation out of concern for “anthropocentrism” in a kind of projection of human experience onto nature. She claims that “moral relations of care cannot be established with inanimate things or features of the natural environment, such as rocks, trees, or lakes” (144). Native American theorists disagree since our caring relations are themselves embedded in nature. It is our anthropocentrism that blinds us to the reality of nature’s agency, according to Tinker (2004, 107). Kyle Powys Whyte and Chris Cuomo (2016) view the lack of recognition of care in nature as a problem of rationalism, originating in the liberal philosophical worldview.

In spite of the lurking influence of actual care in the world, in the canon of environmental philosophy ethical caring is rarely taken seriously as a framework for guiding decision making, and perhaps this is linked to colonialism, sexism, and racism (4), and arguably speciesism. Care Ethical theorist Josephine Donovan (2006), agrees and argues for a dialogic mode of engagement with other creatures, taking their perspectives into account for our ethical reasoning (306). The concern against anthropocentrism is valid however, particularly when it enables a kind of human paternalism that overrides creatures’ own experiences and feelings. Donovan argues that genuine care must take into account how the animal seems to feel or what they would likely want in a given situation: “Caring must therefore be extended to mean not just “caring about their welfare” but “caring about what they are telling us” (310). A Native American worldview of a living Earth of embedded relationships together with a caring dialogic ethos might offer nourishment to the Euro-Western moral imagination.

Douglas E. Christie (2013) and Jeremy Yunt (2017) agree. As I mentioned above, they claim that our ecological crisis needs to be understood as a spiritual crisis (Christie 3; Yunt xi). Christie argues that we have been blind to Nature and that in order to see properly, we need practices in attunement. “[T]here is a growing desire to find a language and sensibility that can help ground our efforts to respond to and preserve an increasingly degraded natural world in more than
simple, utilitarian terms” (10). Spiritual attentiveness is contemplation, practicing openness to Nature, and can attune us to Nature’s needs. Contemplative ecology is “an expression of the diverse and wide-ranging desire emerging within contemporary culture to identify our deepest feeling for the natural world as a part of a spiritual longing” (3). Thomas Merton claims that communing thus can enable us to overcome our alienation from nature,

by being attentive, by learning to listen… we can find ourselves engulfed in such happiness that it cannot be explained… the happiness of being at one with everything in that hidden ground of Love for which there can be no explanation (Merton 1985, 115).

Many of us have felt such moments of joy, if we allow.

Contemplative ecology is rooted in a recognition of the moral subjectivity of all of nature, according to Yunt (2017, xii). He echoes White’s critique (1967) of traditional Christian theology as dangerously anthropocentric and sees a way to overcome this in a philosophy/theology which centers around Nature. This he finds in the Existential Christian theology of Paul Tillich. Since the Western view of Christianity has so profoundly influenced Western thought generally (White 1967), reimagining the Christian perspective might help correct some Western misconceptions of our relationship to Nature. Tillich describes Nature as a “direct expression of God’s ongoing creativity—since nature is part of Being-Itself”, and that as such, our sensing “the presence of God in nature is to see and feel the direct harm we inflict upon it” (Yunt 2017, xii). Ancient Stoic philosophers, likewise, felt keenly that the only way to live the flourishing life was to do so with recognition of our relation to nature, with proper humility before that which is beyond our control (Hadot 2002, 128). Proper self-understanding requires that we see our lives as absolutely contingent on Nature.

Not seeing is one of our greatest moral challenges, however: White people not seeing the difficulties of People of Color, middle class folks not seeing the hardships of the houseless, and Western cultures not seeing that the packaging we buy becomes trash in the oceans.
Martha Nussbaum (1990) refers to this problem of blindness as moral obtuseness. In her book, *Love’s Knowledge*, she describes the power of cultivating moral perception to correct it. Love’s knowledge is the understanding of how to see, and how to act in love and care (164). The ancient Greek term is *phronesis* which is the ability to do the right thing, at the right time, and in the right measure (Aristotle NE, Book VI). But, like any aptitude, moral perception must be developed. Many of us in the West do not see the immorality of our treatment of Nature because we have not been taught to see Nature as a moral subject. How can we penetrate such refusal of vision? According to Nussbaum (1990), fine-tuning is required (155). In the same way that an art appreciation class teaches students how to see the meaning of paintings and sculpture, so the cultivation of our moral perception enables us to see a fuller picture of moral meaning. We need to attune our perception to include more subjects as worthy of our concern.

Recognizing the subjectivity of (and moral obligation to) the other requires the skill to interpret the moral salience of a situation:

In seeing and hearing, we are, I believe, seeing the world not as it is in itself, apart from human beings and human conceptual schemes, but a world already interpreted and humanized by our faculties and our concepts (Nussbaum 1990, 164).

We cannot escape our anthropic perception, but we can learn to see our point of view in perspective, to humble our view of how we fit into the world’s scheme. Seeing, for Nussbaum is loving, and such care creates connection, “[F]ine attention to another can make two separate people inhabit the same created world” (153). As Clifford Geertz (1973) said, humans are “suspended in webs of significance [we ourselves have] spun” (5). Our imaginations create our experience and perception of the world. If taught to see more fully, our imaginations and empathic regard can bring us back into relation with the more-than-human world. Tillich also saw love as the means for reconnecting what has been alienated, according to Yunt (2017). “Tillich defined love as the ‘reunion of the separated’” (xiii). Yunt goes on to say,
For those who’ve developed a deep love for nature and/or all of life…the corollaries in experience between loving nature, God, or another human are unmistakable: often coming as an upwelling of emotion, ecstasy…humility and gratitude…In the midst of all these emotions, one can intuit the interconnectedness of all life and one’s unity with it…This forms the basis of faith experience or as Tillich expresses it, ‘being grasped by an Ultimate Concern’ (xiii-xiv).

Overcoming alienation requires recognition of our intersubjectivity as the ground of our deepest concerns, so our moral perception needs to expand to include non-humans. David Abram (1996) describes the way in which he himself was stretched to perceive the alive and interacting world in his book, *The Spell of the Sensuous*. Following the models of his indigenous shamanic teachers, Abram strove to attend to his bodily awareness: “By...‘perception’ we mean the concerted activity of all the body’s senses as they function and flourish together” (59). Such attentiveness to the body can facilitate better reception of Nature’s solicitations. Paul Ricoeur (1996) describes this sensitive moral attentiveness as *solicitude*. In agreement with care ethics and contemplative ecology, Ricoeur claims that solicitude is rooted in recognition of our profound existential interdependence and need for connection with others. “To self-esteem, understood as a reflexive moment of the wish for the ‘good life,’ solicitude adds essentially the dimension of lack, the fact that we need friends...” (Ricoeur 1996, 193). We need connection with the more-than-human world (Abram 1996, 63; de la Bellacasa 2017). Consider how many of us have canine and feline companions, how many of us thrill when sighting a new bird species, and how we feel the “I must” urge toward an injured animal. Solicitude is the receptivity guiding us in understanding how to attend to that relationship, in *how* to care.

How we care matters. Berenice Fisher and Joan Tronto (1990) agree that attentiveness is vital. It is the first phase of caring, which they call *caring about* (40). Attentiveness needs to be cultivated so that we see our moral relations. As mentioned above, Fisher and Tronto define caring as including the more-than-human world,
including “our bodies, our selves, and our environment, all of which we seek to interweave in a complex, life-sustaining web” (40). The four phases of care can be applied to both human and more-than-human relations. Caring about is practicing receptivity to potential caring situations, while caring for is taking responsibility for the necessary care. Caregiving is actively performing the care, and Care receiving is the response to that care (Tronto 1998, 16-17). This final aspect of caring also requires attentiveness, as I have noted. Being empathic is not sufficient to ensure accurately and aptly reading and responding to the needs of the moral target (Parzuchowski 2015). We must attend to the cared-for, solicit feedback, and adapt accordingly. Care is a cycle of strenuous moral work.

If Yunt, Christie, Nussbaum, Abram, Ricoeur, Fisher, and Tronto are right, then what is lacking is not Nature’s subjectivity, but our moral attention. We have not cared about our Natural home. Because Nature does not speak in human language, most of us are too dulled by our self-involvement to understand her expressions. But, the natural disasters of this decade should be heard as an outcry.

By expanding our perception to include the more-than-human world, understanding our relational dependency on Nature, we can work on caring about Nature in private and corporate action. One might ask, however, why such attentive care needs to have a religious flavor; could not a secular orientation also attend to nature? Yes, of course it can. The spiritual dimension does not “speak” to everyone. But for those for whom life does suggest an element of mystery or presence, in the next section, I hope to show how the sense of the sacred imbues caring with a devotional and communal quality that might help spread these practices of care more broadly and with greater commitment.

**Human Nature: Entangled Hummus**

*For dust thou art and unto dust shalt thou return* (Genesis 3.19).

The Judeo-Christian scriptures describe humans as being part of a cycle of enlivened earth. We Westerners, even those for whom
these scriptures have value, have hidden this existential truth from ourselves. We ARE dust. We cannot live without Earth. The name of our species “human” shares the root “hum” of “hummus,” the dust of Earth. This truth should ground us not only to Earth, but to the particular places where we dwell, the soil beneath our feet, our houses, our roadways. What comportment should such understanding elicit? According to Bonnie Mann (2002), human dependence is “…a kind of relationship to place, one that properly faced, evokes both wonder and reverence” (349). But, we have forgotten. Ceasing to revere Nature or gods, we have instead revered ourselves. Our self-absorption reveals our “miscarriage of reverence” for our own creativity, alienating us from land. We are muddled by

the… confusion about our relationship to Earth (which we replace with ‘world’), that constantly positions subjects as ‘world-makers,’ ‘authors,’ or ‘stewards,’ while never acknowledging our absolute and utter dependence in this relation (350).

Caught up in the self-referentiality of our texts (Mann 2002, 352), we think ourselves into a void. “The entire world becomes a collective and textualized interiority, which is both made from and makes the performativity of each subject…a kind of ‘epistemological jouissance’” (353). Mann contrasts this flight from our animalic life against the bearing of a deep, reverential recognition of dependence.

For Mann (2002), being human means dependence upon Earth, and she notes the spiritual implications of dependency relations in Eva Kittay’s theory as applicable to our relationship with Earth. For Kittay (1999), “dependency relations are the paradigmatic moral relations” (68). They are the foundations upon which we become. Thus, “the dependency relation in which all others are nested must be the paradigm of paradigms.” This is Earth. Only by recognizing our “unfathomable moral and epistemological failure” in denying our dependence, can correction be possible (Mann, 358). The sustaining nurturance of Nature is all around us, in clouds, sun, soil, trees, rivers, gardens, bees, birds, wind. Only by living in recognition of dependence can we see our living world.
Like Care Ethicists, Martin Buber (1923/1970) holds that life is relational. He describes the encounter between subjects as the phenomenon of “meeting” or “seeing” the other as a full and sacred subject. Like Care theorists, Buber claims that there is no “I” without a “you” or an “it”. Whether we say “I-You” or “I-It”, we “establish a mode of existence” (53). The I-It is subject to object, while the I-You is subject to subject. Only in the “I-You” can we encounter the other in themselves (59). Noddings (1984/2013) builds on Buber’s view as the “I must” urge may extend to non-human animals (73). Reciprocity is possible in non-human relations, expressing itself as “happy growth”, according to Noddings (86), what physicians, vets, and botanists call thriving. As we care for our pets, plants, or farm animals, they respond to us. Our gardens feed us when we tend to them. Thus, the one-caring and cared-for cycle in roles of caregiving and receiving. We are part and parcel of Nature: “One’s true self [includes] one’s biological nature…[our] membership in Earth’s Community of life” (Taylor 1986, 44-45). This anthropology teaches us to think against our anthropocentrism in favor of biocentrism making the whole ecosystem the center of our life’s concern (Yunt 2017, 28). Biocentrism, in contrast to anthropocentrism, views “Nature…as a good-in-itself requiring our reverence…[and] all living beings [as] ends-in-themselves with their own inner, inviolable purpose” (xix). If we take our Earthly interdependence seriously, this value must guide our ethical concerns.

Adding the adjective value of “biocentric” to caring about, or practicing receptivity to potential caring situations (Fisher & Tronto 1990, 40), makes one available for encounters with non-human living beings like trees. This is not spiritual or magical fantasy, but is rather, as Buber (1923/1970) states, contingent upon speaking “I-You” with our whole being. This is the heart of the dialogic way of being in relation for Buber (See also Donovan 2006). The metaphor of “speaking” here is the moral comportment of attunement. Attunement moves from the objective “I-It” stance toward encounter. “[I]f will and grace are joined…as I contemplate the tree I am drawn into relation, and the tree ceases to be an It. The power of exclusiveness
“has seized me” (62). The tree’s uniqueness makes a claim, evoking from me the I-You sensibility. I see the “youness” of the tree and feel a caring-for response. Contemplation allows me to see and hear the tree’s solicitation. Turning away from such moral possibilities seems mistaken, what Peter Singer (1975) called speciesist, and what Tinker (2004) calls anthropocentric. Tinker (2004) further argues contra his Buddhist colleagues that sentience is not exclusive to animate creatures. Thus, ahimsa, or non-harm, protecting animals from killing or harm (Keown 2005, 42), is an insufficient ethic (Tinker 2004, 114). Caring-for (Fisher and Tronto 1990) must include our rooted fellow creatures, the plants and trees, as well as the rootless ones of atmosphere, rivers, and oceans. Yunt (2017) articulates a potentially harmonious way to put such caring-for and caregiving into practice through a simple rule of thumb:

Human life and interests should be brought into alignment with all of nature so that non-vital human interests do not override vital nonhuman needs (boldface mine, xi).

Like the Golden Rule, this maxim can help us assess both private and public practices. Adding a dimension of sacred obligation could increase how seriously we take such a maxim. Jonathan Haidt (2006, 2012) argues that humans tend to sacralize. If secular Post-Modernity refuses to let us sacralize invisible and visible forces, we are left with only ourselves (Mann 2002). Perhaps, we ought to accept our sacralizing tendency, but turn it to that which we know to be necessary and good for life, like Indians do with corn and buffalo.

Not only do Indian people find that corn is a living and perforce sentient being, but virtually every tribal community has ceremonies dedicated to maintaining relationships of reciprocity between themselves and the corn they plant and harvest (Tinker 2004, 114).

This reciprocity is a subject to subject relation; the plants communicate. Indian medicinal recipes come from “knowledge communicated to them by the plants themselves” (Tinker 2004, 114). Practicing receptivity makes encounter possible, opening ourselves to the ways creation speaks. If a biocentric perspective, as Yunt (2017, 93)
contends, is concerned with individuals and whole species, and promotes the wellbeing of interdependent interspecies relations, then it might facilitate an Ecological Turn away from the human self toward that which makes our lives and all of life possible. An ecological turn reflects a necessary humility in our perspective, perhaps even reverence, expressing our recognition of our profoundly dependent relationality in nature and motivating development of an ethos of caring for and maintaining right relations with the fellow creatures of our particular regions, our neighbors.

Care and Caritas: Reforming Human Prodigality through Devotional Care

That which is hateful to you, do not do to your fellow; this in a few words, is the entire Torah; all the rest is but an elaboration of this one, central point.

Rabbi Hillel, 1st century, BCE

This injunction, echoed by Jesus of Nazareth in the positive form, is the Golden Rule which we Westerners have traditionally consigned to human relations. We have been profligate with our fellow creatures, wasting their lives and damaging our ecosystems. Jeremy Bentham (1781/1996) expanded our ethical regard to all who suffer, including most animals (282). And while most of us would shudder to cause unnecessary suffering to an animal, we have yet to raise our regard for animal and ecological welfare to the level of changing our grocery shopping or gas pump habits. To more fully affirm our acceptance of our relational ontology, we need to recreate our ethos. Aristotle wrote that a good person, is a good citizen (NE Book 1). We now see that we are not just citizens of our countries, but also creatures of Earth, so our ethics will need to cultivate good Earthlings. The idea of human dependence defines the religious orientation of the Abrahamic faiths, primarily dependence on God. And while the emphasis became more abstracted from Nature, as they embraced the Greek and European ethos, it was not always so. Such abstraction is not essential to these faiths which are steeped in liturgies of care.
The Judeo-Christian scriptures show God’s care as coming through the Natural world as fiery cloud and manna (Exodus), food provided by birds (I Kings 17), and the land’s own bounty (Psalm 65). God’s followers are expected to reciprocate (Micah 6.8). The early Christians shared their food in common which was the early practice of the Eucharist (Acts 10). Generous love is at the heart of the Abrahamic faiths (love of God and neighbor) and is a point of intersection with care ethics. In the Christian tradition, St. Paul describes the fruit of the spiritually infused life (faith, hope, and love) and claims that “The greatest of these is love” (I Cor 13.13). Love is the Greek word agape which was translated into Latin as caritas.

The word caritas provides a linguistic connection between the religious virtue and the theory, value, and practice of care ethics. And caritas as a virtue folds the practical labor of caring (Held 2006) into the reverential regard for the relation of the one-caring and the cared-for. Care ethics provides a necessary corrective to the self-sacrifice of the religious virtue of caritas however, because the well-being of the one-caring, also needs attention (Noddings 1984/2013, 100). Women have historically carried too much of the caring burden among humans, as has Nature; she is overdue for some reciprocal care. Conceiving of care for Nature through virtues like caritas in which focus on the needs of the other is central can guide us in thought, practice, and dissemination of other green virtues.

Religious rituals and liturgies artfully shape our hearts and minds for the cultivation of virtues. Cultivating our moral perception to see Nature as a kind of moral subject is essential to eliciting our willingness to forego present conveniences of, e.g., buying plastic encased prepared foods, for the long-term value of reducing our landfills and plastic in our water, and instead pressing corporations to create truly sustainable packaging. Without the ongoing stimulus to our imagination that religious services and practices provide, we fall into old, easy, self-involved habits. “It is impossible…to engage in beautiful actions if one is not equipped for them…happiness [comes to one] by means of virtue and learning or training…[it is nevertheless] one of the most divine things…” (Aristotle NE Bk I.8, 9, 1099b). Humans
are stubborn creatures requiring regular prodding and intensive guidance to facilitate their growth and particularly their willingness to make personal sacrifices for a higher good. Psychology shows that we do better when we have external pressures to keep us accountable (Haidt 2006; Seligman 2012; Kahneman 2011). While non-religious communities can also promote such motivations, they may lack the deeper emotional connections that can glue people together and motivate them over the long term.4

Religions activate and motivate care through what Martin Hoffman (2000) calls “hot” cognitions. “Cold” cognition is intellectual assent, usually insufficient to e.g., make us buy costly humanely raised beef. We need what Hoffman (2000) calls “hot” cognitions which emotionally activate care and action (160). Religious stories, songs, prayers, and calls to action impress the moral imagination and activate hot cognitions which can overcome obtuseness that our reason alone cannot. Inconvenient truths lead reason to side with the bias in favor of our ease (Haidt 2006, 22). To alter our bad metaphysics which privilege human convenience over ecological well-being, we will need something stronger than data. Our current crises reveal the insufficiency of our epistemological responsibility.

Ecologically considered, it is not primarily our verbal statements that are ‘true’ or ‘false,’ but rather the kind of relations that we sustain with the rest of nature. A human community that lives in a mutually beneficial relation with the surrounding earth is a community we might say, that lives in truth (Abram 2006, 264).

Biocentric measures might provide a litmus test against which to measure the moral worth of an idea, ethic, institution, or body of practices. How well does it affirm and enable healthy relations among the region’s diverse peoples and Natural community? Our intersubjective world is the best test of our theories, of our self and world

4 Although, I think that the academic life can create a similar ethos if the academic community coheres with higher ideals in our treatment of one another and our Earth. But, most people are not in academic communities, so religious communities can provide the necessary cultural reinforcements.
coherence. Right relation more existentially justifies our lives than right teaching or right thinking. If religions are willing to incorporate such values, then academia ought to invite collaboration. And if religions are not willing, they should be challenged on those moral grounds in meaningful dialogue. Philosophical discussions of how to live need to meet with the practices and communities who can bring those virtues to life. At present, are we living only in what Buber (1923/1970) called the I-It relation? This relation is not wrong in and of itself; expedience requires the I-it relation. But according to Buber, if we live only in the I-It relation, we are not fully human (emphasis mine, 65). “Relation is reciprocity” (58, 67). Relation is human-nature. Learning to see our humanity as rooted in webs of Earthly kinship and learning how to practice caring-about, we can make ourselves available for moments of encounter so that when we are solicited by the I-Thou relation, we can attend to the meaning of the other, listening in compassion as we might to a neighbor.

Conclusion: Earthing Humanity

*Love thy neighbor as thyself.*

Leviticus, Deuteronomy, Matthew, Mark, Luke

*Therefore, let us make thanksgiving... give to Earth and all things living, liturgies of care.*

New Century Hymnal, United Church of Christ

We have paid a profound price for our fantasy of independence these last few hundred years in Western life. It is difficult for us to see this loss given our secular industrialized worldview—a worldview spawned in and transmitted by Eurocentric imperialist arrogance. We have wasted many parts of Earth. Like the arrogant youth in Jesus’ parable of the Prodigal Son (Luke 15.11-32), who asks for his inheritance only to squander it, end up starving, and feeding pigs for a living, so we have squandered the bounty of our home. And in so doing, we have alienated ourselves, like a child from her mother. But, like the arrogant youth who saw his humiliating foolishness and returned in
repentance to his home, we can, through reflection and conviction, “come to ourselves” and seek reunion.

We can return to relation; it is available all around us. “The holy is a dimension of reality that shines through the bearers of the holy, be it stars and trees, ocean and earth…or persons…” (Paul Tillich 1977, 152). Religious communities already have practices and services that require care and faithful labor from practitioners. It is not a far stretch to invite these communities to share concern and spiritual regard for our Natural world. Universities should be building bridges of dialogue and engagement in the towns and cities where they dwell. Through joyful rituals (e.g., festivals like Holi and Easter in spring, or Harvest in autumn), we can rekindle our childlike sense of wonder, and highlight the ways that Nature has provided for us (whether understood as by the design of a deity or not), we surely can see that Nature offers us a place of soulful connection. John Muir certainly thought so, “Everybody needs beauty as well as bread, places to play in and pray in, where Nature may heal and cheer and give strength to body and soul alike” (1912). Such experiences of communion and the providence of Nature ought to evoke gratitude and a reciprocity of care. Practices of contemplation and caring about (Fisher & Tronto 1990), create the spirit of receptivity to Nature’s expressions. Bringing Care Ethical theory into collaboration with religious sensibilities, practiced as caritas, we can aid ourselves in seeing more deeply who we are, just one of many in our biotic community. It is time for us to repent of our ongoing abuses, and actively work together, privately and publicly, to make the Ecological turn away from our deluded self-absorption and toward healing with Earth.

As I write this from Eugene, Oregon, large areas of the state are engulfed in flames and smoke. Experts claim that the excesses and intensity of these fires are the result of climate change which will only increase with our current practices. If those of us convinced by climate science can find ways to bring religious believers into the concerns for our shared ecological wellbeing, by appealing to the parts of religion that resonate with a Care Ethical orientation to Earth, we might be able to expand our caring communities. Biocentrism can
enable us to see not only the sacredness of life, but also the meaning of kinship with living beings. Such recognition inspired ancient practices of offerings, libations, tending sacred fires, protecting sacred groves, and making personal sacrifices. We, in our current era, might also learn how to turn our attention to the needs of our natural home again. Traditions like Christmas, Yule, Solstices, Rosh Hashanah, New Years, and Easter can be reimagined to attend to Earth’s cycles, to contemplating and celebrating trees, forests, spring, harvest, and the returning of light. Of course, this will require religions to lean into their Earthly tendencies and nurture their re-vision to more fully honor Earthly dependence in language, ritual, story, and moral practice. But, the fruit of such an altered vision might ameliorate our Post-Modern sense of alienation and loneliness by seeing ourselves as part of an Earthly community. Nourishing our moral imagination toward our socio-natural relations could inspire more acts of caritas in our daily lives, by gardening, planting trees, buying less plastic, feeding birds, watching birds, providing homes for bees, voting for sustainable legislation, walking, riding bicycles more, and breathing in the fragrances of ocean, forest, and rain. If we humans tend to sacralize, what better use to make of such an urge than to sacralize care for Earth.

Works Cited


The Bible, New Revised Standard Version; American Standard Bible.


Contributors

**Ruth E. Groenhout** is the Distinguished Professor of Healthcare Ethics at the University of North Carolina Charlotte. Her primary areas of research focus on healthcare ethics, feminist theory, and ethical theory. Her books include *Care Ethics and Social Structures in Medicine*, *Connected Lives: Human Nature and an Ethics of Care*, and *Philosophy, Feminism and Faith*, co-edited with Marya Bower. Recent articles include “Reformed Theology and Conscientious Refusal of Medical Treatment” in *Christian Bioethics*, “Beauvoir and the Biological Body” in the *Blackwell Companion to Simone de Beauvoir*, “Of Medicine and Monsters: Rationing and an Ethics of Care” in *Care Ethics and Political Theory* and “Virtue and a Feminist Ethics of Care” in *Virtues and Their Vices*.

**Maurice Hamington** is Professor of Philosophy, and Affiliate Faculty in Women, Gender, and Sexuality Studies at Portland State University. He is a care ethicist interested in both the theory and application of care. Hamington is a Member of the International Consultants for The Melete Center of Philosophy for Care at the University of Verona and a Steering Committee Member of the international Care Ethics Research Consortium, Utrecht, The Netherlands. Hamington has authored or edited twelve books including *Care Ethics and Poetry* (Palgrave MacMillan 2019) authored with Ce Rosenow, *Care Ethics and Political Theory*, with Daniel Engster (Oxford University Press 2015), *Applying Care Ethics to Business*, with Maureen Sander-Staudt.
(Springer 2011), Socializing Care, with Dorothy C. Miller (Rowman & Littlefield 2006) and Embodied Care (University of Illinois Press 2004). For more information on his other works see https://pdx.academia.edu/MauriceHamington.

Adriana Jesenková is Associate Professor in Philosophy in the Faculty of Arts, Pavol Jozef Šafárik University in Košice, Slovakia. Her recent papers on the Care Ethics include „Research and Educational Potential of Feminist Care Ethics in Sex Education“ (2018), „Deficit of Democratic Care in the Educational System in Slovakia“ (2020). Her research deals with issues of care, power, and justice in education system and in medical practice from the feminist care ethics’ perspective.

Luigina Mortari is Full Professor at the University of Verona (Italy) where she teaches Phenomenology of care at the Department of human sciences and Epistemology of the qualitative research at the School of Medicine. She has been the Dean of the Department of human sciences for 9 years and now she is member of the Board of Directors. She is also the founder and director of Melete, the Center of Philosophy for Care. She published many books and articles, also translated in different languages; above them Philosophie du soin (Paris: L’Harmattan, 2018), Filosofia do cuidado (São Paulo/SP-Brazil: Paulus, 2018), Prendre soin de soi. L’art d’exister entre intériorité et ouverture au monde (Paris: L’Harmattan, 2019), Le savoir du cœur: Penser les émotions, ressentir les pensées (Paris: L’Harmattan, 2018), Gestures and Thoughts of Caring (with L. Saiani, New York-Boston: McGraw-Hill Education, 2014).

Sarah Munawar is a Pakistani-Muslim and settler living on and sustained by the occupied and unceded lands and waters of the Coast Salish people. She received her Ph.D in political science from the University of British Columbia and is also a political science instructor at Columbia College. Her research interests include Islamic-feminist thought, decolonial epistemologies, comparative care ethics
and disability justice. Her scholarship is deeply embedded in her responsibilities and her relations as a mother, as a primary care-giver for her father and as a Muslim woman.

**Kimberley D. Parzuchowski**, Ph.D., is Adjunct Instructor of philosophy, literature, and writing at the University of Oregon and Bushnell University. Her dissertation, *The Enchantment of Ethics: Empathy, Character, & the Art of Moral Living*, focused on the moral cultivation of empathy through reflective engagement with stories. In her teaching and writing, she works to bring the reflective critique of philosophy to bear on narratives in order to draw students and readers into the experience of ethical criticism and practicing wisdom. Dr. Parzuchowski utilizes stories to bring the meaning of philosophy to life for students. Currently, her research has led her to consider Antiracist movements and how Eurocentric metaphysics and anthropocentrism paved the way for colonialist White Supremacy and ecological degradation. She seeks correctives by exploring the tools of the moral imagination such as the arts, religion, narratives, and music that inspire and motivate prosocial and ecological action.

**Jamie Pitts** (PhD, University of Edinburgh) is Associate Professor of Anabaptist Studies at Anabaptist Mennonite Biblical Seminary (Elkhart, Indiana), director of Institute of Mennonite Studies, and editor of *Anabaptist Witness* journal. He is the author of numerous articles and two books on Anabaptist theology, as well as co-editor (with Peter-Ben Smit) of a recent *Religion and Gender* special issue on “Jesus, Religion, Gender” (June 2020). Pitts’s current research draws on care ethics, sociological theory, and Anabaptist history to develop a theological vision for global democratic institutions. He is also co-directing an oral history project documenting the destruction of an African-American neighborhood in Elkhart.

**Martin Robb** is a Senior Lecturer in the School of Health, Wellbeing and Social Care at The Open University, UK, where he leads the MA in Childhood and Youth Studies. His research has focused
principally on issues of gender, identity and care and has included studies of fathering identities, male childcare workers and young masculinities. He is the author of *Men, Masculinities and the Care of Children: Images, Ideas and Identities* (Routledge 2020) and co-editor of the international, interdisciplinary journal *Children & Society*. Before joining The Open University he worked in education projects with marginalised groups and communities.

**Robert Michael Ruehl** is a Visiting Assistant Professor at St. John Fisher College in Rochester, NY. He teaches in the Philosophy Department, the Honors Program, and the First-Year Program. He enjoys studying the ethical and political ideas that emerge from the intersection of philosophy, religion, and literature. His specific areas of interest include philosophy of religion, Stoicism, Buddhism, American Transcendentalism, feminist care ethics, Indigenous philosophies (especially the wisdom found in the traditions of the Haudenosaunee), and critical thinking and debate. His long-term research goal is to develop a vigorous nonviolent philosophy and to contribute to literature that can help to dismantle the Doctrine of Christian Discovery and other colonizing practices still in use around the world. His articles have appeared in *The Concord Saunterer, Philosophy Now*, and *The Seneca Falls Dialogues Journal*.

**Inge van Nistelrooij** is Associate Professor of care ethics at the University of Humanistic Studies (Utrecht, The Netherlands) and endowed professor of Dialogical Self Theory at the Radboud University (Nijmegen, The Netherlands). Her research and teaching focus upon the basic philosophical concepts of care ethics, like relational and embodied identity, affectivity, and their relation to care, for which she draws upon philosophy and empirical inquiry into practices of care. Increasingly maternity care and the maternal subject have become central themes in her research projects. Her publications include her dissertation on self-sacrifice (*Inge van Nistelrooij, Sacrifice. A Care-Ethical Reappraisal of Sacrifice and Self-Sacrifice*; Peeters Leuven, 2015). She is co-founder of the international research

Jason Rubenstein is the Howard M. Holtzmann Jewish Chaplain at Yale, where he has served since 2018. Prior to Yale, Jason was the Dean of Students and Alumni and a member of the faculty at the Hadar Institute in New York. Jason received an AB in Social Studies from Harvard College, and holds an MA in Talmud from the Jewish Theological Seminary, where he also received rabbinic ordination. Beyond the pastoral and communal responsibilities that make up the bulk of his work (and are part of the impetus for this very essay), Jason’s philosophical work focuses on approaching the major concepts of Jewish thought – revelation, the afterlife, and miracles, etc. – from a starting-place of lived human experience, rather than metaphysics or propositional truth. His current project is an interpretation of Maimonides that places him in dialogue with strands of feminist and queer theory. And, it is only fitting to mention gratitude – to God, for all my gifts, to my parents, for giving me life and raising me, and to my wonderful wife, Arielle, who renews my stores of love and hope daily.

Maureen Sander-Staudt is the co-editor of Applying Care Ethics to Business (2011, with Maurice Hamington, Springer Press) and Maternal Subjects (2012, with Sheila Lintott, Routledge). Her articles include “Care as A Corporate Virtue” (2011), “The Unhappy Marriage of Care Ethics and Virtue Ethics” (Hypatia, 2006) and “Reassembling the Assembly: Care Ethics and Political Agency” (The Journal of Social Philosophy, 2008). She has explored topics in care ethics such as artificial womb technology, hospitality, public and male lactation, and the comparative normative status of embryos. Her latest writings center around the moral ideal of caring reciprocity. She lives in Minnesota with her human and animal family.

Steven Steyl is a Lecturer in Bioethics at The University of Notre Dame Australia. He has published on a variety of topics in care
theory, feminist philosophy, virtue ethics, and political philosophy, and has held visiting research positions at the Universities of Minnesota and Oxford. His research interests lie primarily in philosophical accounts of care and how these fit into a broader theory of normative ethics.

Sarah Zager is a PhD candidate in Religious Studies and Philosophy at Yale University. Her research explores how Jewish thought can contribute to contemporary debates in moral philosophy. Her dissertation, entitled *I Will Sing of Love and Justice: Jewish Responses to the Theological Roots of Contemporary Virtue Ethics* explores how Jewish thinkers have combined deontological and virtue ethical approaches to ethical theory in ways rarely considered in contemporary philosophy. She is a recipient of the Leo Baeck Fellowship and has published work in the *Journal of Jewish Ethics, Nashim: A Journal of Jewish Women’s and Gender Studies*, and *The Journal of Religion*. 
Index

abortion 57, 76
Abraham 93
Abrahamic religion(s) 221
adoption 69
afterlife 104
Alcibiades 126-8, 136
American Indian 386
Anabaptism 332
Anderson, Pamela Sue 10
Anishinaabeg 362
anthropocentrism 388, 394
anti-militarism 267-70
apostasy 89
Aquinas, Thomas 355, 372
Arendt, Hannah 16, 19, 35-6, 125
argumentum ad verecundiam 33
Aristotle 121, 128-9, 133-4, 139-40,
147-8, 153, 232-3, 350, 355, 358,
372
army, U.S. culture of 199-200
attentiveness 226-9
B. Shabbat 81
Baier, Annette 227, 356
banality 35-6, 38, 42
becoming VIII-XI, 159-94
Benhabib, Seyla 52
Benjamin, Mara 69-78, 243, 258
Bentham, Jeremy 217-20
Billet, Shira 76-7
binding of Isaac 59-60
biocentrism 393-4, 397
birth 159-91
Black Lives Matter X
Blustein, Jeffrey 13, 18
body 159-88, 278, 281, 287, 292
Bourgeois, Louise 168, 169
Bowden, Peta 134
Boy Scouts of America 202-3
Boys’ Brigade 202-3
Bubeck, Diemut 134, 146
Buber, Martin XXXIX, 393, 398
Buddhism XVI
Bunting, Madeline XIII
Bunyan, John 201
Butler, Judith 153
care ethics (see also “ethics of care”):
abstraction 49-86, conversion ther-
apy 211; democracy 273-95,
326-46; distinct from care XIV;
ecological values and practices 380-
402; egg freezing 49-86; epistemol-
ogy 211-41; fatherhood 195-209,
244-263; feminist XIV; forgive-
ness 3-23; Islamic 299-323; inter-
sectionality 93, 100, 117; masculin-
ity 195-209; motherhood/maternal
theology 151-94; moral cer-
tainty 3-23; as moral paradigm;
parent-child relations 243-71; particularity 49-86; progressive religious practice VIII; relationally embedded XV; religious discourse 326-46; religious dogmatism 3-23; religious pluralism 89-120; responsiveness XXIX, 3-23; sacred 273-95; sex education 273-95
care: different voice of XXVIII; environmental failure to 380-402; epistemic authority XXVIII; feminism XXVIII; god 92, 94, 98, 99; goddess 92, 94; as the good 128-54; Islamic epistemologies of 299, 300, 303, 308, 319; Islamic practices of 299-323; ontological call to 121-56; as practice 123-155; religious practices of XXIII; responsiveness XXVIII; spiritual pursuit of 121-156; as virtue 381-85, 396, 398
caring: approach 275-6, 292; attitude 278, 280; for children 278, 289; democratic 286-93; for home 277, 281; practices 289; for sacred 292; self 275, 281, 285
caring for: carers, parents 302, 307, 310, 314
care giver/ing: Muslim XXXVII, 299-323
caring work/labor 245-69
Catholic: feminism XX
Chau, John 27-48
Cherry, Myisha 20
children XXIII
childrearing 244-8, 256-9
Chisale, Sinenhlanhla S. XXVII
Church of the Latter Day Saints XII, XXXI, 107-13, 221
Christianity X, 3-23; affinities with care ethics 100-6; anthropocentrism 380-402; care ethical critique of 92-118; 221, 276, 282-3; comparitive studies XVI; Catholic 274-7; forgiveness 3-23; ethics of church 286, 291; sexual ethics 274-91
Christian: manliness 197-205; mission 326-47
Cicero XXXVIII, 348-54, 360, 372-3
circumcision 63
colonialism 302, 308, 316; maternalist paradigm of guardianship 311-4; power 303
command/ment 60-6
communism XXXV, post 273-95
Confucianism XVI, XXVI-XXVIII
conservative 274, 281-6
conversion therapy XIII, 211-41
Cooper, Brittney 101-2, 106
Corvino, John 213 fn, 229
Coulthard, Glen Sean 361
creation 164-191
creativity 281-3, 293
Crenshaw, Kimberlé 102
critical thinking 281-3
Curran, Charles XXXIX
Dalmiya, Vrinda XXVII, 128, 224-7
Daly, Mary XVII, 105
Deloria, Vine, Jr. 364, 367
democracy: politics 326-30, 343-4; sex education 286-93; work 326-46
dependence: interpersonal 380-400, socio-biological 380-400
dependency 3, 5-8, 16; narrative foreclosure 299-323; secondary 299-323
Derrida, Jacques 41
disability: justice, medical model of 293-323
dispositions 212-37
dogmatism 27, 35, 42
dominology 166, 184-5
doula: Islamic concept of 299-303;
Kittay, Eva F. 314-5
Du Mez, Kristin Kobes 9-10
ecology: contemplative 382, 388, 390; crisis 380, 387; practices 380-1, 400; values 380, 385; more than human world 393-94, 397
economies of attention 314, 319
ecuminalism 89
education: democratic 286-93; ethics 277, 287; marriage and parenthood 286-93, public 275-91; religious 284-5, 285 fn; sex 273-95
educational 273-95
egg donation 69, 76
egg freezing 73-4
engagement: as culpable of ecological harm 382; as cultivating practice/virtue 381, 399; as motivating care 380-402
Engster, Daniel 236, 328, 329 fn, 330
environmental ethics 380-402
epistemic injustice 44
essentialism 162, 166, 172-4, 177-8, 188
ethics of care: action 30, 33-4, 36, 38-41; anti-authoritative 32-3, 43, 45; connection 37-40, 43; distinct from care XIV; forgiveness 3-23; inquiry 38-9, 40, 44; work 33, 38-9, 41, 44; as moral ideal 38, 41; responsiveness of 26, 29, 36, 39-40, 44-5; as subsersive 27, 41, 45
ethics: deontological 38; individual morality 8, 16, 22; rational 4-5; social structures of 15-6
evil 93-5
excommunication 89-90, 114, fn 114
Exodus XXXV, 261-3, 267, 270

family life 274-92
fatherhood 195-201, 244-63
fecundity 211-241
Feld, Merle 245-9, 257, 268, 270
Feminism/t: Black 100-8; care ethics and religion 205-6; Catholic XX; fatherhood 196, 206; 245, 248; theology X, 337, 339-44
Fisher, Bernice 384
fluid(ity) 159-191, 393, 396, 398
Foot, Philippa 235 fn
forgiveness: abuse of 8, 10, 15, 17, 23; accountability 10-12, 13, 21, 23; anger 3, 6-7, 11, 13-14; demands for 10; duty 17-22; moral reconstruction 3; punishment 8, 11-12, 14, 21; privilege 4, 6, 13-4
Fricker, Miranda 229 fn
Fiorenza, Elisabeth Schüssler XVII
Gastmans, Chris 196, 205-6
gender 160-5, 170-4
genesis: process of becoming, 185
Genesis, Book of 59-60, 83, 183-5
Genovese, Elizabeth Fox XXI
Gilligan, Carol XV, XIX, 92, 159-1, 171, 219, 326, 328, 354
god 250-70
goddess 162
good will 36, 38
good, the: necessity of 128-35; practical idea of 139-55; science of 136-7
Gouws, Amanda XXVII
Groenhou, Ruth XXVIII-XXIX, 3-23
guardianship 304, 311, 313
Habermas, Jürgen XXVIII
Hamington, Maurice XXIX-XXX, 27-48, 103, 197, 204, 207, 225, 236
Hampton, Jean 12-3, 21
Hartsock, Nancy 245, 251-7, 260, 270
Haudenosaunee 360, 363-9
Hegel, Georg Wilhelm Friedrich 60-1
Heidegger, Martin 126
Held, Virginia 51-83, 160, 205-6, 226, 236, 328-30, 347, 350, 355-6
Herr, Ranjoo Seodu XXVII
Hobbes, Thomas 348, 372  
Hollway, Wendy 196, 206  
home 276-94  
human rights 276, 283-6  
Hume, David 348, 372  
humility 27, 29, 41, 44-5, 227-8  

identity(ies) 276, 281, 283  
imagination 205, 207  
indigenous: philosophies 347-78; shamaneic awareness 390  
infertility 50, 79, 82, 84-6  
interdependence 5, 17; interhuman 380-400; socio-biological 380-400  
interdependencies: degrees of 111  
interpretation 257-62, 269, 277, 281-3, 293  
interrelationality 13  
Intersectionality 93, 100, 321  
Islam XVI; and disability 299-323; ethics of care 299-323  
James, William 104  
Jesenková, Adriana XXXV-XXXVI, 273-95  
Jesus Christ: as divine child XXIII; 91, 93, 96, 99, 101, 198, 200-5  
Jewish/Judaism XVI, 49-86, 221, 229, 243-71  
Journal of Business Ethics XV  
Journal of Feminist Studies in Religion XV  
Justice XXXVI-XXXIX; disability 299-323; egalitarian and indigenous 347-78  
Kant, Immanuel 54, 56, 63-6, 74, 79, 354-5  
Kekes, John 350-2, 360, 366  
Keller, Catherine VIII-XI, 185-90; relational ontology XIX-XX  
Kierkegaard, Søren 61 fn, 93  
King Jr., Martin Luther XX  

Kingsley, Charles 202  
Kittay, Eva Feder XX-XXII, XXXVIII, 125-8, 152, 160-1, 228; doula 314-5, 357-8  
Kohlberg, Lawrence 354-5, 371  
Kollwitz, Käthe 268-9  
Kristeva, Julia 8  

LA Paul 244  
LGBTQA+ VIII, XIII, 211-41  
labor 164-5, 172, 175, 185  
lactation 161, 163, 173  
LaDuke, Winona 361-2  
Laugier, Sandra 327, 330  
law 261-2  
Leibowitz, Yeshayhu 83  
Levinas, Emmanuel 76, 132  
liberalism 112, 329-30  
Li, Chenyang XXVI-XXVII  
Locke, John 358, 361, 363  
love: agapeic and erotic X; masculinity 197-207  
Lowe, Barbara J. 358-9, 367, 372  
Lugones, María 91  
Lutheranism XXIX, 89  
Lyons, Oren 363-5, 369  

Maio, Giovanni 45  
Maori 360  
martyrdom 30-1, 37  
Marx, Karl 245, 251-4, 361  
masculinity 196-207  
maternal/maternity 177, 186-7  
McDowell, John 235 fn  
Mennonites 326-46  
messianism 83, 86  
Methodism 197-8, 203-5, 207  
missionaries 30-8, 32 fn, 38 fn  
modesty 227  
moral: authority 27-45; certainty 27-45; community 3, 12  
Mormon/Mormonism: See Church of the Latter Day Saints  

Mahabharata XXVII  
Maori 360  
martyrdom 30-1, 37  
Marx, Karl 245, 251-4, 361  
masculinity 196-207  
maternal/maternity 177, 186-7  
McDowell, John 235 fn  
Mennonites 326-46  
messianism 83, 86  
Methodism 197-8, 203-5, 207  
missionaries 30-8, 32 fn, 38 fn  
modesty 227  
moral: authority 27-45; certainty 27-45; community 3, 12  
Mormon/Mormonism: See Church of the Latter Day Saints
INDEX

Mortari, Luigina XXXI-XXXII, 39, 121-56
motherhood: ideology of 164, 171-3, 190; Islamic 314, 317
mothering 159-77
multiculturalism 112
Munawar, Sarah XXXVI, 299-323
Murdoch, Iris 129-52
Murphy, Jeffrey 12-4, 21

Native American 385-7
nature/earth: as caring 380-402; Earthlings 395; moral subject/agent 380, 385, 390, 396
newborn 56, 64
Niebuhr, Reinhold 353
Norlock, Kathryn 5, 13
normativity: emergent 40, 196, 206-7
Nussbaum, Martha XXXVIII, 353, 360, 367-8, 389, 391
obligation 53, 60, 65-7, 69, 71-3, 72, 76 fn, 77
Okin, Susan 112, 114, 347, 356
ontological: call of 123-4; relationality XIX; religion 90-1, 93, 95, 101-2, 104-7; work 92, 94, 95-7, 101
Osage Nation 365
pacifism 332, 341-2
parenting/parenthood 163
particularity 51, 56-7, 59, 67, 75, 77-82
Parzuchowski, Kimberley D. XXXVIII-XXXIX, 380-402
Paul, L.A. 80
Pesikta d’Rav Kahannah 85
Petersen, Tove 232
physicality 165-6, 170, 175-7, 181
Pieper, Josef 349, 352, 360, 366
Pitts, Jamie XXXVII, 326-46
Plato XXXVIII, 90, 107, 121-53, 348-73
pluralism 330
Plutarch 121-52
Polemarchus 349, 352, 366
polygamy 92
power relationships 19
pregnancy: body 159-91; loss 50, 76 fn, 78, 80, 86
preservation stone 82-3, 86
private sphere 274-90
privatization of sex education 274-91
profane 279, 291
progressive 285-6
Protestantism 89
protection: of vulnerable 276, 286, 288, 290-3
Rabbi Akiva XXXIV, 249-70
Rabbi Hama 258-70
Rawls, John 327, 329, 348, 350, 358, 372
Relation/relational: beings/ontology XIX, 275, 382, 395, 279-80, 287-8, 292, 382
religion 90, 92, 94, 99-107; care ethical standards for 89-120; congregations 327, 332, 335-6, 340; discourse 326-46; dogmatism 27-48; divine birth 188; epistemic privilege 102-3, 109, 113; feminist 181; forgiveness 3-23; gender 162, 166, 171; Islam 299-323; mediation of 41; moral certainty 27-45; maternalism 159-94; as one-sided XXV; ontology 104; pluralism 90; pragmatism 91, 101, 103-4; relations of power 91, 92, 95, 102, 104, 106, 112; shunning 109, 273-95; supernatural 95, 100, 103-4, 106; women 92, 94-5, 99-109, 395
religious community: as apt for cultivating morality 381, 387, 389, 400
responsibility: collective/shared 273, 277-8, 288-94
responsiveness XXVIII
Rich, Adrienne 166, 175, 178-81, 189-90
Ricoeur, Paul 166, 171, 390-1
ritual 62-4, 66-7, 69-70, 73, 82-4, 86
Robb, Martin XXXII, 195-201
Robinson, Fiona 122
Roper, Michael 195
Rosenow, Ce 207
Rubenstein, Jason XXXIV-XXXV, 243-71
Ruddick, Sara 160, 166, 172-7, 189-90, 251, 268-9
Ruehl, Robert Michael XXXVII-XXXIX, 347-78
Ruether, Rosemary Radford XVII, 102-3

Sacred Heart 204
sacredness 273-95
Sander-Staudt, Maureen XXVII, XXXI, 89-120
secular/secularization 275-6, 290-1
Sentinelese 27-45
seven generations 364-73
Sevenhuijsen, Selma XXXV, 206, 226 fn, 288
sex education 273-95
sex/sexual: education 273-95; orientation 212-37; sexuality 161-2, 165-6, 170-1, 181-2, 189
Shamlian, Grace XIII
Sherwood, Harriet XIV
shunning 109, 112, 114
Simonides 349
Sisters of “The Providence” XXVII
Slote, Michael 18
Smedes, Lewis 8-9
Socrates 126-47
solidarity 289

spirituality: crisis 380, 387; and emotion XXXIII, 195-201; etymology of 121; indigenous XVI, XXXVII-XXXVIII; imagination 195-201; practices 123-55; maternal becoming 166, 170, 178-9; nourishment 122-3, 150
spiritual: dimension 380; nourishment of 122-3, 150; traditions XVI, 390-1, 394, 399
Ste Sébastienne 168
Stabile, Susan J. XX-XXI
Star, Daniel XXVI-XXVII
Steyl, Steven XXXIII-XXXIV, 211-41
students 244-5, 249-57, 261
surrogacy 57-8, 86, 164
symbol(ism) 166, 170, 175, 177-8, 187

Talmud Bavli 82
Thadodá·ho’ 363-4, 366-7
The Maternal Man 169
theology 159-88
Thompson, Edward 198
Tinker, George XXXIII
Tillich, Paul 388-90, 399
Tosh, John 197-8, 202, 204
Trevor Project XIII
Tronto, Joan XXIV, XXXV, 87-98, 105, 116, 128, 145-6, 160-1, 167, 172, 176-7, 182, 190-1, 205-6, 212, 223-8, 235-6, 273, 287-90, 328, 330-1, 356-7, 370, 368, 372; definition of care 384; phases of care 390-4, 399
trust 4, 12, 17
Tutu, Desmond XXVII

ubuntu XXVII
universal imperatives 233, 236
Utilitarianism 217

values: democratic 273-95, 326-46; moral 276, 281-92
van Heijst, Annelies  XV, XXII-XXVI, 162, 167
van Nistelrooij, Inge  XXXII, 159-94
van Zyl, Mikki  XXVII
Vanlaere, Linus  196, 205-6
Virgin Mary  204-5
vulnerability  5, 18, 20, 276, 286, 288, 290-3

Wadud, Amina  301 fn., 314-7
Waghid, Yusef  XXVII
Walker, Margaret Urban  3-4, 12, 160, 178, 226, 228
Weber, Max  201
Wesley, Charles  197
Wesley, John  204
Wilson, William M.  36

Wittgenstein, Ludwig  33
women  89-120, 93-4, 100, 111; activism  327, 341-3; centered-theology  99-100; epistemic authority  102-3, 109, 113; evil  93-95; as moral ideal  38, 41; ordination of  337; religious movements  327; religious organizations  326-45; responsiveness of  26, 29, 36, 39-40, 44; work  33, 38-9, 41, 44

Young, Iris Marion  277-93
Yuan, Lijun  XXVI
Zager, Sarah  XXIX-XXX, 49-86
Zambrano, Maria  132, 141, 146, 153