

Politics Is Not A Game: The Radical Potential of Care

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Abstract

The status of care theory remains the subject of debate. Is care a virtue theory? Is care an alternative category of ethics? Or is care an entirely different approach to morality? This chapter takes the position that care represents a paradigm shift in thinking about morality that is not always appreciated by those who attempt to fit care into existing philosophical categories. Specifically, this chapter contends that care can be understood as a reconstructive theory of being animated by embodied existence and characterized by a notion of moral identity based on iterative acts of care. As such, care cannot be disentangled from its relational ontological, and epistemological elements as well as its moral responsiveness. The crucial political question is how to extend the circle of those receiving robust care. The answer to that question is quite different if care is viewed as embodied and performative rather than an ethic with traditional abstract normative demands. This chapter argues that the notion of care as performance resists the game-like qualities of the imposition of external rubrics of ethical adjudication or political decision making in favor of authentic contextual and efficacious responsiveness to the other.

Key words: care ethics; performativity; embodiment; relational ontology; game metaphors; normativity.

A feminist ethic of care is integral to the struggle to release democracy from the grip of patriarchy . . . A feminist care ethic encourages the capacities that constitute our humanity and alerts us to the practices that put them at risk (Gilligan: 2011, 177)

Care is irrepressible. It is like the weed that grows through the cracks of a city sidewalk. If the human will to care exists, even repressive circumstances cannot stop it. The genocidal intent of the Holocaust certainly represents the antithesis of a caring context. In the early 1940's, the Nazis implemented the Final Solution, a plan to kill all the Jews of Europe and North Africa. The Nazis controlled France at this time and, as in the rest of occupied Europe, Jews were rounded up and sent to concentration camps. In defiance of the Nazis and the Vichy government, the members of a small community in south-central France, Le Chambon-sur-Lignon, decided to assist and care for the fugitive Jews. Led by André Trocmé and Edouard Theis, the people of Le Chambon prevented between 3,000 and 5,000 Jews from almost-certain death during the German occupation of France. Located near an SS Division, the Chambonnais hid refugees, fed and generally cared for them, moved them to the countryside when there were raids and inspections, and provided many with falsified papers to aid in their escape. These otherwise ordinary townspeople acted benevolently despite great personal risk. Several Chambonnais were ultimately discovered and killed because of their subterfuge, including Trocmé's cousin, Daniel. Philosopher Philip Hallie who chronicled the events of Le Chambon during World War II struggles to find a clear ethical explanation for the moral heroism of the townspeople. Despite not having the lens of care theory available to him, Hallie does, however, recognize that simply

applying traditional Western moral theory to the action of the Chambonnais is unsatisfying: “The study of ethics must not be afflicted with ecological impoverishment. It must not be a way of trying, by a use of abstract, traditional terms, to cast a fitful light within the inward worlds of men’s souls. . . . It must concern itself with the *story* of what individuals do in the context of the story of their times” (1994: 280). Here, Hallie decries abstraction and notes the ethical significance of particularism. Pertinent to the discussion of care theory that follows, Hallie locates the moral import of what the Chambonnais accomplished in terms of caring political action. What they did defied notions of moral calculation or what ethical principles could compel an individual to do. Hallie describes the care that the Chambonnais exhibited as much more than a disposition of empathy: “the Chambonnais cared about what had happened, and cared enough not only to feel pain at the suffering of the victims but also enough to make inferences about future events. They cared enough to think and plan” (1994: 106). Ultimately, they took action. Ethics was not a game to the people of Le Chambon governed by rules of consequence or moral command. It was a human connection to someone in need characterized by empathy, imagination, and action. The choices they made were not only morally significant; they influenced their sense of self-identity and their understanding of the circumstances.¹

The story of the people of Le Chambon reinforces that caring is simultaneously deeply personal, relational, and political. Although care is resilient, shining through humanity’s darkest hours, it is not an autonomous force. Care is a human response to our mutual interdependency (Hankivsky: 2004: 34) that requires fostering to flourish and grow (Tronto, 2013: 8). During the Holocaust, millions of Jews died and many more suffered because of failures to care—powerful divisive and dehumanizing narratives squelched empathy, imagination, and caring actions on a large scale. Caring is so basic to human development and the survival of human civilizations

(Rifkin: 2009), that the resource potential to care is present even when suppressed. Yet, ultimately, humans must choose to act. Caring is always a choice. Sometimes it is easy to care as with family and friends, but in other instances the time and effort needed to care for unfamiliar others is daunting. If we assent to the notion that caring is a worthwhile moral ideal (Noddings: 2010, 79) then it is reasonable to interrogate social systems and their philosophies for the extent to which they foment caring and furthermore pursue means of creating the most robust communities of caring possible.

This chapter explores two claims about care. First, care transforms the “game” of political ethics. As the opening quote from Carol Gilligan gestures toward, the political nature of care is not equated with contemporary characteristics of ethics but rather endeavors to reconnect the personal and public spheres in ways that alter our relationship to both. The second claim explored in this chapter is that care is much more than an alternative theory of ethics. I contend that *care is a performative theory of being* that has implications for identity and epistemology as well as ethics and politics. As such, care has a postmodern character (but not a purely deconstructive one) with the radical potential to reframe how we think about morality. In the conclusion, I will address what a performative theory of care might mean for a political approach to widen the circle of care for unfamiliar others.

Care Transforms Political and Ethical Games of Normativity

Politics, education, and even war are now described in the metaphorical language of gaming, with “war games” preparing high-tech militaries for conflicts that

increasingly resemble video games. Do we control this metaphor, or does it control us? (Rigney: 2001, 141).

Care theory has the potential to transform how politics and ethics are understood. In philosophy, care ethics does not easily fit into the framework of traditional Western moral theory resulting in struggles over categories, terms, and ultimately, in acceptance. In political theory, care challenges dominant liberal assumptions regarding autonomy and egoistic motivation. One such challenge is in regard to the notion of politics defined as an abstract moral structure governing human participation. In other words, the reality of care means that politics is more than a game. Contemporary Western politics often focuses more on winning elections and thus the race to accumulate and maintain power rather than on responsive governance, which facilitates the flourishing and growth of a populace. The notion that politics is a game to be won or lost is sometimes explicit in calculated decisions to garner popularity and other times gamesmanship is implicit in the actions and thought processes of those involved. As one recent study of political rhetoric in the media describes, “the framing of politics as a strategic game is characterized by a focus on questions related to who is winning and losing, the performances of politicians and parties, and on campaign strategies and tactics” (Aalberg, Strömbäck, de Vreese, 2011: 162). Although in my estimation, care is not altruism, it is “other-directed” in such a way that structures politics as a means to care for citizens rather than a game of power. Care centers on the relationship with particular others and the expressed needs of those others in such a way that resists gaming. In this section, I will discuss the politics-as-game metaphor as well as the ethics-as-game metaphor and how care challenges these metaphors in a manner that suggests a different way of thinking about normativity.

The notion that “life is a game” is what Raymond Gozzi Jr. refers to as a master metaphor, “one that organizes a whole field of minimetaphors around it” (1990: 291). Game metaphors pervade politics and much of our academic and theoretical thinking as well (Ching: 1993, 44). Metaphors are powerful and indispensable vehicles of human understanding. Identifying, analyzing, and sometimes challenging operant metaphors, such as game metaphors, is not merely linguistically interesting; it is a means for understanding our very structures of knowledge (Lakoff and Johnson, 1980). Epistemologically, metaphors allow us to find the similarities between something that is known and something that is unknown so as to assist us to better understand the latter. When Marcus Aurelius tells us that time is a river that flows between events, a comparison concerning something familiar and tangible (river) is employed to help us better comprehend an idea that is abstract and elusive (time). The metaphorical understanding need not be consciously attended to in order to impact our behavior. I don’t have to explicitly acknowledge that time is actually a river for me to make this part of my worldview. Thus, I may think about time as moving in a single direction and irreversible like a river. However, metaphors, as powerful as they are, are only partially explanatory. Metaphors are never definitions. As philosopher J.J.C. Smart suggests, “It is clear, then, that we cannot talk about time as a river, about the flow of time, of our advance through time, or of the irreversibility of time without being in great danger of falling into absurdity” (1949: 485). Time is not water: one cannot skip rocks across time, or be refreshed by taking a drink of time. I have referred to the phenomenon of eliding the difference between metaphor and definition as the “metaphoric fallacy” (Hamington: 2009). This fallacy is not a criticism of metaphor but rather a concern about a slippage in human understanding. In many cases, such sloppy thinking is inconsequential. However, there are certain deep or master metaphors for which the confusion

between equivalence and analogy can result in substantial moral fallout. One such metaphor is the idea that politics is a game.

One of the challenges of using metaphors is that there can be substantial differences in how one wishes to employ the intended analogy. To say, “Joe is a snake,” depends upon similar understanding of the term snake. If there is a general agreement that snakes imply elusiveness, then the comparison can provide useful insight. However, if someone comes from a culture that reveres snakes as resourceful creatures while another person has been acculturated to think of snakes as the source of evil in the world, the claim that “Joe is a snake” loses its ability to convey shared meaning between them. Accordingly, the idea that politics is a game will only be useful to the point that there are shared understanding of how “game” is understood. Although there is the risk of missing some of the variation in understandings what “game” means to people, some common characteristics of games include: a controlled and finite environment, compartmentalized and truncated morality, trivialized stakes, and the privileging of adversarial relationships.

Games are closed systems that generally have finite temporal and spatial dimensions. They have rules that define the parameters of the activities associated with the game. These rules represent the primary ethical content of games such that rule-breaking is wrong and sometimes the subject of penalization. Games usually have limited or no stakes at all and are engaged in for the pleasure of the activity or for the joy of winning. Games imply contest and thus they privilege competition and the value of victory. Given contemporary emphasis on winning, treating something like a game is often construed as an emphasis on the outcome over and against authentic participation, such as found in the complaint, “Is love just a game to you?” Ultimately, games are morally neutral human activities yet to declare that an activity is being

treated like a game frequently has a pejorative connotation regarding seriousness, depth of involvement, or fixation on victory.

Certainly, political activity has game-like elements. To the extent that the political goal is to garner the requisite influence in order to achieve a desired outcome, then politics can be viewed by some as a type of game. Strategy and tactics are then methods for achieving advantage in the game. The problem resides in the extent to which people engage in the metaphoric fallacy: *although political activity has elements that are similar to games, it is not a game*. Politics should address the public negotiation of serviceable government. As such, politics has many elements that are the antithesis of games. For example, as a major structure of social life, politics is open-ended and often has momentous consequences at stake. Recent threats by U.S. political parties to shut down the federal government in order to gain advantage may appear to have game-like qualities as characterized by brinkmanship but there are significant implications for the real lives of people when the government shuts down. Furthermore, the morality of games is often simplistic in the avoidance of breaking rules. Accordingly, political activity sometimes seems to seek this or that technicality to justify a decision or it engages in a form of eisegesis in the backward interpreting of actions (such as when claiming to be on the right side of a “just war” argument after making the decision for other reasons). Such game playing behavior sometimes may be morally motivated but hardly reflects a method designed to support deep moral deliberation. No matter how much we desire it, political activity is anything but simplistic, and thus a game, given the myriad variables it must navigate.

Care, of course, has political elements to it. In order to influence social theory to promote the growth and flourishing of a society, power must be used to effect the imagination

and will of a citizenry that such caring is the best use of time and resources. However, the pursuit of a caring society might involve leadership that does not act in a manner that is always politically expedient to the game. Evelyn Nakano Glenn describes the definition of a good society as “those who cannot care for themselves are cared for; that those who can care for themselves can trust that, should they become dependent, they will be cared for; and that people will be supported in their efforts to care for those they care about” (2000: 84). Pursuing issues such as wealth redistribution, same-sex marriage, and greater social safety net protections, for example, may not be comfortable routes to political gamesmanship when these issues are unpopular with powerful constituencies but they do represent care for vulnerable or oppressed members of society. This is not to say that caring politics must be naïvely ideological. However, care entails a commitment to be responsive to expressed needs that asks leaders to govern by more than popularity polls or special interest donations. Authentic caring is not a game but rather a meaningful and effective response.

An important corollary to the concern over the notion that politics is a game is the implicit metaphor that ethics is a game. Traditional notions of normativity lend themselves to the truncated morality of games. For example, the idea that a set of finite principles or rules can govern our ethical behavior is an ancient and pervasive idea yet a problematic one. Rules lend themselves to game playing. Rules interject an abstract external evaluative system to human interaction and are therefore never organic or emergent but always imposed. For example, the very serviceable rule that one should not lie appears very clear but opens the potential for “gaming.” One can question what they “can get away with” such as a lie of omission rather than commission. Or one can speculate whether it is OK to commit a “white” lie but this begs the question of what constitutes the dividing line between a white lie and a bald-faced lie. When

ethics is merely a set of rules intended to adjudicate acts, then ethics can be turned into a game in a pejorative sense. Nor is care a simple utilitarian calculation of good and harm—another type of game that can devalue respect for individuals. Although care has elements of consequentialism to it, care centers on the ongoing relationship. As Noddings contends, “moral problems should not be reduced to mathematical dilemmas” (2010: 21). Care theory offers an antidote to the external imposition of the game-like ethics in engaging political morality by reframing ethics around relationships. In other words, the question is not whether a lie is right or wrong as an absolute truth, but rather how does lying impact ongoing relationships. Because authentic caring involves the particulars of those involved in a given context, it resists gaming and offers an emergent form of normativity. Normative guidance for care emerges out of the specific context of those involved rather than a utilitarian calculus or a deontological duty. However that guidance is tenuous and marked by deliberation thus offering more of a trajectory than a rule.

Accordingly, care theory offers a radical departure in thinking about morality that does not fit well within Western concepts of normativity. The tenuous normativity of care comes from a different perspective. The traditional ethics game has a predetermined notion of normativity abstracted from the context of the individuals involved: rules or calculations of actions. This abstraction is supported in the name of objectivity and fairness. Care entails a more organic approach to normativity. Fiona Robinson recognizes this when she describes the naturalized epistemology that underpins care as “*not fully normative* in the strong sense, it still retains normativity” (2011: 27). In a stronger critique, Margaret Urban Walker asks, “I have come to wonder, or rather to worry about, why it is so important to know whether ‘we’ are right and ‘they’ are wrong, *tout court* (1998: 13). Rather than eschew normativity altogether, care

theory offers a context-driven emergent trajectory of moral standards. The moral response (caring) is found within the relationships and the individuals involved. In this manner, care transcends the objectivity/subjectivity dualism. Care is not subjective in that any response cannot simply be labeled as caring in the manner that we have described. It is also not objective in that a single best caring response cannot be predetermined given the complexity of context. Rather, care involves the time and attention to the other, the care receiver, prior to any course of action. A game with unyielding external moral rules is anathema to caring. It is not that caring entails anarchism. Principles can offer guidance: milestones of conversation, and symbols for values held, but they cannot be a substitute for the hard work of caring. Similarly, calculations of aggregate pleasure and pain can also be a useful guide but does not replace the challenge of contextual-driven caring. Care is much more than a game of normative adjudication. In the next section, I will suggest that care is an aesthetic activity of self-and-other development that builds identity and knowledge.

A Political Performative Theory of Care

“Performance describes a genuine act of creation . . .” (Fischer-Lichte: 2008, 36)

“Ethics turns on intelligibility, reconciliation, and beauty.” (Caputo: 1993, 11)

As the intellectual work on care theory matures and spreads to a variety of disciplines, it is clear that care is not just a privatized relational endeavor. It is also a moral ideal that can enrich social and political morality beyond the game-like behavior that underlies traditional political discourse. In this section, I suggest that care is more than an ethical theory. I offer a performative approach to care that entails a theory of being enmeshed with a theory of knowing. Specifically I want to claim that caring identity consists of performative acts. As such, *care is a political embodied performance, every iteration of which contributes to our dynamic sense of moral identity, adds to our disruptive knowledge of the other, and supports the notion that ethical understanding is a mind-body activity that is ripe for autopoietic development.*² What I mean by “disruptive knowledge” is the kind of information about the other that is compelling and disrupts our lives to the point of motivating emotion and action. If care is indeed performative, then a holistic mind-body approach is needed if we are going to foster greater care in our society. Thus understanding care is tied to attending to physicality, bodily comportment, and proximity as well as cognitive consideration of morality. In the last section I contended that care theory suggests a different approach to normativity. In this section, I focus on the role of care in identity formation through the notion of care as performance.

Care-as-performance is a testament to the idea that without an aesthetic understanding of the ethical, morality suffers from the danger of becoming a rational decision science. The work of John Dewey is instructive for this approach to care. Dewey’s philosophy elided the strict boundary between means and ends and posited a notion of moral deliberation that he described as dramatic rehearsal appropriate to a performative understanding of care. Dewey defined moral deliberation as “a dramatic rehearsal (in imagination) of various competing lines of action” (1988, 132). Such dramatic rehearsals are context-driven scenario explorations. Furthermore,

Dewey had an expansive understanding of aesthetics that makes it more accessible to everyday human experience and connects it to morality. Dewey sought to recover “the continuity of esthetic [sic.] experience with normal processes of living” (1980, 10). Given a Deweyan framework, performative care is not about making art but about being artful. In other words, a performative theory of care does not suggest that caregivers are artists in the sense of exceptional genius or in terms of end products but it does suggest that care givers are artists in terms of being aesthetically attuned to the bodies, actions, and relations of themselves and others. Among other things, thinking about care as performative suggests that it is an imaginative aesthetic experience. In a similar way, Dewey wants to revitalize the connection between morality and aesthetics. He not only claims “imagination is the chief instrument of the good” but that “art is more moral than moralities” (1980, 348). Everyday performances of care are not on stage yet they are witnessed, and if attended to, can become part of our moral narrative.

Framing care as performance also captures the embodied, relational, and active nature of care. Accordingly, Eva Feder Kittay describes the body as “the place of care” (Kittay: 2002). Caring is particularist: experienced individually and through one’s body. Quintessentially anti Cartesian, instead of distrusting the senses, a performative approach assumes that care is embodied. Accordingly, care-as-performance posits honing the physical skills of caring for better attunement to our particularized reality resulting in knowledge creation, identity formation, and moral relations in a manner akin to Richard Shusterman’s notion of somaesthetics (Shusterman, 2008). Shusterman describes somaesthetics as “a framework to promote and integrate the diverse range of theorizing, empirical research, and meliorative practical disciplines concerned with bodily perception, performance, and presentation” (2012:7). Although Shusterman is not a care theorist, he is trying to make philosophy more holistic in terms of

integrating mind and body in service of human well being—an approach consistent with a performative theory of care. Given its relational ontology, a performative approach to care gestures toward a robust political analysis resulting in explorations of who we are, and what we know about one another, intertwined with our inquiry into how we should respond to need. This is a much different than the standard ethical discourse of dichotomous evaluations of what is right and wrong. The latter discussion, the focus of traditional ethics, is much easier than a comprehensive discussion of identity and epistemology. The work of care is indeed challenging.

Furthermore, care is marked by action and animated by need. Although in popular conversation the phrase “I care” is pervasively employed, such as in the statement, “I care about the environment,” the morally praiseworthy aspect of care theory are *actions* integrated with a disposition of openness and responsiveness to the other. As Virginia Held describes, “care is surely a form of labor, but it is also much more” (Held: 2006, 36). It is in the doing that care becomes actualized and experienced, but the actions are intertwined with an other-directed disposition. Caring consists of a series of actions, some large and explicit actions and some small and subtle actions, that inform the quality of a relationship thus making it caring. Actions, which bring care into a relationship, can be described as performances.

Fifty years ago, the British philosopher of language, J.L. Austin employed the term “performative” to distinguish sentences that describe from those which actually bring about the phenomenon for which they refer, such as in the proclamation “I do” in a wedding ritual (1962, 6). Judith Butler applied the notion of performative speech acts to corporeal existence to argue that gender identity is not a pre-existing ontological or biological category but brought about through performance. Extending Simone de Beauvoir’s notion that a woman is not born but becomes a woman, Butler describes that “gender is no way a stable identity or locus of agency

from which various speech acts proceed; rather, it is an identity tenuously constituted in time—an identity instituted through a *stylized repetition of acts*” (Butler: 1988, 519). For Butler, these performances of gender are neither entirely freely chosen nor entirely the products of social forces.

I argue that one’s *moral identity* is also constituted through a stylized repetition of acts.³ Whether I think of myself as a caring person and what type of caring person, is instantiated through iterations of actions within the context of my relationships. This identity is inherently political as I negotiate the social forces and disciplines that seek to constrain behavior.

Ultimately, a moral identity is performed. This claim is consistent with what some theorists have described as the ontological turn in philosophy. Charles Taylor, for example, describes a moral ontology whereby morality is part of human efforts at defining self identity (Taylor: 1989, 5-9). The notion of effort is important because “identity” is not posited here as a static or natural understanding. Allison Weir offers a framework similar to a performative theory of care when she describes humanity’s quest for freedom as striving to diminish fixed identities. Humans are ontologically dynamic because of our capacity to be transformed through our relations. Weir suggests, “Our practices of self-creation both presuppose and create new connections, new identifications; and as our connections change so do our truths” (Weir: 2013, 33). There is a hint of existentialism in Weir’s claims about freedom and self creation but without a radical sense of individualism and isolation. Weir also foreshadows the epistemological dimension of care.

A phenomenology of care reveals how caring performances are embedded in relationship and entangled in identity formation, knowledge creation, political negotiation, and of course ethical action. Noddings describes a three-part phenomenology of care behavior that I wish to flesh out and expand (Noddings: 2002, 19). In the **first** stage, one becomes aware of the need of

another. In the **second** stage, an act of care takes place—a caring performance. In the **third** stage, the care receiver acknowledges the care (with exceptions for those who are incapable of acknowledgement) closing the relational loop.

We might describe stage one as an awareness and empathy stage where knowledge acquisition is entangled with imaginative, emotional, and empathetic understanding. I cannot care for that which I have no knowledge, however, although knowledge is a necessary condition of care, it is not a sufficient condition. An empathetic or emotional connection must be present regarding the need of others that will move me to contemplate action, and I must perceive that my caring actions can be effective in making a difference on behalf of the other (Hamington: 2010). I might read an account of a tragic event that leaves a family in Pakistan in need of money for food. Nevertheless, if I am a subsistence college student in North America, my empathy may not motivate action, as I do not perceive that I have the wherewithal to make a difference. In such circumstances, no caring performances (described as stage 2) take place. The actor must believe that they can effectively care or they may not act, even if they have a caring disposition. Note that I take exception with one aspect of Noddings' first stage in terms of awareness of need. A performative approach to care need not be only reactive. One can give care without a clear present need. In other words, care can be pro-active. A care-giver can anticipate needs or identify needs that the one cared for does not recognize as a need or simply act out of caring for the individual without any real expressed need. Nevertheless, even preemptive caring requires awareness and knowledge of the context of the one-cared for.

The notion of caring as an action is nothing new as many theorists have associated care with labor and practices (Bubeck 1995; Engster 2007; Fineman 2004; Held 1993; Noddings 2002; Robinson 1999; Ruddick 1989; Sevenhuijsen 1998; Tronto 1993; White 2000). A

performative approach is consistent with practice-based theories but emphasizes the public and therefore political nature of care. When attended to, the caring performance creates new knowledge about caring that can influence future acts. Because caring involves a responsive act on behalf of the other, it always exists in an autopoietic feedback loop. Every action results in a response that is a moment of learning about care. So if I am responding to the pain of another who has just experienced a racist act, my first action will elicit a response (stage 3) that may result in a second action on my part and so forth. If I am attentive, my efforts at caring actions are opportunities for learning that can refine my response and perhaps help me in future responses. In addition, the caring act also takes place in a social and political milieu that is negotiated. We bump up against norms of behavior. A skilled carer has developed the habits and abilities to be open to the possibility of a caring action. Caring entails openness to the possibility of personal disruption, risk, and emotional involvement—in other words, an action that some people are not skilled in doing or acidulously avoid. Accordingly, caring performances are also a form of inquiry. Caring involves positive actions done in the context of attunement to the other that inform growth, learning, and adjustment. For example, one might discover a homeless individual on the street needs food and one might share their leftover lunch with them. This performance of care is morally praiseworthy to a point. However, such caring performances lay the groundwork for potential further inquiry. One might learn that sharing lunch does not materially alter this person's situation beyond the short term but one has it within their power to make a significant difference in their life. Thus, caring has the potential to beget more caring. One might learn from further inquiry that policy changes could help the homeless person they have gotten to know and others like her or him. Additional performances of care are made possible. Every conversation or encounter will not necessarily lead to caring actions, but they

have the potential to. Rich interpersonal interactions marked by care provide important knowledge bases for political action. A high-profile example occurred in 2013 when Ohio senator Rob Portman changed his position on same-sex marriage after his son came out as gay (Portman). In the lead up to his change of heart, Portman did not likely have any new compelling statistical or scientific knowledge, but he did have the disruptive knowledge that stems from a caring relationship.

Stage three of a caring phenomenology can be described as part of an autopoietic feedback loop in the ongoing trajectory of care. As Noddings describes, “In care ethics, our obligation rarely ends with a justified decision or act. Life goes on after the decision, and we must tend to the relations we have established” (Noddings: 2010, 82). This is another way in which care ethics is different than traditional normative approaches to ethics: primacy is given to relationships over individual acts. As political animals, humans engage in self creation as theatre: a performance intended to ingratiate others and garner power. Similarly, a performative theory of care has an element of self creation but not as a pejorative performance intended as superficial show for others but rather as a self styling that integrates politics, ethics, and ontology. German performance theorist Erika Fischer-Lichte describes the transformative power of performance as emerging from its autopoietic potential. *Autopoiesis* describes regenerative systems that transcend subject/object dichotomies by being both producer and that which is produced in a process of self creation. Accordingly, caring performances are autopoietic in that acts of care that characterize the relationship also contribute to the identity of the participants.

A number of theorists have explored aspects of autopoiesis that are helpful in providing insight into care theory. Late in his career Foucault made a fascinating turn to exploring ethics in light of ontology through what he described as “technologies of the self,” one of which being

“care for the self.” Foucault describes, “the most certain of all philosophical problems is the problem of the present time and of what we are in this very moment” (Foucault: 1982, 785). Specifically, Foucault describes the “care for the self” as a self cultivation that is the foundation for ethics and the basis for political engagement (Bernauer and Rasmussen: 1987, 5-7). Although no one will characterize Foucault as a feminist care ethicist, his insights into the care of the self have relevance to an expansive theory of care as embodied and performative. For Foucault, philosophy should support self discovery. The autopoietic nature of care-as-performance is exhibited in the manner in which caring defies being captured in traditional categories of philosophical functionality. Entangled in the ethical dimension of caring performances are identity formation, epistemology, and aesthetics. Caring and knowledge production are inseparable and mutually motivating. Knowledge acquisition is a prerequisite of care and inquiry is often driven by care (Dalmiya: 2002). As mentioned earlier, I cannot care about that for which I do not know. On the other hand, when I care about someone, I am driven to learn more about them. Furthermore, the efficacy of care requires information or suffers from the possibility of being misguided or poorly offered.

Every performance of care implicitly or explicitly contributes to one’s identity as a carer—an internal autopoietic corollary to external autopoiesis. Because the performances are public, they leave physical and perceptual imprints on others and ourselves. The frequency and quality of care performances inform self-identity as well as socially inscribed identity. One method of describing this sense of identity formation is through an open-ended notion of habit instantiated in the body as described in the work of Dewey. For Dewey, “Habit means special sensitiveness or accessibility to certain classes of stimuli, standing predilections and aversions, rather than bare recurrence of specific acts. It means will” (Dewey: 1991, 32). The association of

habit and will is counterintuitive but for Dewey, muscle memory works in conjunction with mental processes to allow caring performances to evolve and grow. Why are some people referred to as caring? Because their actions reinforce this identity and to some extent they have accepted or internalized caring as part of who they are.

These caring performances of body and will are political in their implications for influence. Performative theory as Butler has developed it lies at the nexus between autonomy and social construction. Fischer-Lichte describes the artist/performer as “a subject engaged in a continuous process of determining and being determined” (Fischer-Lichte: 2008, 164). Accordingly, our performances are often dictated by political norms and practices but we can resist social forces, as in Butler’s analysis of drag performances as subverting gender identity (Butler: 1990, 186-9). Similarly, care performances are in part informed or limited by social norms but individuals can choose to transgress social expectations. Transgressions—caring more than we ought to—can seep into our identity and become easier with repetition. Such transgressions of the norms of care might be referred to as supererogatory care. Of course, what constitutes supererogatory acts is a relative concept. Someone who takes the risk to stop to help someone in distress at the side of a country road might decide to do it again if they perceive they effectively administered care (as well as cared for themselves). Without explicit affirmation, that person might think of themselves as “someone who stops to help strangers.” Note that a performative notion of identity formation is always relational. Human identity as a function of relationship is consistent with feminist ontological notions of human beings as “second persons” (Baier: 1985, 84; Code: 1991, 85) As second persons, we cannot speak of identity outside of the existence of others. Our dynamic identity is cognitively and physically a relational construct

(Gallagher: 2005). As such, the autopoietic feedback loop in our relationships and transactions with others creates and recreates our self concept in both subtle and profound ways.

A performative theory of care described above is a complex integration of philosophical categories but that level of intricacy matches the human condition. Identity, epistemology, and morality are each vast areas for intellectual exploration but they are also concurrently manifested in embodied human beings who are interconnected through their caring relationships.

Expanding the Circle of Care

Once the detailed theoretical discussions [about ethical theories] get under way, far too often the radical potential of care ethics dwindles as the goal becomes one of replacing a masculinist moral theory with a feminist one instead of appreciating the weakness of the entire traditional ethical enterprise (Bailey: 2012, 185).

The contemporary enthusiasm for care among political theorists portends an exciting infusion of relational and contextual concern into political theory and analysis. However, I suggest that if we don't recognize the significant paradigm shift that care represents there is a danger of limiting the potential of care to radically alter the moral and political landscape. In viewing care as performative, I have endeavored to emphasize how caring has transformative implications for ontology and epistemology as well as morality. Care transcends the dualisms of body and mind, self and other, will and social construction, personal and political. When I care,

it is an act of will, a choice, but always a choice mediated by my relational self in a social/political context. In this section, I suggest that political thinking about care should emphasize expanding rich interpersonal experiences with diverse others to expand the capacity of care over policies of responsibility or compliance.

One of the implications of existentially tying care to identity is that robust forms of care cannot be authentically mandated or perhaps more precisely, cannot be comprehensively mandated. A significant element of care is organic and comes from individual choice in response to circumstances. The psychological dimension of caring cannot be ignored. Accordingly, the language of “duties” “responsibilities” or “rights” to care are inadequate in guaranteeing that care is offered with adequate depth and quality just as laws against racist activity do not guarantee that racism will not occur. Legalistic approaches are positive steps and have important symbolic value but do not equate with holistic interpersonal commitment. At times, such mandates can even foster resistance to authentic care when hearts are not changed. Abstract and external normative approaches can lead to the game playing described earlier. If I have been assigned a responsibility to care, it raises the specter of my relationship to the limitations of that caring—where does my responsibility end? A performative theory of care makes it clear that one cannot simply replace traditional moral language for the language of care. Even as care has postmodern elements, it is a reconstructive theory rather than a deconstructive one. Care offers an empowering method for understanding how identity is wrapped up in knowledge acquisition and morality without falling into the modernist trap of fixed and universal classifications. However, unlike postmodern theory, care claims a tangible moral ideal. A performative theory of care represents a paradigm shift for philosophical ethics in its integration of ontology, epistemology, and ethics. It suggests a reconstructive approach to human be-ing

including a moral identity that acknowledges liminality, relationality, and uncertainty while simultaneously providing a framework and trajectory for meaning and action rather than nihilism or subjectivism.

Perhaps the most significant question in care theory is a political one: how do we increase the circle of care? How do we lift the social norms for caring and foster care for those unfamiliar to ourselves, transcending social categories and stereotypes? Given contemporary systems of communication, the availability of information on those who need care is ubiquitous. Duties and principles may help as significant markers of social commitment but the real radical political potential of care is internalizing caring as a moral ideal that informs our self as well as our relationships. If we take the suggestions of this chapter seriously that care has epistemological and personal aesthetic qualities as well, then expanding the circle of care requires the kind of “world traveling” suggested many years ago by Maria Lugones (1987). Lugones advocated moving past arrogant perception by humbly listening and spending time with others to build an understanding, not by erasing difference but by earnestly learning about and inhabiting that difference to the best of our ability. This requires rich and often proximal experiences. Lugones writes, “We are fully dependent on each other for the possibility of being understood and with this understanding we are not intelligible, we do not make sense, we are not solid, visible, integrated, we are lacking. So travelling to each other’s “worlds” would enable us to *be* through *loving* each other” (1987: 8). Lugones uses the language of love rather than care but the implications are similar: knowing and care are intertwined. Accordingly, a more inclusive politics of caring cannot ignore what we know and who we are.

Barbara Thayer-Bacon frames what Lugones is driving at in terms of a new way to think about connected knowledge. Rather than viewing care as a subjective and touchy-feely emotion,

Thayer-Bacon claims that it is the basis for a more robust notion of critical thinking: “Connected knowing is based on an epistemology that emphasizes truth as something that emerges through care” (2000: 79). For Thayer-Bacon, care represents habituated performances of listening for the purpose of sympathetic understanding. She explains:

We must care in order for us to be willing to reason from others’ points of view and in order for us to have the sensitivity to hear their voices (for we know now they must tell us their points of view, that we cannot assume to know them any other way). Caring is an effort to attempt to believe others, in order to be sure we understand, before we move to critiquing the others’ views. The effort to believe in order to understand causes us to be willing to suspend our own views and be open to others. What we care about is what we choose to attend to, what we choose to be engrossed with and be receptive to. If we do not care about others we will not listen to their voices, and we will not be able to enlarge our thinking” (Thayer-Bacon, 2000: 106).

What Thayer-Bacon and Lugones point to is how care can serve as a reconstructive theory of being. Rather than an overarching and closed metanarrative, care offers a malleable integration of morality, knowledge, and identity consistent with the notion that it includes, “everything that we do to maintain, continue, and repair our ‘world’ so that we can live in it as well as possible” (Fisher and Tronto, 1990: 40). What I mean by reconstructive here is that care can accommodate the deconstructive analysis of postmodernism which challenges categorical thinking that can separate self from others, identity from morality, subject from object, etc. However, rather than concluding in a deconstructed state, care provides an organizing trajectory around attentive/responsive living.

World traveling and adopting care as a moral ideal can be interpreted as requiring a more assertive effort at learning about others in order to build the resources to care in a process that transforms who we are and what we know. For example, talking to strangers in more than superficial ways or venturing to comprehend cultures, religions, and lives lived much differently than our own. The arts and humanities can be of great assistance in this regard but so to must be rich experiences of one another. How often does one's political disposition toward the contemporary issues of same-sex marriage, homelessness, and undocumented immigration turn on, or is transformed by, direct knowledge of someone identified by these circumstances? The suggestion here is that the performance of care does not begin and end with a particular act of kindness. There must be a dramatic rehearsal, a habituation of going out and learning about others in varied, humble, open, and meaningful ways—world traveling—so that our hearts and minds are prepared for caring in our cosmopolitan world. Social policies and education systems that foment caring opportunities and reflection upon care may move what might be considered supererogatory acts of care according to existing social norms to mainstream or ordinary acts of care. Understood as performative, care requires a vastly different method for teaching ethics that is much more experiential and engaged and attuned to the body as well as one another than is currently the standard (Hamington: 2012). If one accepts the premise that care is indeed performative and embodied, then teaching ethics would engage cognitive, emotional, and physical aspects of caring, not just learning and understanding normative structures.

The people of the town of Le Chambon not only did not think of their helping as part of an ethical game or equation, they did not think much of it as moral heroism at all. Magda Trocmé, as quoted by Philip Hallie queried, "How can you call us 'good'? We were doing what had to be done. Who else could help them? And what has all this to do with goodness? Things

had to be done, that's all, and we happened to be there to do them. You must understand that it was the most natural thing in the world to help these people" (Hallie, 1994, 20-21). The members of this community were not particularly religious or well educated but they had enlarged their moral inclusiveness for care such that they did not perceive it as moral exceptionalism. In her contemporary study of heroes of compassion during the Holocaust, Kristen Renwick Monroe corroborates Hallie's findings and concludes that identity is the linchpin of exceptional moral activity: "The rescuers' sense of who they were, and how they saw themselves in relation to others, so limited the range of actions the rescuers perceived as available that they literally did not believe they had any other choice than to help Jews. Identity played such a critical role in shaping their treatment of others that their extraordinary actions seemed matter-of-fact, unremarkable, and unnoteworthy to the rescuers themselves" (2004:188). Renwick Monroe makes it clear that moral rules are not adequate to motivate ethical action on behalf of unknown others but one's moral identity is. She claims that identity has the power to "shape our most basic political acts, including our treatment of others. How we see ourselves, and how we see others in relation to ourselves, has profound implications for our behavior. This often works in subtle and unconscious ways" (2004: 257). Renwick Monroe does not use an explicit care theory lens of analysis, but she supports the relational ontological claim embedded in a performative theory of care and the notion that care is a reconstructive theory of being. We cannot disentangle moral and political actions from considering who we are and what we know.

Our contemporary political journey to widening the circle of caring inclusion is likely to take a different path than the people of Le Chambon. Perhaps we can eschew the gaming of politics and ethics for intentional life choices that provide rich appreciation of the diverse contexts of others, and ultimately ourselves, in body, mind, and action.

Works Cited

- Aalberg, Toril, Jesper Strömbäck, and Claes H. de Vreese, (2011). 'The Framing Of Politics As Strategy And Game: A Review Of Concepts, Operationalizations And Key Findings' 13(2):162-178.
- Austin, J.L. (1962). *How To Do Things With Words*. Cambridge: Harvard University Press.
- Baier, Annette (1985) *Postures of the Mind: Essays on Mind and Morals*. Minneapolis: University of Minnesota Press.
- Bernauer, James, and David Rasmussen, eds. (1987), *The Final Foucault*. Cambridge: MIT Press.
- Bubeck, Diemut (1995). *Care, Gender, and Justice*. New York: Oxford University Press.
- Butler, Judith (1988). 'Performative Acts and Gender Constitution: An Essay in Phenomenology and Feminist Theory,' *Theatre Journal*, 40(4): 519-531.
- (1990). *Gender Trouble: Feminism and the Subversion of Identity*. New York: Routledge.
- Caputo, John. (1993) *Against Ethics: Contributions to a Poetics of Obligation with Constant Reference to Deconstruction*. Bloomington: Indiana University Press.
- Ching, Marvin K.L. (1993). 'Games and Play: Pervasive Metaphors in American Life.' *Metaphor and Symbolic Activity* 8(1): 43-65.
- Code, Lorraine (1991). *What Can She Know? Feminist Theory and the Construction of Knowledge*. New York: Cornell University Press.
- Dalmiya Vrinda (2002). "Why Should A Knower Care?" *Hypatia* 17(1): 34-52.
- Dewey, John (1980 [1934]) *Art As Experience*. New York: Perigee Books.
- (1988 [1922]) *Human Nature and Conduct: An Introduction to Social Psychology*. Carbondale: Southern Illinois University Press.
- Engster, Daniel (2007). *The Heart of Justice: Care Ethics and Political Theory*. New York: Oxford University Press.
- Fineman, Martha (2004). *The Autonomy Myth: A Theory of Dependency*. New York: The New Press.

- Fischer-Lichte, Erika (2008). *The Transformative power of Performance*. Trans. Saskya Iris Jain, New York: Routledge.
- Fisher, Berenice, and Joan C. Tronto (1990). 'Toward a Feminist Theory of Caring.' In *Circles of Care*, ed. E. K. Abel and M. Nelson. Albany: Suny Press.
- Foucault, Michel (1982). 'The Subject and Power,' *Critical Inquiry* 8(4): 777-795.
- Gallagher, Shaun (2005). *How The Body Shapes the Mind*. New York: Oxford.
- Gilligan, Carol (2011). *Joining the Resistance*. Cambridge, UK: Polity.
- Glenn, Evelyn Nakano (2000). 'Creating A Caring Society,' *Contemporary Sociology*, 29(1):84-94.
- Gozzi, Raymond Jr. 'Is Life A Game? Notes On A Master Metaphor.' *ETC: A Review of General Semantics*, 47(3):291-293.
- Hallie, Philip (1994). *Lest Innocent Blood Be Shed: The Story of the Village of Le Chambon and How Goodness Happened There*. New York: Harper Perennial
- Hamington, Maurice (2009). 'Business is Not a Game: The Metaphoric Fallacy,' *Journal of Business Ethics*, 86(4): 473-484.
- (2004). *Embodied Care: Jane Addams, Maurice Merleau-Ponty and Feminist Ethics*, Urbana, IL: University of Illinois Press.
- (2012). 'A Performative Approach to Teaching Care Ethics: A Case Study,' 23(1):31-49.
- (2010). 'The Will to Care: Performance, Expectation, and Imagination' *Hypatia* 25(3):675-695.
- Hankivsky, Olena (2004). *Social Policy and the Ethic of Care*. Vancouver: UBC Press.
- Held, Virginia (2006). *The Ethics of Care: Personal, Political, and Global*. New York: Oxford University Press.
- (1993). *Feminist Morality: Transforming Culture, Society, And Politics*. Chicago: University of Chicago Press.
- Kittay, Eva Feder (2013). "The Body as the Place of Care" in *Exploring the Works of Edward S. Casey: Giving Voice to Place, Memory, and Imagination*. New York: Bloomsbury Publishing.

- Kockelmans, Joseph J. (1967). "Some Fundamental Themes of Husserl's Phenomenology." In Joseph J. Kockelmans, ed., *Phenomenology: The Philosophy of Edmund Husserl and Its Interpretation*. New York: Anchor.
- Lakoff, George, and Mark Johnson (1980). *Metaphors We Live By*. Chicago: University of Chicago Press.
- Lugones, Maria (1987). "Playfulness, "World"-Traveling, and Loving Perception. *Hypatia* 2(2): 3-19.
- Noddings, Nel (2010). *The Maternal Factor: Two Paths to Morality*. Berkeley: University of California Press.
- (2002). *Starting at Home: Caring and Social Policy*. Berkeley: University of California Press.
- Oliner, Samuel P. and Pearl M. Oliner (1988). *The Altruistic Personality: Rescuers of Jews in Nazi Europe*. New York: The Free Press.
- Portman, Rob (2013). "Gay Couples Also Deserve Chance To Get Married." *The Columbus Dispatch*. March 15. <http://www.dispatch.com/content/stories/editorials/2013/03/15/gay-couples-also-deserve-chance-to-get-married.html>
- Renwick Monroe, Kristen (2004). *The Hand of Compassion: Portraits of Moral Choice during the Holocaust*. Princeton, NJ: Princeton University Press.
- Rifkin, Jeremy (2009). *The Empathetic Civilization: The Race to Global Consciousness in a World in Crisis*. New York: Tarcher.
- Rigney, David (2001). *The Metaphorical Society: An Invitation to Social Theory*. Lanham, MD: Rowman and Littlefield.
- Robinson, Fiona (2011). *The Ethics of Care: A Feminist Approach to Human Security*. Philadelphia: Temple University Press.
- (1999). *Globalizing Care: Ethics, Feminist Theory, And International Relations*. Boulder: Westview Press.
- Ruddick, Sara (1989). *Maternal Thinking: Toward a Politics of Peace*. New York: Ballantine.
- Sevenhuijsen, Selma (1998). *Citizenship and the Ethics of Care: Feminist Considerations on Justice, Morality, and Politics*. New York: Routledge.
- Shusterman, Richard (2008). *Body Consciousness: A Philosophy of Mindfulness and Somaesthetics*. New York: Cambridge University Press.

- (2012). *Thinking through the Body: Essays in Somaesthetics*. New York: Cambridge University Press, 2012.
- Smart, J.J.C. (1949). 'The River of Time,' *Mind* 58(232) (October, 1949): 483-494.
- Taylor, Charles (1989). *Sources of The Self: The Making of Modern Identity*. Cambridge: Harvard University Press.
- Thayer-Bacon, Barbara J. (2000). *Transforming Critical Thinking: Thinking Constructively*. New York: Teachers College Press.
- Tronto, Joan C. (2013). *Caring Democracy: Markets, Equality, and Justice*. New York: New York University Press.
- (1993). *Moral Boundaries: A Political Argument for an Ethic of Care*. New York: Routledge.
- Walker, Margaret Urban (1998). *Moral Understandings: A Feminist Study in Ethics*. New York: Routledge.
- Weir, Allison (2013). *Identities and Freedom: Feminist Theory Between Power and Connection*. New York: Oxford.
- White, Julie (2000). *Democracy, Justice and the Welfare State: Reconstructing Public Care*. University Park: Pennsylvania State University Press.

¹ Oliner and Oliner studied the rescuers of Jews during Nazi occupation of Europe and concluded that empathy and concern for other others is “the most common way” that rescuers apprehended moral claims which lead to their actions (1988:258).

² I am using the notion of autopoiesis here to conceptualize humans as recursive and regenerative systems dynamically reflecting both continuity and ongoing self creation.

³ In addressing the notion of moral identity, it appears that I am characterizing care theory as a type of virtue ethic. Indeed, care has a great deal in common with virtue theory in terms of deemphasizing the significance of individual acts. However, I agree with Noddings (2010:125-137) who recognizes the similarities with virtue ethics but finds care to focus more on the relationship than individuals. Virtue theory does not challenge liberal notions of isolated individualism the way that care theory does. Care does not neatly fit into the established categories of moral theories although it holds much in common with many of them.