

Careful Thinking Episode 6 Transcript

[00:08] **Martin Robb:** Hello and welcome to this episode of *Careful Thinking*, a new podcast exploring ideas about care. I'm Martin Robb, and I'm the host of the podcast. *Careful Thinking* is inspired by a belief that thinking critically about care can both deepen our understanding and help to improve the day to day practice and experience of care. In each episode of the podcast, you'll hear an in-depth conversation with a writer, researcher, or practitioner at the cutting edge of current thinking about care. For this episode, I'm really pleased to be joined by Maurice Hamington. Maurice is Professor of Philosophy and Affiliate Faculty in women, gender, and sexuality studies at Portland State University in Oregon in the United States. He's one of the world's leading authorities on care ethics and was a founding member of the International Care Ethics Research Consortium. Maurice is the author or editor of 16 books, including the ground-breaking *Embodied Care: Jane Addams, Maurice Merleau Ponty, and Feminist Care Ethics*, published in 2004, *Care Ethics and Political Theory*, co-edited with Daniel Engster from 2015, and *Care Ethics and Poetry*, co-written with Ce Rosenow, from 2019. Maurice's most recent book, *Revolutionary Care: Commitment and Ethos*, was published just last month, and I'll put details of all these publications and of any others discussed in the episode in the show notes. I was first introduced to Maurice's work a few years ago in the course of my research on fatherhood and men's care for children, when I read his beautiful description of hands on care for his young daughter in a chapter for the edited collection *Revealing Male Bodies*. I then had the pleasure of meeting Maurice at the inaugural conference of the Care Ethics Research Consortium in Portland, which he co-organized and hosted. Maurice and I also worked together on the edited collection *Care Ethics, Religion, and Spiritual Traditions*, which was published in 2022. And I should add that Maurice has been a great supporter of this podcast, suggesting and putting me in touch with potential future guests, so I'm really pleased to have this opportunity to talk to him about his work. So Maurice, a very warm welcome to *Careful Thinking*.

[02:27] **Maurice Hamington:** Well, thank you for that fantastic introduction, and I'm very pleased to be here, and I'm so excited that this podcast exists and what a wonderful job you are doing with it. So it is great to be here.

[02:42] **Martin Robb:** Thank you very much. That's very kind of you. So a question to kick us off, and I always ask this kind of question at the beginning. It's kind of the 'how did you come to care ethics?' question. Now, I see from the CV that you've posted on your personal website, you've had quite a diverse and interdisciplinary academic formation starting off in business studies, then moving over to religious studies and ending up in philosophy. So can you tell us something about that journey and how it led to an interest in care theory and care ethics?

[03:10] **Maurice Hamington:** Yes. I spent, literally, this is not an exaggeration, 20 years in graduate school of various sorts. And my first graduate degree was an MBA in organisational behaviour. And I went to work for some businesses, first non-profit, then for profit. And I have to say, I was a bit intellectually bored. And so, in the evenings, I started working on a Master's degree in religious studies. And my teachers and mentors there were very pro-feminist Catholics, and I got exposure to all kinds of feminist ideas. And then I went on and

got a PhD in religious studies. I dropped my business career. I left business and worked full time on a PhD in religious studies. And while I was there, I took a graduate course in women's theory, women's studies and theory. And one of the books that we read in that class was Carol Gilligan's *In a Different Voice*, and also Nell Noddings' *Caring*. And that was a monumental moment for me, where I became very interested in care ethics. I finished out. I was so inspired that I got a graduate certificate in women's studies while I was getting the PhD in religious studies. And then when I was done with that, shortly thereafter, I worked on a second PhD in philosophy, studying under feminist philosopher Nancy Tuana, where I expanded my interest in care. Now, that's the academic journey. Part of the personal journey was having a daughter, and the one, the aforementioned, the one that you described. I did a little phenomenological analysis of washing her hair and how that communicated care through touch and through comportment, rather than explicit language. And that daughter is now in her early thirties. So it's been - I've been in care ethics for quite some time.

[05:45] **Martin Robb:** That's really interesting. There can't be many people who've got two PhDs, so that's quite impressive. But I also. That story resonates with me because it was our children being born and sort of being involved in their early care, hands-on care, that was part of the journey for me as well, and sort of got me into researching men and men's care for children. Now, you've also, you kind of anticipated my second question, which was, you know, on your website, you describe yourself as a feminist philosopher of care. I know that feminism is a key part of your formation. Now, you've already talked about the academic side of that. So was feminism always important to you or what's been your sort of personal journey as a man as well as a philosopher to feminism.

[06:29] **Maurice Hamington:** I have often thought about writing a memoir, and I'm thinking the title would be something like 'An Unlikely Feminist Care Ethicist', because I grew up in a very patriarchal family and was not exposed to feminist ideas growing up. And, in fact, at school, it is the aforementioned Master's degree in religious studies, where I got my first introduction to feminist thinking. So it was not a big part growing up of. I was very careful about it at first. In my first books, I wrote about myself as pro-feminist because I didn't want to claim that mantle, recognising that I don't know what it's like to live in a woman's body in this world. And I would go to National Women's Studies Association meetings where literally, at the time, I think things have changed, I would be like one of a dozen men and hundreds and hundreds of women there. And it was so funny because colleagues would warn me, oh, you got to be careful, there's going to be lots of angry feminists there. And nothing could be, I mean, further from the truth. There was legitimate anger about patriarchy. But I was treated very well. I was welcomed in. I always found them very stimulating, learned a great deal. And so it was largely an intellectual journey, because the personal journey was one where I didn't have a lot of cues growing up and had to come to recognize it in my relationship with my partner, my wife of 40 years, and with our daughter.

[08:16] **Martin Robb:** That's interesting. Again, I recognized a lot of those aspects of my own journey in what you said. Now, in my introduction, I mentioned your book *Embodied Care*, which was published 20 years ago this year, I think was your first major contribution to the field of care theory, probably still the most cited. I keep coming across references to it. It draws on the ideas of two key thinkers, Maurice Merleau-Ponty and Jane Addams. Taking

Merleau-Ponty first, you describe as the great modern philosopher of the body, and you write, 'the insightful work of Maurice Merleau-Ponty offers rich tools for exploring how the body can ground care;'. So, in brief, if you can, can you say what Merleau-Ponty's philosophy can contribute to an understanding of care?

[09:00] **Maurice Hamington:** Well, I think as I was coming into feminist philosophy and feminist thinking, I saw that there was a body of literature about embodiment in feminist studies. There's fat studies and all kinds of interesting analysis of beauty and so forth. And then we have this development by a number of feminist scholars of this idea of care and I didn't see any crossover into thinking about embodied care and the body's role in care. And so Merleau-Ponty, a phenomenologist, a student of Husserl, who is known as kind of the great phenomenologist of the body, describes a lot of the mechanisms of the body, including perception, movement, attention, and all of these, I think, play an important role in understanding the physicality of care. And from Merleau-Ponty's observation, I make the kind of flippant remark that the body is built to care, not built like a machine, but that we have these caring capacities, these natural kind of mechanisms that allow us to care. That doesn't mean it's a foregone conclusion. This is not a kind of determinism that we will all be great cares, but we all have capacities to care. And I think that Merleau-Ponty's analysis is one way at getting at it. I should say I laugh at myself a little bit, because that was really kind of an outgrowth of my dissertation. And I think it's one of those, like, you're an early scholar and you try to put too many things in the title. And I think if I wrote it today, it would have maybe a tighter title. But indeed, I continue to think that Merleau-Ponty and his idea of touch and the reversibility thesis and so forth are important for thinking about care capacities.

[11:23] **Martin Robb:** Yeah. And one way in which you draw on his thinking in the book is, which I found interesting, was your description of care as habit. You write, 'for Merleau-Ponty the body captures meaning in the form of habit. Habits are repositories of knowledge.' And again, you include another example of caring for your young daughter. And you say, 'we learn the habits of caring for others by being cared for ourselves'. And this part of the book really resonated with me, both as a parent, but also recalling my research on men and care. And I wonder if you'd agree with me that traditionally, men have been relatively deprived of opportunities to develop those embodied habits of care. And if we want to encourage the development of caring masculinities, we need to provide boys and men with more opportunities to learn what you call the behaviours that exhibit care.

[12:14] **Maurice Hamington:** Yes, I think it's very important. In fact, I include a chapter in my latest book on this very topic. bell hooks has said that feminism is for everybody, and it's absolutely true. We think about how patriarchy and certain forms of masculinity, sometimes referred to as toxic masculinity, have limited the - I mean, have oppressed women, but it has also limited the opportunities for men. Men suffer under patriarchy as well. Yes, they accrue certain kinds of privileges, but they're also deprived of a full emotional life if they buy into certain kinds of masculinity. And there's been your work, and others have done some really great analysis of this kind of thing. And I think it is important if we're going to imagine a more caring world in the future. If there's going to be a revolution of care, part of it is going to be bringing along the male half of the human race into valuing care at a higher level.

[13:31] **Martin Robb:** Yeah. And just returning to that chapter that I mentioned at the beginning, a father's touch, in the *Revealing Male Bodies* collection. You say 'men, in their roles as fathers, have for too long been socialised to focus upon issues of duty and justice and not enough on care. The moral revolution I envision springs from the changing ways men's bodies relate to their children.' And as you say, you return to this topic in a chapter more than two decades later in *Revolutionary Care*, on resisting toxic masculinity. And you write, 'some might argue that masculinity is evolving for the better regarding relational sensitivity, but that evolution is slow and inconsistent'. So where do you think we are now in terms of encouraging the development of caring masculinities? Have things changed in 20 years?

[14:17] **Maurice Hamington:** Oh, they've definitely, they definitely changed. I think there are - there is greater variety in masculinity as it is portrayed in the culture and media. And I think the standards of masculinity have moved in a more caring kind of direction. The expectations of men in relationship are higher, I think, in terms of care. But as I said, that's not a, that's not a linear progression. It's not an absolute. There are lots of pockets - we see manifestations of toxic masculinity in world relations, where the response is one of an eye for an eye, a tooth for tooth, and not really always thinking about the relationships involved and what war and violence does to people. So I think we've definitely made progress, and there's a long way to go. Both are true.

[15:25] **Martin Robb:** Yeah, absolutely right. If I could just ask a follow up to that. You said that if you were rewriting your book *Embodied Care* now, you'd write it very differently. And in that chapter in *Revolutionary Care* on toxic masculinity, you are quite self-critical of your earlier analysis of caring for your daughter in the *Revealing Male Bodies* chapter. And you say 'my phenomenological analysis did not problematise cultural, gender and class assumptions'. Don't you think you're being rather harsh on your younger self there?

[15:59] **Maurice Hamington:** I think, you know, my younger self was doing the best that he could with the tools that he had at the time. And. But what I want to emphasise in this new book is, you know, is care as a methodology, as a process of improvement and humility, is something I talk about a lot in there, and I want to practise it myself. So there's, I have several footnotes about myself and how I think I can be criticised for this and that. And even with the - when my daughter was little and I was giving her a bath and washing her hair, I didn't problematise my class situation, for example, that I had the time to do that. I wasn't holding down two or three jobs, and I was available for that. That's what I'm getting at. It's not so much that I'm saying I was a bad person then. It is more of, I think we have to continually improve and be self-reflective if we want to be better carers. And part of that is recognising privilege. And I should just say, right now I feel like my entire career is a combination of privilege and luck. Yes, I've worked hard, but lots of people work hard. But I present as a white male in a society that gives me a lot of privileges. And I've been fortunate to be at the right place at the right time. I feel fortunate to be at this moment in care ethics. This is like the golden age of care ethics. If I had been talking like I am now about care ethics 30 years ago, I would have been very marginalised. It is now where people are recognizing how important relationality is and valuing it. So my comments about myself there, I think I'm trying to practise what I think is part of the approach to being a good carer.

[18:18] **Martin Robb:** Just one more question about embodied care before we move on to your more recent work. So we've mentioned Merleau-Ponty, but in the second half of the book, you draw on the life and work of Jane Addams in writing about the development of social habits of care. And you've also written extensively about Addams elsewhere. You wrote a book on her social philosophy. You edited a book on feminist interpretations of her work. And just last year, you co-edited the Oxford Book of Jane Addams. So she's obviously a key figure for you. But I think it's true to say that she's probably a less familiar figure outside the United States. So could you perhaps give us a brief overview of her life and work and explain why she might still be relevant for contemporary thinking about care.

[19:00] **Maurice Hamington:** Sure thing. I'll try to be brief about this. Jane Addams lived from 1860 to 1935, and she was the first woman from the United States to win the Nobel Peace Prize. She was part of the Progressive Era, and embedded in the Progressive Era was a lot of caring practices. There was naivete, maybe too much of a belief in the manifest destiny of American and western European progress. So there's lots of things to be critical of it. There may be inherent racism as well, and eugenics, but they did - there was a group of people that tried to improve society. They had a series of social settlements in the United States, over 400 of them, where they practiced proximal care. They would go into the neighbourhoods, poorer neighbourhoods, immigrant neighbourhoods, and try to be good neighbours to people and meet the needs, not with necessarily a plan, not necessarily with, for example, as religious missionaries or going to do certain kinds of things, but respond to the needs of the area. And Jane Addams did this in Chicago during one of the biggest influxes of migrants into the United States. She became eventually a celebrated person in the United States, somebody who, for example, influenced Eleanor Roosevelt and other important figures of her day. John Dewey credits her with many of his ideas. William James also praised her. So she was an influential person. And when she passed away in the 1930s, she was one of the most famous people in the United States, and actually around the world, too, because of her international peace work. She desperately tried to stop World War One and to bring people to peace there. And she knew activists, peace activists from all over the world at the time. And I think, Martin, you're right. She has been forgotten. She's actually been forgotten largely in the United States as well and internationally, but not entirely. I'm going to be going to Japan for a month to talk about care ethics in November as part of a Fulbright trip. And I've already been told there is a Jane Addams scholar there in Japan who wants to meet with me and talk about Jane Addams. So she left a legacy of a dozen books and over 500 articles. And the reason I brought her into this book is because while Merleau-Ponty gave me kind of the phenomenological, theoretical understanding of the body, she really was the activist. She brought the personal to the political. The day-to-day embodied interaction that she had in her neighbourhood in Chicago - and she extended that politically in her writing and in her peace activism to affect the world. And so when we talk about, like, revolutionary care, Jane Addams would be an example of somebody who helped foster a revolution herself. So I think she's - they're really contrasting figures, Merleau-Ponty and Jane Addams. And yet, when we come to a concept as wide as care, I think they both have contributions to make to our understanding.

[23:01] **Martin Robb:** That's really interesting. Thank you. And I think that drawing on the ideas and the life and example of an activist is something you carry through into the new

book. So we'll come back to that in a moment. So, in *Embodied Care*, you have a whole chapter on care and the imagination. And you write, 'although care is grounded in embodied experience, it transcends the body through the imagination'. And you return to the subject of care and imagination in your book, *Care Ethics and Poetry*, co-written with the poet and educator Ce Rosenow. So what is the connection between care ethics and imagination? How can the experience of poetry be, to use your words in the book, a vital part of moral development?

[23:43] **Maurice Hamington:** Well, imagination, I think, is probably an unsung hero in philosophy and ethics, and particularly in the ethics of care, because when we care for somebody, we cannot inhabit their minds. We don't know with certainty what they're going through. We can engage in inquiry and learn and try to be closer in understanding, but we always have to take something of an imaginative leap. And so when you think about a concept like empathy, empathy is inherently imaginative. Right. I am trying to understand deeply what somebody else is experiencing and going through, and I have to use the imagination. Furthermore, if I'm going to respond to that person, I have to imagine possible outcomes. If I do this, this might happen. If I do this, this might happen. And. And so imagination becomes crucial if we start with the body. And I should say that my work with Merleau-Ponty and embodied care is not an attempt to just take the other side in a mind-body dualism. For Merleau-Ponty, it was mind-bodies. They were one, integrated and the same. And so we have ideas, like muscle memory and so forth. And so when we talk about an embodied imagination, I start with my experience in the body, that first experience of care. And as I get - I think about more sophisticated kinds of care, as I might think about practices and policies - I draw from my metaphors of my own embodied experience and imaginatively extend those out. So imagination is, I think, crucial to care. And that might be a great subject for a book, actually, is just to focus in on care and imagination, because I don't think imagination gets much play. I have to credit one of my teachers, Mark Johnson, a philosopher at the University of Oregon, has written extensively about the moral imagination, and that also influenced my thinking about how important imagination is in thinking about care. Oh, and you ask, okay, to your question about poetry. Okay, so the arts is where we're always taking imaginative leaps, right? Whether we're watching a performance or reading a poem, poems are, I think, just an amazing art form where somebody takes an economy of words and yet is able to probe emotions and get you to feel and to understand emotions in, you know, even in a visceral sense. And it is, I think that's a kind of training. You know, we talked about the body has the capacity to care, but it has to be exercised like any embodied skill, any embodied habit, it. It has to be attended to and exercised in order for you to become more proficient at it. And I think that, you know, poetry is one example of developing your emotional capacity, your emotional intelligence, your relational intelligence, so that you can better care. It's not, you know, it violates neoliberal sensibilities, because it's not like one to one. It's not like I'm going to read a poem and then suddenly I'm going to be a better care. But I'm talking about developing habits and practices of imagination that can pay dividends. And so when we talk about the decline of the arts and how they're not valued in society and how they're not funded as well as they used to be, this is extremely problematic for developing some of those caring skills. And so we're trying to bolster poetry in this one particular attempt.

[28:21] **Martin Robb:** Yeah, I found it a fascinating book. I mean, yoking together two subjects that are not normally thought of together, care ethics and poetry. But the connections that you and your co-author make are surprising and enlightening. And as you say, it kind of plays into one of the directions that care ethics is going in. And I know you're involved in, which is exploring more broadly this connection between care ethics and the aesthetic. And I know that you're on the steering committee for a fascinating project on that in Manchester, here in England, and that the next international conference of the Consortium will focus on that next year in Utrecht. So maybe care ethics and poetry was the kind of initiator of that trend. It's sort of - yeah, it's a fascinating connection between things that people wouldn't normally think of bringing together, I think. Can we turn now to another connection, which is the connection between care ethics and politics, which is obviously a really important thread in your work, up to and including *Revolutionary Care*. And in 2015, you co-edited that book on *Care Ethics and Political Theory* with Daniel Engster. And your own contribution to the book is a chapter entitled 'Politics is not a game: the radical potential of care'. And one of the things I like about your writing, Maurice, is the way you always ground discussion of what could be abstract ethical ideas in concrete stories. And in this case, you build a chapter around the story of how the inhabitants of a French town in World War Two saved the lives of thousands of their Jewish neighbours. And you write, 'the story of the people of Le Chambon reinforces that caring is simultaneously deeply personal, relational, and political'. In what way does that particular story show that care is political? And how can care transform the way we think about politics and political ethics?

[30:12] **Maurice Hamington:** Well, here we have a little town that didn't consciously make an effort to be politically caring. In fact, in interviews, they describe what they did as not extraordinary. They were just doing what they would normally do for one another. But it was extraordinary circumstances. You have the Nazis looking for the Jews. And so this is that relationship between the personal and the political. This is, on the one hand, we can think about all the things that we're doing in caring as just those little things we do in relationship. But they can add up, and they can actually have a kind of political push to them. And this is, they wouldn't have thought of what they were doing as a kind of a political resistance at first. But it was in terms of the care. I think what I really wanted to get across in that article was we need to get away from the game metaphors in society. A neoliberal society likes to treat things like games. Games have clear rules and outcomes, and they're nice and neat. We begin a game, we end a game, we win a game, we lose a game. But we have this tendency to apply those metaphors. And so I had long ago written an article that business is not a game for a business ethics journal. And here I was talking about politics not, not being a game. And that's really hard because we treat it like, you know, the elections are victories and losses. The funny thing was, just before this podcast, I was listening to an interview with Stacey Abrams in Georgia, and she was saying the same thing, that we treat politics too much like a game. But here's why it's not a game. The stakes are too high, the results impact people's lives. It's not like we put the board game away and we're done with it. People have to live with the decisions, with what happens. And so having our side win should not be the purpose of these games. And so that's what I was really trying to get across in that article.

[32:51] **Martin Robb:** Thank you. And we'll obviously come back to the relationship between politics and care when we move on in a moment to look more closely at *Revolutionary Care*.

But before we do, another relationship that seems to be crucial, or it comes up a lot in your work, is that between care, ethics and religion. And if I could refer to another chapter of yours, book chapter of yours, and that's the one that you contributed to that book on care, ethics, spirituality and religious traditions. And I think there you anticipate an argument that you make in *Revolutionary Care* about the dangers of the kind of moral certainty that can be associated with religious belief. And once again, you base your argument on a real life story, and this time it's that of the evangelical missionary John Chau, who lost his life in a failed attempt to convert the inhabitants of an isolated island in the Indian Ocean. And you interpret his story as illustrating how moral certainty comes into conflict with care. And you use it to explore, quote, 'the compatibility powerful authority and certainty with authentic care.' Now, you return to that theme in a chapter on religion in *Revolutionary Care*, where you argue that, quote, 'care supersedes theologically based morality', and you say that where the two clash, then, care has to take precedence. Now, as I read that, I thought that maybe some people might argue that there are many examples of where religious certainty actually is a vital component in motivating people's care. I just thought of one example, the story of Maximilian Kolbe, the Polish Franciscan priest who volunteered to die in the place of a fellow prisoner in Auschwitz. It could be argued that it was precisely his religious and moral certainty that motivated his heroic caring action. The same might be said of Mother Teresa or countless other people whose day-to-day caring is motivated by certainty, as they would see it, about the value of human life, the primacy of self-sacrificial love, and so on. So, sorry, a rather long question, but isn't it the case that the moral certainty created by religious belief can actually be a powerful motivator for care?

[35:04] **Maurice Hamington:** Absolutely. And one of the things I do say about the relationship between care and religion is that I think that care is agnostic about your religious beliefs. And what I mean by that is, it doesn't matter if you have strong religious beliefs or not. What we want in terms of care theory is that the outcome is caring, that care is the ultimate value. And so you can, as part of your religious certainty, if you come to it, that, let's say you believe certain that God wants us all to care and that I need to care. Great. That's wonderful. However, if your certainty is combined with a certain ideology or fundamentalism that divides human beings and separates them from the possibility of flourishing and their own agency in life, then I think that certainty is problematic. In the case of John Chau. I ask in that article, did John Chau really care about the people he was evangelising to? Did he do any humble inquiry? Did he try to understand what they wanted and their circumstances? Or was it merely, I need to convert these people to Christianity? – obviously, I want to say, come hell or high water. I mean, he gave his life doing it. He lost his life in it. But of course, everything is in context. And so I also ask, did the evangelical mission that sent him out, did they care about John Chau, or were they just merely wanting to, you know, add numbers, you know, to their, uh, to their flock? So I - I'm, I'm not against, uh, moral certainty. It's always a moral certainty in a certain kind of context. And, uh, sometimes, you know, people, maybe we'll talk about this some more, but find that a little bit unsatisfactory because they want it to be clear. But, um, I think that, that, that care has to be the ultimate kind of ethical motivation...

[37:30] **Martin Robb:** Moving on now to talk in more detail about *Revolutionary Care*. I said at the outset, you've written or edited 16 books, written numerous book chapters, journal articles about care ethics and care theory. So I'm wondering, what motivated you to write

yet another book on the subject? What were you trying to do in this book that was new or different?

[37:49] **Maurice Hamington:** So, care theory, care thinking has developed quite a bit in those, in those 20 years. And I want to declare, clarify a few things. I had some theoretical questions that I wanted to answer. That's what I do in the first part of the book. And then I wanted to also take some big swings, to take on some radical ideas in the second part of the book, and, you know, as kind of provocations. So I thought it was, you know, for example, in the first part of the book, I wanted to clarify some things. It is quite appropriate to criticise the word 'care' in the abstract because of its history. Care is the language of the colonial power, you know, in oppressing people, care is the language, oftentimes of the abuser in an abusive relationship. Care can be the language of excessive paternalism when it comes to people with disabilities. And so there's lots of reasons to criticise care. And so I wanted to spend a lot of time talking about what good care is and to differentiate care from good care, because care in and of itself, abstractly, is morally neutral, given its history. And so I talk about good care, and that in itself is a minefield, because many people said to me, you can't write about good care, care is too contextual, you have to respond to the situation. So how can you talk about good care? And the answer is, I don't talk about what to do in any situation. I talk about a kind of trajectory, I think, and this is another controversial aspect of my thinking, is I think that care has a postmodern quality to it. And what I mean by that is modernism really likes to put things in neat categories. This is this, this is that. Our language is very modernist. Once we use something, it's this and it's not that. And I think care is, is very postmodern. I think care exists on a continuum. I can have lots of experiences of care that are quick and superficial and nice. If I go into a retail establishment and they tell me to have a nice day and they're pleasant, it's a nice little thing of care. It's not deep, right? It's not that deep kind of caring. But if I want to have a really quality experience, a deep experience of care, I think it has some dimensions to it. And that's where I talk about humble inquiry, inclusive connection, and responsive action. And each one of those terms has a qualifier, humble inquiry. I want to know more knowledge, epistemology is crucial to care. Understanding the other and just general understanding is important to care. But humble inquiry means I don't come into it predisposed, like I know I need to meet the person where they're at, really try to my best to understand their situation. And then, inclusive connection, that's where the imagination comes in, that's where the empathy comes in, trying to connect with that person. And that can create motivation for me making that connection. And the reason I qualify it with inclusive is it's important that I not just engage in caring activity with my proximal others, my friends and family. I mean, that's great, that's important. But if care is going to be more than parochial, it needs to be extended to others, and I need to include others that I am unfamiliar with if it's going to be truly a political changer, a game changer, and then finally responsive action. Care ultimately is something you do. It has to be experienced. And so care is not just a disposition. If I sit and say 'I care' in my room and I never do anything, it doesn't impact the world. I need to act, but it needs to be responsive action, not just a rote action. It needs to respond to the situation of the other. This is just a general framework. I don't feel like this comes into conflict with other theorists definition of care. What I'm just trying to do is build out this idea of what differentiates good or deep care from other kinds of care. And that was part of the theoretical. And there's other things I do in the theoretical. I talk about commitment because I think that it's important for care to come from within, rather be imposed from

outside. Now, sometimes that's important. I mean, Joan Tronto talks about the distribution of care responsibilities, and that's important because there can be bad actors who will shirk their responsibilities. And so that's a different discussion. But I think that care is most powerful when we see its value and we commit to it. And so then it becomes an internal motivation. And I also spend a lot of time talking about ethos or the spirit of care. If care has a spirituality, I said it's agnostic about religion. But that doesn't mean that care can't have its own spirituality. And that can be a kind of contagion where people see you caring, they grasp the movement, that goes back to the Merleau-Ponty in the embodiment, and then they also act accordingly. And a spirit of care, that's how we raise kind of norms and standards, by seeing other people enact care, recognising how valuable and good that is, and that's also the aesthetic of care. And then we engage accordingly. So these are some of the theoretical things I wanted to do in the first part of the book before going on to the provocations.

[44:12] **Martin Robb:** Yeah, I found it a very rich and diverse book. And for me, one of its strengths is the way it introduces readers to the work of many newer and less familiar writers on care, and many people whose names you wouldn't normally associate with care theory. So it just gave me a long list of people I want to look up afterwards from every chapter. And once again, your writing in the book is rich with those concrete examples from everyday experience and practice. I just wanted to talk about a couple of the examples you used near the beginning of the book, because I think it highlights the breadth of the way you're defining care in the book, which may be unexpected to some readers. Now, in the first chapter, it's another one about another story about a community caring for strangers. And this is the way the citizens of Gander in Canada engaged in acts of collective care for the stranded passengers of US aircraft on September 11, 2001. And you use that example to explore some aspects of good care. But then in the introduction to the book, you tell the story of Derek Black, who was a white nationalist activist and racist who underwent a dramatic change of heart as a mature student in college. As a result, you argue of the way he was befriended by a number of other students, including some Jewish and minority students. Now, I think most people would have no problem in describing what the people of Gander did as care, but they might struggle to understand how the actions of Derek Black's fellow students could also be defined as care. So can you say why you describe what they did as care and how that illuminates how you're defining or using the word care in this book?

[45:53] **Maurice Hamington:** Sure. I think the Derek Black example is a fascinating one, and it's a fascinating story. And if people aren't familiar with it, they should read about his story. People have come up to me and posed the question, could you care for a Donald Trump supporter, for example? And without blinking, I say, yes, of course I can. I think that care is a, is really a paradigm shift. When we think about morality, it is different, it does different work than other ethical frameworks. It's not just about adjudicating specific cases. It's about how you live your life in relationship with other people. And it's not always about judgment. And so, of course, I wouldn't agree with Derek Black's positions at the time, but he was a human being with motivations and hopes and dreams and so forth, and so he can be engaged as a human being and cared for. And in this particular case, what this shows is the transformative potential of care. And I've tried to be very careful and say, this is not something that I'm suggesting can be replicable or that everybody would want to engage in,

because you have to also engage in self-care, and it might put you in harm's way to do this. I wasn't saying that this is what everybody should do, but I wanted to say how powerful this word is. Care is such a common word. It's used everywhere, all the time in advertising and everywhere. And we come to kind of forget about it. And it just seems like it's not so important in society, and yet it can really, it can actually, you know, transform people's lives. So that's, you know, that's really what I wanted to kind of get at in this particular example. There's, there's a couple of little other points, too. I think one philosopher that I footnote in there actually said, yeah, but what about the motivations of those friends? Didn't they just really want to change that person's mind? And I think, again, this is where care is a paradigm shift of thinking about morality. Because I think maybe since Kant, maybe before that, we think about morality as having some kind of purity test. Like, you have to be 100% pure of heart for it to be morally legitimate in some sense. And I don't think that's true for care. I think care is a very human kind of morality, and we are full of contradictions. And I think it is quite legitimate to care about myself and to have multiple motivations and still care about somebody else at the same time. And so I think that they did care about Derek Black, and I think they did have a caring relationship, and at the same time, yeah, they wished he had a different way of thinking about race. And eventually it did change, and I don't see anything wrong with that.

[49:32] **Martin Robb:** Yeah. And I think it illustrates very well those three elements of humble inquiry, inclusive connection, and responsive action, doesn't it? So, yeah, I thought it was a really telling example. Now, I said that the book introduces readers to some unexpected thinkers about care. The book also introduces us to some non-western traditions of care, such as Ubuntu in southern Africa and traditions among the Cree nations of Canada. That seems to be a really important strand of the book. Can you say what those traditional ways of thinking can supply that maybe western care ethics lacks?

[50:11] **Maurice Hamington:** Well, if you don't mind, I want to say a few things about those. One is, I come to naming those practices with some humility. I want to make sure that it's not simply appropriation. I recognize I'm a white western thinker, and I am not steeped in those cultures. I am not an expert, and I invite scholars in those fields, and some have started to write about the linkage with care ethics. And I don't want to pretend to be something that I'm not. And there's also a point that I want to make to western care theorists. We commonly tell this story that care ethics began with Carol Gilligan's *In a Different Voice*. And yes, she did do the important work of naming the previously unnamed in western thinking. And that's always been an important feminist function, and that's great. But to think that we all of a sudden, we started thinking about care morality for the first time in the 1980s is ridiculous. And there have been cultures who've done this really deeply. In fact, we may even say it just shows how far away we've gotten from care, that we get all excited about care, thinking that that other cultures find it part of their daily life. And so when we talk about the Crees' Wahkohtowin or the Ubuntu, we're talking about ways of life. And I'm not saying that they're exactly like care ethics. They're clearly not exactly like care ethics, but it is - when we talk about a spirit of care, an ethos of care, this is part of the culture. It's not an add-on ethic, it's a way of being. And that's what I think we could learn, very much so. And as care becomes a more international phenomenon and we start to have more international organisations and conferences, I'm hoping to get more non-western people involved to hear more and so that we can learn more from one another. So that's

why I included those examples. I think it's important for us to remind ourselves that, you know, that we didn't invent this stuff.

[52:47] **Martin Robb:** Yeah, I think that's one of the more revelatory aspects of the book. I certainly found those aspects a revelation. Now, you describe the book as a series of provocations. And I think, I wonder whether using the word 'socialism' in the title of a chapter was one of your provocations. But as I read that chapter, Maurice, I wondered if what you were advocating wasn't really socialism, but something more like communitarianism or even anarchism, sort of devolving or redistributing power to the local level, to communities, rather than centralised government action around care. So would it be fair to say that's the kind of thing you had in mind in that chapter, rather than state control socialism as centrally as traditionally understood?

[53:31] **Maurice Hamington:** Yeah. So the second half of the book is what I call a series of provocations and invitations. And the reason I've tried to be very careful about this language is care does not have a rulebook. It doesn't have a formula to it. And so what I'm trying to say, if you've bought into my idea about committing to care, that care is central to human life and so forth, perhaps you could consider some of these ideas. I'm asking you to take an imaginative - a flight of fancy. You may choose not to. And I'm not saying that they're a litmus test if you don't do these four things. In fact, the four is pretty arbitrary. In the last chapter, I talk about the fact I could have picked others, could have written about anti-racism as one or, you know, other kinds of things. Now, when it comes to the socialism, I tried to pick the topics that I have some background in. And so having taught economics in business, I went down that particular road. I am not, though, a professional economist. And so I said I'm using the word socialism rather guardedly. I'm just talking about putting society at the centre of our economy. And so I wasn't suggesting a specific like form of Marxism or anything like that. And so one thing about the care revolution that I envisioned, and I think I mentioned this, is that it's all directions. And so it's not just a bottoms up revolution and it's not a top down revolution. It's an all direction revolution. And so in the same chapter, I'm talking about socialism and the practices of infrastructure and so forth that a government can take. I also have in there, I discuss mutual aid and, as you say, more communitarian kinds of activities. And to answer your question, it's yes. And let's, let's do it all. Caring does not, we're not going to rely on one caring saviour to put this all into place. We can push care at all levels, in, in all directions. And so on the one hand, for example, charity can be caring, but you still want to change the system so that less charity is even necessary. Right? And both can be true. I was always impressed, growing up, with the Catholic Worker movement, because Dorothy Day and her organisation, the one level would have soup kitchens and at another level would be protesting and, you know, and trying to change policy at the same time and, you know, and didn't feel like they could only do one or, you know, their mission was just to do one kind of thing. So that was a long-winded answer to say 'yes'.

[56:36] **Martin Robb:** Thank you. Now, one of the invitations you make, and it's in the final main chapter of the book, is you invite people to think about links between care and adopting a vegan lifestyle. And I know that's something that's personally important to you. Are there dangers in moving care ethics away from a focus on the human? We've always thought of care as being, about being humanist, as being about interpersonal relations. Is this moving care in a post human direction?

[57:04] **Maurice Hamington:** I actually mentioned the word posthumanism and define that a little bit because posthumanism is, it's a little bit of a misnomer, the word itself, because it actually doesn't mean to go beyond humanism. It includes humanism but expands it, you know, further, it doesn't negate the human. And the thing about care is that it's not, it's not a zero sum game. It's not that, oh, I'm, you know, I'm caring for animals, and therefore, you know, I'm caring less about, you know, people. Actually, when we talk about something like the moral imagination, animals are an amazing extension of those caring capacities. I've written articles about, like, what we can learn about caring from animals, and I think that is true, that I think it's fascinating that we can care for beings that we can't talk to, that can't articulate their needs as clearly. Now, if you have a companion animal, you know, that you do figure out a language with them, you know, and so forth. So I think to that, you know, what does it mean to be a caring person? It means iterations, right? You don't usually get the label of a caring person because you cared really well one time. It is something, a repeated activity, and so why limit it just to the human beings in your life? And so extending this out to the way that we treat animals, I think, could only pay dividends to the way that we treat people. You're probably familiar with programmes that give certain people who have, whether they're in prison or not, that have antisocial problems, they work with animals, maybe horses or dogs, and they seem to develop their relational skills, and it helps their interpersonal relationships. So I think there's empirical evidence that supports that kind of thing. And I think that we can certainly engage in better treatment of animals and extend our abilities to care.

[59:35] **Martin Robb:** Now, before we leave *Revolutionary Care*, perhaps I could play devil's advocate for a moment. So, at one point in the book, sorry, this is another long introduction to a question, but you write, 'a moral commitment to care is within everyone's capacity, regardless of political, cultural, religious, or social identity. 'But elsewhere, you advocate what you call an 'inclusive, decolonial, transnational, critical race, queer, and transforming intersectional feminism'. And many of the examples you cite throughout the book of caring activism tend to be in support of what would be seen as, say, progressive or left-wing political causes. So it made me wonder how a socially or politically conservative reader, somebody who regards themselves as a caring person, might work or volunteer in the care sector, might be an activist, but for more conservative causes, like the pro-life movement, for example, might react to the book, might not they feel excluded from the care movement that you call for? And I just wonder if there's a danger in turning care ethics into a movement. Couldn't you argue that care ethics should be a diverse field of inquiry with a variety of, with room for a variety of positions, rather than a movement with fixed positions on difficult and divisive issues. So could this be seen as contradicting precisely the argument you make elsewhere about care being responsive to particularity and context, rather than associating the care movement with definite, and in this case, progressive political positions? I apologise. Very long question. My provocation.

[01:01:08] **Maurice Hamington:** No, it's fine. These are complex things, and they don't lend themselves to simple questions. I don't think so. Martin, you've kind of found me out. You've recognised the insidious nature of this project. On the one hand, I want to say everybody needs care. It doesn't matter. Your political position, your cultural position, everybody needs care in their lives. And that becomes the starting point for mutual

understanding and connection one another. There's embodied care, is required everywhere. But in order for it to be a kind of morality, what is the moral revolution of this? We have to take that further. We need to care for those that are different than us, that are unfamiliar to us. And so I want to leverage the fact that everybody needs care to push people to go beyond their comfort zones on this. And that includes people on the left. And so what I mean by that is we need to, we have a big rural - urban divide in the United States, and we need to care about those in the -what is the grievance, for example, of Trump supporters? You know, they have real needs, real complaints, real concerns. Maybe Trump provides a twisted kind of answer to it, but that doesn't mean that we can't figure out care responses to those. And so the challenge for us is to care across that divide, and then the same goes true in the other direction. And so we have seen an amazing transition in the United States where just, I don't know, 15 years ago or so, we were passing laws in this country, state by state, against same sex marriage, and now it's just completely reversed. And the minds of the general public has reversed. A revolution is possible for us to care across some of these ideological divides, across these narratives of fear and divisiveness. And that's what I'm shooting for here. And so you're right, there's all kinds of things that somebody on the right could pick out on this and say, this is just another, just another progressive, just another lefty kind of position. But I'm trying to start at the base point of understanding, and I think that care affords us that opportunity to do so.

[01:04:04] **Martin Robb:** Thank you. Well, you said the book is a series of provocations. I found it provocative to my own thinking and challenging to my own thinking, which means it's successful. I just encourage other people to get hold of a copy because I think it's a transformative book. I've kept you a long time, Maurice, but a final question. You're such a prolific writer that I can't believe this book is the last word from you on care theory. So can I ask what you're working on at the moment and what else we can expect from you in the future?

[01:04:31] **Maurice Hamington:** Right now I'm working on a chapter for a book that's going to be edited by Japanese care ethicist Seisuke Hayakawa and Michael Slote, a name you might know in care ethics, who's famous for his work on empathy. And I think it's a fairly eclectic collection of articles. And I'm working on embodied care as veradictive, using Foucault's language about truth-telling and truth language. And right now we're living in a world where neoliberalism seems to have the market, seems to have the answer. We believe the truth of the market, so much so that we just kind of take it for granted. And I want to argue that there is a kind of embodied truth that we need to value, and it provides a kind of language. And I'm going to continue to use my style of starting with an anecdote, and this will begin with the story of Emmett Till, who was murdered and his mother kept an open casket afterwards, and what that truth of that, that exposition of the body did for people's caring and minds. I'm working on that. Then there's, I think Dan Engster and Steven Steyl have a book coming out, and I'm going to write a chapter on a moral aesthetic for them. I have some aspirations. I would like to do an open access introduction to care ethics book, and I really would like to write a little bit of an intellectual memoir as I get into the twilight of my career. But otherwise, I'm still promoting this book right now, and so I haven't - and I'm still teaching - and so I haven't given much thought to the next big project.

[01:06:34] **Martin Robb:** That's fair enough. It sounds like you're busy enough. Anyway, so, Maurice, I just wanted to end by expressing my thanks to you for agreeing to be a guest on the podcast and for providing such full and thoughtful answers to my questions. I hope the conversation we've had will inspire more people to engage with your work and of course, to purchase their own copy of *Revolutionary Care*, available now at all good booksellers. So that's all we have time for on this episode of *Careful Thinking*. If you've enjoyed the episode, I hope you'll subscribe wherever you get your podcasts and spread the word to other people who you think might be interested. If you'd like to comment or provide feedback on this or any other episode, or if you want to suggest a guest or a topic for a future episode, you can either email me at carefulthinkingpodcast@gmail.com or you can leave a comment on my Substack, which you can find at carefulthinking.substack.com. All of these details are on the podcast website together with the show notes for this episode. So thank you for listening and see you next time.