

## A Spirit of Care with Maurice Hamington

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**Christiane Wisehart, host and producer:** I'm Christiane Wisehart. And this is Examining Ethics, brought to you by The Janet Prindle Institute for Ethics at DePauw University.

**[music: Blue Dot Sessions, Partly Sage]**

**Christiane:** Care impacts all of our lives intimately. Whether you're the recipient of care, a caregiver, or both, you know that the practice of care can be fraught with ethical and moral questions. On today's episode, we're going to discuss the basics of care ethics with Maurice Hamington, whose work on care spans decades. He explains that unlike ethical frameworks like utilitarianism or virtue, care ethics can be difficult to reduce to a simple set of guidelines.

**Maurice Hamington:** Care is kind of anti-formula. Care is more like an improvisation where you have the capabilities, the habits available to you but these are open-ended habits and you must figure out how to navigate in the moment.

**Christiane:** Stay tuned for my interview with Maurice Hamington on today's episode of Examining Ethics.

**[music fades out]**

**Christiane:** Any time I don't understand something when I'm doing research or writing for this show (which, by the way, is almost all the time), I usually end up looking at the Stanford Encyclopedia of Philosophy. If you look through the table of contents there, you'll find long entries on topics like utilitarianism, virtue, and deontology, just to name a few. However, there's one topic that always eludes me in the subject headings, and that's care ethics. In spite of the fact that care touches every human's life almost every single day in a variety of ways, care ethics doesn't merit a place in the table of contents. In fact, the entry on the ethics of care is merely a sub-column under feminist ethics and bioethics, and what is there is not especially easy to understand. And that's a shame, because I don't think I'm the only amateur ethics nerd who wants to learn more about care ethics.

So when I received an email from Maurice Hamington, who has been teaching and writing about the ethics of care for most of his career, I knew I had to have him on the show to help me understand the basics of care ethics. He's currently a professor of philosophy at Portland State University, where he also teaches in the Women's, Gender and Sexuality Studies Program.

Before I play the interview, I wanted to quickly explain a word we both use pretty frequently: normative. So for example, at one point I ask about the normative aspects of care ethics. And all I'm really asking is for an explanation of what types of behaviors, actions or rules care ethics

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requires. So just keep that in mind as you listen to my interview with Maurice Hamington, conducted in February of 2021.

**[interview begins]**

**Christiane:** I would like you to explain what care is. So, when we talk about care ethics, what does the care part of that mean?

**Maurice Hamington:** Care is something so familiar to all of us. We use that word all the time. We see it in so many different places. I think it's analogous to air. Humans need it to survive and to flourish, but we often forget that it's there and don't really reflect or think about it that much. We are all both resilient and vulnerable all the time and care is something that we need when we're more vulnerable at certain parts of our lives, but we actually need it all the time. We need to have people caring for us as relational beings.

**Christiane:** And when you say us as relational beings, and when you're talking about relationships, are you primarily talking about one-on-one kind of familial or community relationships, or could you expand care to mean you know, our president cares about us or something like that?

**Maurice Hamington:** This is one of the, the struggles in care theory today is to think about this issue because we do experience care as individuals, but, it is part of our social being and what care theorists talk about is that we are all ontologically relational. Ontology is the fancy philosophy term for being, right?

That at our core, we are relational. Not just social animals, like, you know, we really, we like to hang out with other people, but we really are other people. And the idea of care ethics was first, you know, named in the 1980s and it was a psychologist, Carol Gilligan, and a philosopher Nel Noddings who developed the idea and their original formulations honed in on naming the unnamed. And they were naming the morality of this, of this care that was experienced in, in, on one on, you know, one-on-one.

So they focused on dyads of people, but, since then care ethics has really burgeoned into a wider field where people are, to your question, thinking about political approaches to care, social economic approaches to care.

And so there is a live discussion about institutions caring for people. President Barack Obama said that there is a compassion deficit in the United States and President Biden when he was candidate Biden, was exasperated by things going on around him and said that the president is "a duty to care." That's the way he said it.

I think there's this desire to see our institutions...maybe they can't care for us in the direct experiential kind of way, but they can set up the policies and the practices and the culture and the all, you know, all the support for care in our society. They can foment care if they're

structured with that as a value, if we center our values more on care. That's what the feminist, theorists and philosophers who developed the idea was to bring care into focus, which had been ignored largely by Western philosophy historically, and wanted to bring attention to care on this personal and political level.

**Christiane:** You kind of already got into a little bit of what care ethics is. If you could maybe restate it and then you actually have a different preferred term for talking about the ethics of care, correct?

**Maurice Hamington:** The ethics of care that, that term ha- is, is the dominant way that the narrative is taken off in academia, ethics of care or care ethics and and it has, you know, it has great value but historically ethics has meant a normative approach to try to adjudicate moral or ethical challenges and a systematic approach to it.

And I think here ethics has a lot to offer in that direction, but I think care ethics offers more than that. I think it does more work than that. It is more basic to humanity than just a systematic approach to ethics. So I like to think about care theory and lately I've been talking about a care ethos and how to create a spirit of care in community. So in terms of a definition of care, the most popular one is Joan Tronto's definition of care ethics which I'm going to paraphrase, not get exactly right, but it's everything we do to repair our world.

Uh, and, and that's the one that's repeated the most often. And, and I'm fine with that. That's a, that's a fine definition. I just push it a little bit more to get some more precision and clarity about what care ethics is, because I think care entails a lot of things.

What I say is that care has three components to it. Care consists of inquiry, connection, and action: inquiry, connection, and action. And why I say it that way is that everybody uses the word care, it's even an advertising, right. And, and of course we have a whole field called healthcare.

So, good care involves knowledge of the particular other: gaining knowledge. So inquiry is a part of it. You can go, you know to a fast food restaurant and the person can say, "Have a nice day." And, you know, it might put a smile on your face or something. It's a very superficial kind of care, right? You don't really believe that they have a deep care for you. They're being nice. They're being hospitable. It's good. Right? But it doesn't have that kind of the deep moral quality to it.

But what does really effective, really deep care comes when somebody really listens to the other person, when they're attentive to the other person. And I don't mean that they're just present, but presence is a big part of it, but they're engaging with you. They're, they're asking questions, they're trying to understand you and then responding from there.

And so, as you develop that particular knowledge, you're in a better position to care. When you apply that to professionalism like a doctor, what is a good doctor? A doctor has generalized

knowledge. They have the skills, whatever their specialty is as a surgeon or whatever. But that doesn't always feel like good care, right? Y- uh we've all had this experience of, with going to skilled professionals and walking away from them thinking, "Well, they didn't really, you know, care about me," because it needs to be balanced with that particular care.

If that same skilled healthcare worker talks to you and asks you questions and understands your situation and then responds, then the potential for that care goes up. And the other thing about care is it mixes means and ends. So just in the act of spending time with you and listening to you, you start to feel more cared for even before I've done anything.

If I'm genuinely doing it, I'm gaining information that will actually improve my care. So inquiry is the first part of care, that knowledge. I consider care a kind of knowledge work which is an interesting way, you know, to kind of phrase it.

And then the second part of care is a connection with the other person. And that's where our imagination comes into play. That's where empathy comes into play. And empathy is a topic of much discussion these days. And there are criticisms of empathy, but the kind of empathy I'm looking for is an attuned empathy.

And what I mean by that is I think it's important for us to use our sympathetic imagination to try to understand what other people are going through. But we also temper that, we adjust it, we attune it, with the knowledge we're gaining. We're, we're still asking questions. I don't just jump to conclusions, imaginatively, and stop and go, "Oh, okay. I know what you're going through." You keep engaging. And so that connection grows in its accuracy. But the empathy is important for motivation, for feeling that connection you know, more deeply, but I'm not talking about empathy run amok as a kind of pure emotion.

And then the final thing--there's inquiry, there's connection, and then there's action. Ultimately, good care is really judged by the person receiving that care. I can't just walk away and say, "Oh, I just gave good care." I might be right. And I might be wrong--that other person has to experience this as some kind of action on their behalf. Now, sometimes it's just the listening is the action that was needed. But other times you have to act, and that sometimes requires risk.

Uh, so I think of care as, as this really perplexing concept, because it is so familiar, as you say, everyone, there's nobody w- who says they don't understand what care is, right? It's everywhere. And yet I think there's a great deal of complexity. And in fact, just because somebody invokes the word care, I don't think it actually necessarily meets the standards that I've been talking about, because as many theorists have pointed out, there are horrendous examples of people doing atrocities in the name of care.

There's a lot of great work on decolonializing theory. And one thing that a lot of colonial powers did was they instituted all kinds of terrible practices and say, well, these people needed to be

cared for, or you might think of a terrible parent who's going to use corporal punishment as the form, you know, this is how I care for my kid.

So that's why I really want to push the understanding. In many ways, this is the role of philosophy, right? To lead the examined life is to take these common ideas and really push our thinking about them to try to think, you know, more clearly and deeply about them. And, and, and so that's why my answer's so complex about, you know what good caring is.

**Christiane:** It struck me while you were talking--part of my confusion with care ethics in general is because when I read about it, it says that the ethics of care comes from noticing...correct me if I'm wrong. But it came from noticing in particular how women or, or people who were raised as women tended to approach ethics differently than people who were raised as men.

And so, so the theorists noticed that and then came up with an ethics of care, but that always confused me because then I thought, well, yeah, how do you, how do you talk about the normative piece of that? That just sounds descriptive to me, you're just describing something that you know, a lot of caregivers typically do or the way that they act. But I like what you said there at the end, where a lot of philosophy is noticing something and then taking it further. And that strikes me as what the ethics of care does.

**Maurice Hamington:** .. that's very well put, and that's a really important kind of theoretical question that's also been dealt with a great deal. And one of the, the early criticisms of care ethics is that it smacked of essentialism that you know, that this is a, a woman's kind of ethic and you're, you're absolutely right.

So remember what I said about Gilligan and Noddings, they were naming the unnamed. For a long time, I mean you know, through today, women bear the brunt of care in our society, and it has been undervalued. You know we have statistics about the gross national product, but it doesn't include the work that's done in the home, right? If you pay for it, it's counted, but all that care work in the home doesn't get counted and it doesn't get that numerical value, which is so important in a neo-liberal society.

But you're absolutely right. It, what Carol Gilligan originally noticed in her psychological interviews was a tendency, not an absolute, but a tendency of girls and women to approach case studies differently than men did. And I need to stress the tendency part because care ethics constantly moves across categorical boundaries, and there's, there's nothing absolute really about it.

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She started to give this a name and she called it an ethic of care as opposed to an ethic of justice that other folks were using to evaluate decisions. And so women have historically tended to have a better understanding of care. And there are other psychologists who were arguing that if men were involved in caregiving more, that they would understand care in other realms.

So women's experience was very important to the feminists who were drawing out what this was, but even though the original works of care ethics were criticized for being somewhat essentialist, all of the, the, the theorists, all the original mothers of care ethics, backed away from any kind of essentialist kind of claim. Of course, men can be caring, but we have a prominent not exclusive, but a prominent form of masculinity that actually views being a man as not caring--a kind of toxic masculinity that you know, rebels in exhibiting the not caring, and so there is a kind of gender pushback within it.

And we should always kind of remember that care ethics had its real origin in feminist theory, which was trying to attend to the, the power and privilege of some groups over others in society. So you're, you're correct in your observation, about that, those origins.

**Christiane:** if you are attracted to care ethics and if that's your chosen framework for making moral or ethical decisions, how does your decision-making look different than if you were, say, a consequentialist?

**Maurice Hamington:** Care definitely has normative implications because you have to remember the value of other people and your relationship to them. It's not simply an alternative, normative approach. It just says that those other approaches oftentimes are shortcuts and that care says you have to really think about the situation.

I will tell this to undergraduate students. And then at the end, they'll still say to me, "Okay. Yeah, yeah, yeah, yeah. So what does care tell you to do? You know, and it's almost like well, that's not exactly it. But, but care does help, you know, with your, with your normative decisions. It just does more than that. Take for example, since you mentioned consequentialism, something that's extremely popular to talk about in, in ethics and in particular in consequentialism.

And that's the trolley problem, right? You've dealt with the trolley problem in your podcasts on occasions. And it is a, it is an attractive discussion. Everybody's kind of drawn into the dilemma. I hate the trolley problem. And the reason I hate the trolley problem is because it's so contrived and it's so artificial and it makes it sound like ethics is always this one moment in time. What am I going to do in this?

And yes, there are some times where those moments come, but we live most of our lives, not in those moments. Care in relationships has a very large temporal dimension. You have long horizons, you're thinking about um helping somebody, not just in the moment, 'cause sometimes there are crisis moments where you need to help somebody in the moment, but, you know, what's the best thing for them going on? How do they flourish? How do they grow?

And so caring has, you know, kind of normative in the moment implications. But it does more work. That's why I like care theory over care ethics because when it's an ethic, people seem to want to look for those questions about what is the right thing to do.

And one of the, one of the Italian care ethicists has gotten me to think about care as pursuing the good, more so than the right. It still has implications for the right, but maybe it's more about searching for that which is good and beautiful and there's kind of an aesthetic to care and that it can also be a beautiful thing as well as people look at what give their, gives their lives meaning.

Um, so I think Nel Noddings at one point does talk about that care has a lot in common with consequentialism because it is concerned ultimately with the actions that we take, but it doesn't want to reduce anything to a formula. Care is kind of anti-formula and those kinds of abstractions. Care is more like an improvisation where you have the capabilities, the habits available to you to care, but these are open-ended habits and you must figure out how to navigate in the moment how to do things. So I wrote a book a long time ago called Embodied Care where our bodies all have the capacity to care. There are a lot of little skills and habits that we have.

We also know that in our bodies we make all kinds of subtle adjustments in order to care. When you're caring for somebody, you know, what do you do? You, you adjust your tone of voice. You might adjust your posture. Uh, you think carefully about tactile interactions, how you touch one another and facial expressions become very important.

And so you.. your body can both express and, and capture care through its, its subtleness and, and, and so we have, we all have that, you know, kind of we all have that kind of capacity to care that is so strong that it can even be in tacit form. We don't even have to be articulating it.

I once wrote a chapter of of of a book about washing my daughter's hair. This was when she was very young and she was in the bathtub. She was little. And what I talk about was the phenomenon of it. Um, I was, you know, washing her hair and we might be telling stories or she might be singing a song and I'm not explicitly saying to her, "Rosemary, I love you and I care for you," but she knows it in the moment.

And our bodies know how to make that adjustment because, you know, after I was done washing your hair, that same body might've gone outside and changed the oil in the car. Right? And you know, you make those adjustments to do it. So, we have this really deep understanding of care even when we can't always describe it verbally.

And that's why, I mean, and that's part of why I think care is so different than those other ethical uh, approaches. There is moral insight from all those ethical approaches that can be gained, but the idea that that that they can answer all of our moral problems I feel is, is like trying to treat ethics as a shortcut of some kind like, you know "Tell me how to do it and I'll just do it."

**Christiane:** it just takes me right back to, you know, having my first newborn. And I, I literally said to my, my husband at, at multiple points, like, "I wish these books would just tell me what to do. I wish my mom would just tell me what to do."

And of course everybody was right not to tell me what to do because you know, Henry needed to be fed a lot more than other babies probably needed to be fed. And if I had followed some rule, I might have, you know, not cared for him in the way that he needed to be cared for as a child. So, so yeah, I like that formulation of it. It rings true.

**Maurice Hamington:** And that's, I mean, and that's, that's a good example of the, of the tiers of knowledge, right? Because on the one hand, I mean like basic understanding of nutrition is kind of important for parents, right? You know, broccoli is better than candy. General kinds of knowledge. Um, but then you, you compliment that with the particular knowledge of your, your child and your circumstances and, and your situation. And so the abstract general knowledge is helpful to a point, you still have to rely on your skills, in the situation, there's still always going to be that kind of improvisational morality.

**Christiane:** So why do you care about care theory?

**Maurice Hamington:** I remember reading Nel Noddings book *Caring*. I can remember, like I was getting the tires changed on my car, and I remember sitting in the lobby reading that. And it was it was kind of like an epiphany uh, you know, thinking about care. It seemed like it was so obvious and so prevalent and yet, so under thought about in, in many ways. The complexity of it matches the human condition, I think, and is a very ...it's about us reaching our full humanity.

So maybe, maybe that's a cue for me to talking about a caring ethos in a certain kind of way. Actually, I did a talk for a department a few weeks ago talking about care as a way of being you know, more than just thinking about it you know, as an ethic because it can be, you know, kind of like your, your view onto the world.

I'm going to remain hopeful and I want to write more about this as something that can potentially cut across our political divides, and if we can just remember that we need to, to value caring and caring for others. If we can just wrap ourselves around that, there's a hidden, obviously there's a hidden tradition of it, even though so many people are writing and talking about the crisis of care today at the same time, there are just beautiful, wonderful examples of care and systems of care in place today.

And so, I am attracted to it because I think it can be...like human beings reaching more fully toward their potential in a certain way in, in caring relationships. And, and I don't want to pretend that caring is easy either. Caring can be extremely hard and sometimes we just don't want to you know, we, you know, we don't want to care and we're just finite human beings and, and we have to, but it also can be very joyful and what gives our life meaning.

We are, particularly in this country, we're very keen on the notion of freedom and liberty and liberation. And I get that except I don't want to be liberated from my caring relationships. As hard as they are it's in caring that we, again, derive so much meaning for our lives.



I think care is kind of a hope for the world to improve. If we're gonna improve the infrastructure of, of support, you know in this country for people, it's going to be through people caring and telling personal stories and connecting with others and then acting, you know, on those. And so you know, as a philosopher, maybe I shouldn't be so attached to, to a theory, but I guess I am.

**Christiane:** I give you permission. (laughs)

**Maurice Hamington:** (laughs) Great.

**[music: Blue Dot Sessions, Colrain]**

**Christiane:** If you want to know more about Maurice Hamington's other work, and to find more information on the ethics of care, check out our show notes page at [examiningethics.org](http://examiningethics.org).

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**[music fades]**

**Christiane:** It's done, I did it, it's great. I'm manifesting finished-ness.