On Care and Vulnerability

Genevieve Costello

Writer and artist Genevieve Costello engages with the concepts of vulnerability, security, and care as an ethics and practice. The text makes an introduction to feminist thought concerning care in the hegemonic orchestration of capitalism, including that by political theorist Joan Tronto and theorist Silvia Federici, and elucidates the intricacies of socio-cultural institutions of care relations and their (digital) infrastructures. Costello proposes that care is a *common resource*, »that people orchestrate and manage with shared values, rules, and negotiations.« Situated within the moment of a pandemic, the text considers how the theoretical contexts, and, subjectivities, of care and vulnerability may begin to be differently felt in the current experiences of social realities.

On Care

Theories of care often start with the premise that all humans have needs that others must help them meet. I use the term care, as posited by political theorist Joan Tronto and Bernice Fisher, as maintaining, continuing, or restoring the world.[1] Such a premise is tangible – we can pull up examples of when we have needed and provided help. It is also abstract. Care is a shared, but not equalizing or consistent, need. It is attached to the conditions of being, of being susceptible to effect. Care is a fundamental action and tool for our immediate and generational subsistence and well-being. Our needs for care and our ability to give care change in our day-to-day lives, and in different life periods. Our conceptions of how we are able to put care into practice, and how we are able to receive it, are fickle. They are situated. Care takes different shapes, when employed in different cultures and times, and, with different ends in mind.[2]

Tronto outlines four stages of care as a practice.[3] These are *caring about* (noticing the need for the care in the first place, such as, seeing a homeless person); *taking care of* (assuming responsibility for the care, such as, offering this person some euros); *giving care* (conducting the actual work of care that needs to be done, such as, taking this person to shelter); and *receiving care* (the response of the person cared for, such as, was the care sufficiently received; was it the shelter that this person wanted; maybe, further, what actually happens after the shelter is taken, thus starting the process again by caring about a bigger problem and a more long-term approach). Along with this method, Tronto provides four attributes associated with the full scope of care: these are attentiveness, responsibility, competence, and responsiveness.[4]

As we all need care, and most of us the capacity to learn the skills to enact it, I propose that care is a *common resource*.[5] Care is a resource that people orchestrate and manage with shared values, rules, and negotiations, as much as the types of orchestration and management – i.e., systems, institutions, and social forms – shape and change the value of the resource of care, the social relations of the people, and the social environment entwined in its engagement. In the hegemonic orchestration of capitalism, stages of care have been divided up, individualized, and privatized, with the aim to achieve socioeconomic ends of the accumulation of a workforce for capital gain.

In her extended account of the centuries-long era of extensive persecutions against women and exploitations and enslavement of racialized peoples in the

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peripheral spheres, feminist theorist Silvia Federici expands upon Marx's theory of primitive accumulation centered in Europe, making implicit in this major shift from a subsistence economy to a wage-labor economy the gender division of labor, which is also described with the terms of productive and reproductive labor.[6] These actions of warfare included the isolation and extensions of care labor grounded in the atomized household; the exclusion of women from wage labor and property; the naturalization of care labor and domestic space to women and others; the degradation of reproductive work and the associated spheres of such work and social body of care laborers; the expulsion of women from knowledge, including medicinal practices and control of bodies; and the mystification of the production and reproduction of the worker as a natural resource or personal service.[7]

When care functions as an illegitimate commodity, it is divided between gender, class, race, and ethnicity. Care is hidden under the normative orders and various guises of the household, family, and kinship.

The creation of an unwaged, devalued, depoliticized, and privatized informal economy of reproductive labor takes shape within the institution of the domestic household or family, in order to support the formal economy, as made distinct from the family. Care provisioning, then, has been housed, *enclosed*, in terms of this dominating socioeconomic formation, either or both rendered invisible or assimilated as an intimate haven that produces the very real human needs broadly associated with it – such as trust, security, and love – whether or not these life elements are actually realized within traditional conceptions of the family.

Treating care as a disposition, emotion, or principle, rather than as learnable skills and labor, perpetuates its naturalization to certain peoples, namely women, racialized minority groups and peripheral communities, the working-class, migrants, and slaves – often,

the very same people who have historically been and continue to be denied participation in democratic life – including the right to life and being a being worthy of care and security.[8] This naturalization permits the powerful to justify designating caring responsibilities predominantly repudiated peoples, and, to the private sphere, enabling a form of detachment from responsibility of caring roles and duties, i.e., legal practices of systemic injustice.[9]

Today, we continue to see the cycle of depletion, outsourcing, and neglect of care.[10] While pervading all spheres of life, care is commoning, yet it is not evenly felt, distributed, enacted, received, or accessible. The common resource of care continues to be literally and ideologically captured, enclosed, and procured into a system for surplus value, being treated as an infinite natural resource and rendering it in crisis, through its devalorization, hyperindividualization, and privatization within foundational intimate social systems, where it is predominantly »only valuable insofar as it allows the pursuit of other ends by those whose needs are most thoroughly met.«[11]

When care functions as an illegitimate commodity, it is divided between gender, class, race, and ethnicity. Care is hidden under the normative orders and various guises of the household, family, and kinship. It can be concealed in the affordances to make enough money to and to have certain points of access to market solutions, frequently encased in associations of freedom, empowerment, and *self-care*. These »solutions« continue to perpetuate poor conditions for others, peoples and common resources alike, that produce and constitute the raw material of and for care.

Further, the need for care is camouflaged in the stigmatization of the inability to take care. To embody a vulnerable state, in which the need for certain kinds of care that are not aestheticized, commercialized, is visible, is made perversely negative. Requiring care, or, the exposed need for care, can be imposed as personal failure rather than system failure, as a personal choice to unfortunately succumb to, rather than a fact of life that we all are always with.[12] We must more adequately evaluate how care functions in our lives and being, in order to undergird it as a common resource, a practice, rather than in opposition to and in support of a crisis-based socio-economic system.[13] As much as care is a mandate for any social system and any sphere, at any scale – it is also a mandate for its own fostering.

There is a fifth stage of care that Tronto posits – *caring with* – as emblematic of caring being a democratic

practice, a political issue, elemental to our recognized social identity and responsibility.[14] *Caring with*, then, seems to circumvent the other stages, and implicates care as a collective obligation, and its authentic value as a basic need that is unownable. Rather than stagnantly residing within prescribed identity roles of care for its accumulation in a commodity-exchange economy, it is a civic – person-to-person and a horizontal – responsibility to enable people to be able to conduct, with agility, the full spectrum of the stages and elements of care as an ongoing, interrelational practice, and for the valorization of care as a common resource.

While I propose care as a *commons* to expand upon these enclosed normative spheres and groups of care-provisioning within the dominating socio-economic system, the different *ends of care*, which thus then inform its cultivation, matter quite a lot, especially if we follow philosopher Estelle Ferresse's understanding that care is the management of *vulnerability*.[15]

On Vulnerability

By way of Covid-19, a »chaos-world« has come to fill the main stage of many. This disruption of planning, certainty, and production possibly begins to underscore the problematics of a social world that has been constructed for certain realms and in certain ways, that are associated with production and productive socialities; and premised upon other types of free labor. This is a social world in which others are posed as a threat, in our division and a siphoning of spheres for vulnerability, thrusting into our minds and bodies that we must hoard our care.[16] There are the vulnerable, and those who can pretend to not be.

The compression of life-worlds into mostly a single space during Covid-19 has surfaced the deep reliance of society upon the diffusion of care and relational subjectivities, with the veil of autonomously navigated public-private realms. How quickly new support structures arose to make mock-ups, stand-ins, to maintain this veil of autonomy, offering compassionate supplementary and self-mastery tools to manage hairs turning on end in reaction to the disturbances between the desired reality and their good-enough alternatives; and simply the ghastliness of losing what defies replacement options. No, Zoom is not IRL; there is no need to compare. Many people have IRL exhaustion due to the social and material relations that condemn certain peoples to not being included in standardized socialites, or further, due to differences how

bodies perceive and digest the information of the world around us.

The »normal« that is missed on a possibly unprecedented scale, in terms of its reverberations and visibility by way of digital media, is one reflection of the *highly manicured care of vulnerability* delegated, tucked away into spaces, relations and roles, in service of certain ends and on certain scales. For those who can sprinkle themselves and make distinct-socialites throughout *worldy* spaces, social identities are diffused.[17] Theorist Judith Butler's consideration that »the dependency on infrastructure for a livable life seems clear … when infrastructure fails, and fails consistently, how do we understand that condition of life?« may be more relatable now to people who have predominantly undisturbed experiences in the dominating social and interrelational infrastructure, since the effects on day-to-day living of Covid lockdown.[18]

There are the vulnerable, and those who can pretend to not be.

Undoubtedly, we must recognize the unjustness in the privilege of those who can *#savelivesstayhome* or, protest to *#save »freedom,«* and disproportionately harm people with less money and less access to health care. It is relevant to take into account that unlike other moments of social disturbance by which new socialites may be forged, such as protests, strikes, or, even the searching for alternative communities and relationships in online spaces for those who are unable to be in their immediate physical worlds, many who are fortunate enough to stay at home, whether furloughed or enacting their normative form of productivity from their homes, did not pursue these disturbances as a personal political demand; as a decisive action.[19] The popular disappointment that abounds because life is not the same can easily distract from the possible opportunity to, instead, critically review what has been broken down in terms of the housing of care and vulnerability.

Yet, much good has come from the infrastructures to differently access the social world from the inside, for some people who are unable to leave the house as easily as others, in both the creation of new points of access and legitimizing, and normalizing non-IRL presences. For example, being able to have a doctor's appointment over the phone, attend an event or gathering (a reading group or conference) via Zoom, to have a legitimate and meaningful social engagements on Facetime (wedding, wakes, hang outs); and inspire more peer-to-peer content sharing and experiments in the use of popular social media. Additionally, it feels as though we might be seeing an increased fluidity and learning process for meaningful engagements in global digital activism, with some powerful connectivity and energy in protests around the world concerning the recently reignited manifestations of Black Lives Matter.[20]

In possibly having a more open relationship to our inherent vulnerability and need for care, can we imagine their stronger integration and reintegration with movements, socialites, and interrelations, going forward?

Of course, peoples for whom a transference to life on video cam is a significant disadvantage, such as those who do not have safe homes or homes they are comfortable in and the deaf community, must be acknowledged and accounted for. But, the progressions away from a stigmatization of camaraderie that can manifest in mixed-engagements (digitally and IRL), as well as underscoring the realities that realize certain people's mobility and productivity in the social world, feel positive.[21] Confinement hopefully has made felt that relations need not be productive by being built upon others whose vulnerability is deemed inherent or too deeply systemic to resolve; or, not part of the productive caring-world, that is both bestrewn and hidden in the diffusion of the enabled socialities of some.[22]

We have seen an approach of an inverse dollhouse: from within domestic interiors or, more specifically,

paired up with differently sized computers with Internet connections, some are able to play familiar and inscripted realities outwards; even with empathetic mediums and advisements in place for bemoaning and cushioning where they lack. Possibly, though, the effects felt from disjunctures in this play may be both felt and reflected upon, indicating the duality and division of care, and possibly provoking considerations of how we might better incorporate vulnerability into socio-political systems and relations as the pervasive *thing* of interrelating that it is; to help realize more inclusive, egalitarian and multifarious social worlds. In such reflections, we might begin to break down the problem child of care in our productivity-framed world and realize practices of the management of being vulnerable as a base, common point of relation, as a key part of the program, with an end for its access and support for all, rather than as a point of division and failure.

Because of the scalarity of effects of Covid-19, largely felt in its economic dimension, some communities and institutions have permitted the practice of care as a common need to come to the center, or at least closer to the center, of their program.[23] While no doubt this will evolve as the lockdowns and other restrictions change, it feels hopeful that the experiences of the inability to access the basic infrastructures that hold up particular lives, may help create new social identities for realizing infrastructures that hold up *more* lives. In possibly having a more open relationship to our inherent vulnerability and need for care, can we imagine their stronger integration and reintegration with movements, socialites, and interrelations, going forward? Can we enact care not as something to cling to for personal security, as instructed by our divided social-economic systems, or as a gesture contained within types of enclosed sites, interfaces, and relations, but, through its ongoing examination? Rather than with blind or uncaring consumption-assumption, in the face of its vulgarity of our conditionalities as vulnerable beings, can we engage with care in grace?[24]

Before things may return to what they were, for a brief recent moment, many people felt what it's like to be alive through a less manicured experience of vulnerability, and, with new manifestations of its management – including ones that need to be done dramatically differently to more accurately value the care of every entities' vulnerability. Maybe something from this will stick, even if just a little.

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1 »On the most general level, we suggest that caring be viewed as a species activity that includes everything that we do to maintain, continue, and repair our ›world‹ so that we can live in it as well as possible. That world includes our bodies, ourselves, and our environment, all of which we seek to interweave in a complex, life-sustaining web.« Berenice Fischer and Joan C. Tronto, »Toward a Feminist Theory of Caring,« in: *Circles of Care: Work and Identity in Women's Lives*, New York 1991: p. 40.

2 While all living things are vulnerable to things (not excluding nonliving things) that may negatively affect their experience of living, fears differ based on what we feel vulnerable to. Thus, the care given, to protect and to provide security, differs based on the object of threat, and, to who or what counts as a being and which objects are valorized as something to secure.

3 Joan C. Tronto, Moral Boundaries: *A Political Argument for an Ethic of Care*, New York and London 1993: pp. 104, 108.

4 Ibid.: p. 127.

5 Importantly, I do not suggest or support that care should be considered a natural resource nor that it should be de facto free.

6 Silvia Federici illuminates how the historical elements of the war against women, were part in parcel with the growth of capitalism in her pre-eminent text *Caliban and the Witch: Women, the Body, and Primative Acculumation*, New York 2004.

7 Federici, *Caliban and the Witch*, 2004: p. 8.

8 Tronto, *Caring Democracy: Markets, Equality and Justice*, 2013: p. 10; *Moral Boundaries*, 1993: pp. 113–116.

9 Tronto demarcates this phenomenon as privileged irresponsibility, when »those who are relatively privileged are granted by that privilege the opportunity simply to ignore certain forms of hardships that they do not face.« *Moral Boundarie*s, 1993: pp. 120–1; *Caring Democracy*, 2013: p. 60.

10 For more on this cycle see the large resources regarding the global care chain; related still, Helen Hester and Nick Srnicek's »The Crises of Social Reproduction and the End of Work« in: *The Age of Perplexity: Rethinking the World We Knew, Open Mind*, 2018, available online at: https://www.bbvaopenmind.com/wp-content/uploads/2018/03/BBVA-OpenMind-Helen-Hester-Nick-Srnicek-The-Crisis-of-Social-Reproduction-and-the-End-of-Work.pdf; and Nancy Fraser, »Contradictions of Capital and Care,« in *New Left Review*, vol. 100, 2016.

11 Tronto, *Moral Boundaries*, 1993: p. 116.

12 Privileged irresponsibility bolsters the livability in the culturally embedded notion of the ideal neoliberal capitalist subject, »I made it on my own, you should make it on your own.« As Tronto explains, »this notion … appears to have the formal quality of a morally correct and universalizable judgment, it can also serve to disguise the inequality of resources, powers, and privileges that have made it possible for some to ›make it‹ while others have not.« Ibid., p. 111.

13 Estelle Ferrarese summarizes the perspective of Theodor Adorno on the related matter, that, »the dispositions and forms of care are intertwined with the forms of life; they are made possible by them ... the Lebensform encompasses all that permeates the relations to the self and the world that precede or rather constitute the basis of all conceivable ideas of good life. Nevertheless, forms of life are not just an ethical texture,« in »The Vulnerable and the Political: On the Seeming Impossibility of Thinking Vulnerability and the Political Together and Its Consequences,« in: *Critical Horizons, A Journal of Philosophy and Social Theory*, vol. 17, no. 2, 2016: pp. 224–39.

14 Tronto, *Caring Democracy*, 2013.

15 »The distribution of care [is the] taking charge of vulnerability« and »...care, whose precise purpose is to handle vulnerability.« Ferrarese, »The Vulnerable and the Political,« 2016: p. 237.

16 This proposition is influenced by psychologist Carol Gilligan's theory of care-based morality, developed from her crucial problematization of judgment-based moral development theory of her mentor, Lawrence Kolhberg, which was, at the time, based on studies of only male subjects, in her book *In a Different Voice* (1982). Moral development theory is concerned with pro-social behaviors, or, caring behaviors, such as altruism, respect, helping, honesty, and fairness. Briefly, the justice-based moral perspective assumes that there are autonomous individuals in conflict with incompatible claims, and a verdict is made of which claim is right and which is wrong. This approach demarcates an invalid and valid claim and attaches it to an autonomous individual. Care-based morality has an emphasis on interconnectedness, and concerning situations of conflict, the conflict is part of the problem to be addressed. Rather than deciding on a right or a wrong party against the other – proving or disproving validity of claims against the other – the focus is on removing the conflict between them, that is creating a difficult – and particular – situation, together for everyone, without hurting any of those involved, and ideally, encouraging their flourishing. In other words, the creation of a common investment and trust in the face of conflict and difference must be forged. While Gilligan realizes her theory through the study of women subject's moral reasoning, she argues that this ethic is not sex-specific, but thematic; that is, moral perspectives had been obscured by the themes of autonomy and independence in the domination mode of liberal justice in moral theory. Carol Gilligan, *In a Different Voice: Psychological Theory and Women's Development*. Cambridge, MA 1982.

17 Like the effects of Covid-19, though, people do not choose vulnerability. This is exactly why the effects upon our days and lives can be so very frustrating. Butler describes, »Most of us wish we were less vulnerable under conditions in which we are impinged on in ways we do not choose, and ›vulnerability‹ names this very condition.« Judith Butler, »Rethinking Vulnerability and Resistance,« in: *Vulnerability in Resistance*, Chapel Hill 2016: p. 22.

18 Butler, »Rethinking Vulnerability and Resistance,« 2016: pp. 12–13.

19 While being on furlough, receiving universal basic income, or emergency funds that would otherwise remain inaccessible or nonexistent to the public may be a peaceful and easeful form of realizing demands from the state life. I thank friend, psychoanalysis researcher, and Covid-19 reading group co-creator Jacob Firth for bringing this political act to my attention. Additionally, it is meaningful to note that there have been notable global work strikes during Covid-19.

20 These global movements commenced largely in response to the murder of George Floyd, a 46-year-old black American man, by four police officers, Derek Chauvin, J Alexander Kueng, Thomas Lane, and Tou Thao in Minneapolis, Minnesota, on May 25, 2020.

21 I am going against the Sherry Turkle connected-but-alone train here and supporting redesigns of popular social media as ways to meaningfully engage in intimate socialities and interrelations with technology.

22 »Not only are we then vulnerable to one another – an invariable feature of social relations – but, in addition, this very vulnerability indicates a broader condition of dependency and interdependency that challenges the dominant ontological understanding of the embodied subject.« Butler, »Rethinking Vulnerability and Resistance,« 2016: p. 21; and, »It is not just this or that body is bound up in a network of relations, but that the body, despite its clear boundaries, or perhaps precisely by virtue of those very boundaries, is defined by the relations that make its own life and action possible ...we cannot understand bodily vulnerability outside this conception of social and material relation.« Ibid.: pp. 15–16.

23 Artist Bernhard Garnicnig recently asked in his analysis of the role of care in art institutions as exposed by the current pandemic: What is new and what is not new? There are always crises happening, and the need for help in order to address them, when they are in fact addressable – such as finding the money to pay rent.

24 Contradictions and tensions in such conditionalities are not suggested here as resolvable, nor do I propose vulnerability to be an idealized value or state.

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