

The Core of Care Ethics, by S. Collins. Basingstoke: Palgrave Macmillan, 2015, ISBN: 978-1-137-01144-2, pp. 191, £66.00 (hardback), ISBN: 978-1-137-01144-2

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I was immediately drawn to this book because of its title's similarity to a favourite essay by Henry Maier, a seminal author in Child and Youth Care. What Maier's *The Core of Care* and this book have in common is their effort to distil the literature into central tenets of their respective topics. Maier's topic was developmental theory; Collins' is care ethics. In the opening pages, she describes care ethics as 'a somewhat shadowy entity at the outskirts of debates in analytic moral philosophy' (p.2). More mainstream moral theories, she argues, tend to have theoretical slogans. For example, '[c]onsequentialists maximise ... the goodness of their actions' consequences; deontologists respect certain rights and abide by certain duties; and virtue ethicists cultivate flourishing characters' (p.1). Essentially, Collins' project is to identify care ethics' slogan. She proposes to do this by distilling existing care ethics literature into its central components – four key normative claims – and then to unify, specify and justify these claims, crystallising care ethics' conceptual core and bringing it into mainstream analytic moral theory. This involves taking care ethics from its political and practice origins and developing it using analytic (and often abstract) moral reasoning.

Collins' central argument is that care ethics is a *prima facie*, compelling moral theory and has, like any other coherent moral theory, a core normative commitment that she endeavours to identify and justify. Her concern is with the 'prescriptive conclusions of care ethics, not its descriptive premises' (p.12). As a result, the book reads much more like something I would have studied as an undergraduate philosophy major than the reading, thinking and writing on care ethics I have subsequently done as a practitioner and academic. The following excerpt serves as an example:

This thought is expressed differently by different theorists, but the general idea is that action, ω , in a context, C, will include so much detail about C that none of the reasons will apply to other contexts. So, we cannot generalise beyond C if we are to explain why the moral reasons to ω in C are (or are not) weighty enough to generate a moral reason (even a non-decisive one) to ω . (p.17)

To be fair, this approach to exploration and analysis doesn't dominate the book and for the most part, Collins' writing is clear and engaging. She offers enough explanation to take the reader with her, using recognisable illustrative examples. For instance, she offers the following to illustrate that responsive to care should not be taken as essential to care:

[S]uppose B is in a coma, and A earnestly attempts to meet B's needs every day. Even if B never wakes from the coma, and so never recognises that A cared for B, it seems that A's actions should constitute care. (p.77)

For those unconcerned with the place of care ethics within analytic moral philosophy, the first of the book's two main sections will still be of value. It offers a critical survey of the last thirty years of care ethics literature, providing the unfamiliar reader with an excellent introduction to its main arguments. Collins also persuasively argues that this literature can be distilled into the aforementioned four key claims, which each comprise a chapter.

Chapter two starts with care ethics' longstanding scepticism about the utility of universal principles and its emphasis on sympathetic engagement with the unique particulars of each situation. Collins counters sweeping claims in the literature against universal principles and instead argues for their compatibility with sympathy. Indeed, the attempt to arrive at some form of equilibrium between relevant principles and the feelings and interests of those involved chimes with a phenomenology of moral deliberation. Principles are sometimes necessary to prevent us from being blind to other, morally relevant considerations not necessarily reflected in our immediate sympathies in a given situation. At the same time, the disposition and even activities involved in sympathetic engagement are necessary for the moral application of principles. This leads to Collins' first key claim, that 'ethical theory should positively endorse deliberation involving sympathy and direct attendance to concrete particulars' (p.33).

The next key claim, developed in chapter three, is derived from care ethics' central focus on relationships, positioning personal relationships as central to moral experience. The purpose of this claim is to define, based on the literature, which relationships should be valued and why. Collins argues that the importance of relationships' should be defined by their value to participants. This enables a ruling out of some (e.g. abusive relationships) and expanding the consideration beyond simply the instrumental or extrinsic, all leading to her second key claim: 'To the extent that they have value to individuals in the relationship, relationships ought to be a) treated as moral paradigms, b) valued, preserved or promoted (as appropriate to the circumstances at hand), and c) acknowledged as giving rise to weighty duties' (p.47).

Chapters four and five focus on caring attitudes and caring actions, respectively, and claims they each have value distinct from one another. Collins defines what caring attitudes are, explores the circumstances in which they have moral value, and tackles potential objections to an ethical theory calling forth any attitudes on the part of the moral actor. Similarly, she defines care, gives an account of the ways in which caring actions are morally valuable, and clarifies the role of the care recipient. These form the basis of her remaining key claims: 3) 'Care ethics sometimes calls for morally valuable caring about' (p.64) in which 'caring about' refers to adopting or maintaining a caring attitude; and 4) 'Care ethics sometimes calls for morally valuable caring actions' (p. 80).

In the second section of the book, Collins sets out 'to demonstrate what a plausible, precise, unified version of care ethics might look like' (p.87), based on what she coins 'the dependency principle'. This normative principle is the core of her title – the core of care ethics. Still drawing from the literature, she offers a compelling argument for dependence as a unifying basis for care ethics before diverging from it to develop this principle 'on its own terms' (p.96) in the following two chapters. Chapter six sets out the relations and conditions under which dependency-related duties come into existence. Here we get deep into the territory of analytic moral theory. The most concise rendering of a dependency principle can be found on p.100: 'if an agent (or set of agents) is well placed or best-placed to meet someone's important interests, then the agent (set) has the duty to do so'. In the pages that follow, Collins then explores and defines key related considerations, including what is meant (and not meant) by dependency, important interests, well-placed and best-placed. In doing so, she attempts to offer a coherent basis upon which care ethicists can agree while debating the applied specifics of which interests matter more, for example, or what is too much to ask of a moral agent. Chapter seven extends the consideration of the dependency duties from individuals to groups, with Collins arguing that collectives, including states and multinationals, bear dependency duties. These collectives are not entities external to individuals who constitute them; rather, collective dependency duties are made up of individuals' duties within their respective roles in the collective. This inclusion, then, enables Collins to assign ethical responsibility to both individuals and groups in relation to dependency duties.

The final chapter goes about answering the following three questions: whether the dependency principle assigns 1) *some* responsibilities, 2) *enough* responsibilities, and 3) the *right explanation* of the responsibilities alluded to in relation to the four key normative claims identified in the first part of the book. Collins offers detailed answers to each, in the final analysis arguing all of her identified key claims are ultimately claims about dependency duties. Thus care ethics' theoretical slogan is 'dependency relationships generate responsibilities' (p.169).

In laying out her argument for this project, Collins acknowledges those care ethicist who oppose the idea that care ethics can be crystallised into a core normative commitment (or slogan). To their concerns that something important may be lost by encompassing care ethics into abstractions, she argues that without such a core, the question remains whether care ethics is actually a moral theory at all:

As long as care ethics is simply a collection of statements that have been made by people who happen to call themselves 'care ethicists,' it will be unclear what is in the theory and what is not. There is no way to know if a new claim made by a self-proclaimed care ethicist is true to the theory's guiding commitment, or whether existing claims should be rejected as they are not truly care ethical. (p.3)

All moral theories employ some degree of logical argument to address the messy details of moral dilemmas, not just care ethics. In offering an analytically constructed normative core for care ethics, Collins is not arguing that all care ethicists will agree about exactly which cases should generate which duties, but that all care ethicists can agree that the dependency principle (or something akin

Pre-publication final draft: Steckley, L. (2017). The core of care ethics [book review]. *Ethics and Social Welfare*, 11(4) 413-415. DOI: 10.1080/17496535.2017.1404733

to it) has moral weight, justifies moral claims (for example her four key claims), and explains 'exactly what it is that has that weight'.

While this will likely be a challenging read for those not accustomed to reading analytic philosophy, its rewards include not just a stronger grasp of care ethics and its coherence as a moral theory, but the analytic workings of moral theory more generally.

Reference:

Maier, Henry W. 1979. The core of care: Essential ingredients for the development of children at home and away from home. *Child Care Quarterly* 8 (3): n.p.,
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