

**Insights from Feminist Ethics of Care as a Contemporary Critical Theory
for Contesting Binaries and Imagining Possibilities**

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Early Childhood in a Gendered World: Contesting Binaries and Imagining Possibilities

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Alana Powell MA-Early Childhood Studies, Association of Early Childhood Educators, Ontario

Rachel Langford, PhD, Ryerson University

Melinda Bruce, MA-Early Childhood Studies Candidate, Ryerson University

Introduction

Since its emergence as a relational approach to morality in the 1980s, feminist ethics of care has been perceived by some critics as a feminine, colonial, humanist ethics, which lacks contemporary rigour. In this presentation, we consider these critiques of feminist ethics of care and consider how they have a homogenizing effect, which neglects the phases, adaptations, innovations and flexibility of feminist ethics of care (Hamington, 2018). Instead, we position feminist ethics of care as a robust critical theory.

To begin, we contend that ethics of care is a feminist not a feminine ethic that inherently disrupts and resists hierarchical relations that “divide people into categories and separate them from others and indeed from themselves” (Robinson, 2019, p. 11). In addition, from our perspective, both the historical and current place of care work at the personal, political and global level must be a key point of intersectional analysis (Hankivsky, 2014).

We also consider how feminist ethics of care creates opportunities to decolonize practice in early childhood education by calling on us to respond in our relations to crises (e.g. inequalities, injustices, insecurities) brought on by settler colonialism (Mooten, 2015 p. 1; Raghuram, 2016). Feminist ethics of care prioritizes the contextual, temporal, nuanced and interdependency of care and care work by requiring us to respond in-situ with careful consideration for the place and time in all our relations.

Finally, we consider, given urgent calls to decentre the human, how feminist ethics of care reminds us that in order to care *well* for our world and live well with others, we must create the conditions within which care can occur. We acknowledge that enacting care occurs simultaneously in multiple worlds, interconnected and entangled in relations between the human and the more-than-human. As such, we must continue to think with feminist ethics of care in order to create a caring imagination and capacity and to prioritize caring practices, so that we do not continue to fail to care well for our worlds.

Our Understanding of Care

We want to state upfront how we do and do not understand care. We want to dispel any assumptions that we are “softies” when it comes to care. So--- we do not idealize care as self-less feminine goodness. We do not support care as self-sacrifice. We do not see care as easy, natural, simple and perfect for nice girls who want to please everybody. In contrast, we see care as hard, learned, complex and fraught with many challenges. We see the discursive, the material, the human and the more-than human all wrapped up in messy caring encounters that can be smooth, conflictual and reparative. We understand care to be an act of embodiment in that care is always experienced materially in bodies, minds and hearts whether we give it or receive it.

We see care as an ethic because we always make decisions about what we notice is care and what we notice it is not, and about how we enact care in our social relations. The kind of care we advocate for is not paternalistic and controlling. It is not the violent state care imposed on particular communities. Care then is both ethical and political in its concerns with power relations at multiple levels.

In talking about care, we use the word “universal” only to insist that there is a universal need for care. Our priority in caring encounters is not a universal standard but rather contextual sensitivity. We do sometimes, use the word, “normative” to describe the human condition because we maintain that ethics of care is normative in its calls to relationality, interdependence and responsibility. However, our use of the term “normative” is not the same as “closing off to” the one right way to thinking about and practicing care.

Finally, while we describe care as a feminist ethic and as an ethic of resistance to patriarchy, we do not ignore other forms of oppression---settler colonialism and anti-black racism ---which are multiple and interlocking and given time and place the basis of oppression, persecution and exclusion. (Hyndman, (2004) quoted in Robinson, 2019).

The Feminine Ethics Critique

Some critics perceive ethics of care as a feminine ethics—one that is unique to women. How did this criticism arise? In 1982 Carol Gilligan, a moral psychologist, pioneered ethics of care when she questioned Lawrence Kohlberg’s conclusion that girls’ (and therefore women’s) moral development is deficient. She found in her research that girls seek solutions to ethical dilemmas through care relations, particularity, empathy, and contextual sensitivity rather than through impartial, abstract principles. Most importantly for the focus of this conference, Gilligan, on the basis of this research, set out a new moral paradigm, one that is not an addition to or an adjustment of morality based on abstract principles. She called this brand-new moral paradigm-an ethic of care- and at its core it dismantles the binaries and its

hierarchies of the self *over* relationality, the mind *over* the body, the disembodied *over* the embodied, and reason *over* emotion. Susan Hekman (2014, p. 76) writes that in Gilligan's rejection of traditional moral thinking, "the rug was pulled out from underneath the autonomous, disembodied subject" and the moral and political theory it grounds.

How did she do this dismantling? Gilligan found in listening to girls' narratives on responding to ethical dilemmas that they struggle to separate themselves from relationship and to choose reason over emotion and the body. Gilligan also found that many girls silence their struggles or voice, as Gilligan calls it, and uphold the separations to preserve relationships. She writes in her 2011 book, *Joining the Resistance*, that consequently "[these] separation(s) entail a sacrifice of both voice and integrity in relationship and lead girls and women to lose touch with what they know and who they are" (p. 76).

While some feminists embraced Gilligan's claims, her reference to girls' care narratives as a different voice along with its comparison to a masculine voice of justice appeared on the surface, for some critics, to reinforce a feminine/masculine binary. On top of this, in 1980s, Sara Ruddick (1989), asserted, from a philosophical perspective, the value of maternal thinking, long considered without moral merit, for promoting important ethical values. Furthermore, Nel Noddings (1986), an educational philosopher, insisted on the centrality of women's maternal experiences in the development of care ethics. This seemed to some to reinforce the claim that care is a feminine ethic.

In response Gilligan, Noddings and many other second and third generation feminist care scholars, including ourselves, began to explicitly reject reading ethics of care as promoting a feminine/masculine binary. We will discuss two ways they and (we) do this. The first way is to argue that if all humans are born "second persons" in relation to others and this interdependence fosters caring about others then care can not be natural to a certain gender. Ethics of care, therefore, subverts not only the feminine/masculine binary but also a presumed natural hierarchical order in which some persons care and others do not. Thus, Fiona Robinson, a political scientist, (2019) argues that feminist ethics of care resists hierarchical relations that, as she says, 'divide people into categories and separate them from others and indeed from themselves" (p. 13). Similarly, in a 2018 book Gilligan and Naomi Snider emphasize that "the different voice is identified not by gender but by theme" setting it apart from moral theories that uphold binaries and hierarchies (p. 37). They argue that ethics of care is a human voice "that joins thought and emotion, mind with body, self with relationship" (p. 37). Consequently, contemporary care scholars are more concerned with questions such as the meaning of embodied care and the loss of the capacity to care.

A second way of addressing the assumption that care is a feminine ethic is by emphasizing that ethics of care emerged out of girls' and women's concrete everyday experiences with caring under patriarchal conditions. Sandra Laugier, (2019) a care scholar interested in care as a politics of the

ordinary, highlights these conditions, “The assignment of women to the domestic sphere has reinforced the exclusion of these activities and preoccupations from the moral domain and the public sphere, reducing them to the rank of private sentiments devoid of moral and political import” (p. 31-32).

What first generation ethics of care scholars did then was to excavate and elevate from the depths of marginalization the lived experiences and voices of girls and women who make hard, messy, complex ethical decisions in their care of others. This excavation work that strives to end the silence around the realities of the human condition continues to be the focus of contemporary care scholars including our own work in early childhood education.

However, we emphasize again that this is not work on care as feminine. Care is understood only a ‘feminine practice’ under patriarchy and other forms of oppression. As Gilligan (2011, 2019) maintains when ethics of care is “released from its subsidiary condition” in patriarchy then it will become a human ethic. Gilligan (2011) goes even further, writing that ethics of care grounded in voice and relationality [is] “an ethic of resistance to injustice and to self-silencing. It is a human ethic, integral to the practice of democracy and to the functioning of a global society. It is a feminist ethic, an ethic that guides the historic struggle to free democracy from patriarchy” (p. 175). In light of Gilligan’s call for resistance, we maintain that the premise that care is a feminine ethic actually upholds a patriarchal framework in which gender binaries and hierarchies remain intact and entrenched.

This radical vision of care as a human ethic is particularly evident in Joan Tronto’s (2013) political conception of a caring democracy. Here Tronto envisions a world in which care and democracy are two sides of the same coin—we that is all humans—cannot live democratically and foster justice, equality and mutual respect for all without recognizing that care is a universal human experience, carried out in multiple, complex and context specific ways, and that care is everyone’s responsibility. Still, while care as a human and democratic ethic is the imagined possibility, it is not possible to de-genderize the practice of care because under patriarchal, racist, capitalist, and colonial conditions at the personal and global level women are still assigned most care work. This is the troubling tension that care scholars struggle with between viewing care as a human ethic and the reality of care regarded and experienced as women’s work. In our own struggles, we are trying in multiple ways to position care as a complex ethic for fostering careful ordinary everyday human and more-than-human relations in early childhood politics, policy and practice.

Further, second and third generation ethics of care scholars resist universalizing what constitutes the notion of women (and men in some contexts) when we talked about care work. Some of these scholars advocate for the use of the concept of intersectionality to address what they see as Western-centric tendencies in feminist ethics of care. For example, Olena Hankivsky, a sociologist, writes that “intersectionality which is concerned with understanding the multifaceted, complex, and interlocking

nature of social locations and power structures and inequities” can enrich theoretical, methodological and practical understandings of contemporary care work (p. 253). Similarly, Parvati Raghuram (2019), a geographer, urges the use of intersectionality as a method for examining how slavery and colonialism have constructed racial hierarchies that mark contemporary racialized care encounters across place.

In contrast, some ethics of care scholar suggest that the concept of intersectionality is best for analyzing power structures and inequities in care work. In thinking about care as an ethic, Robinson (2019) argues “rather than glossing over intersecting differences-of race and place, for example-the assumption of difference inheres in the very core of the relational subject” (p.14).

The Colonial Ethics Critique

We come to thinking about what the feminist ethics of care offers a decolonizing project with an awareness and sensitivity to what Tuck and Yang (2012) describe as a white settler academic move which employs decolonizing as a metaphor when speaking of a particular project, like early childhood education. We acknowledge that “the decolonial desires of white, nonwhite, immigrant, postcolonial, and oppressed people, can similarly be entangled in resettlement, reoccupation, and reinhabitation that actually further settler colonialism.” (Tuck and Yang, 2012, pg. 1) and as such we resist any calls to define or predetermine what practices of decolonization should be in early childhood education. Instead, what we hope to do, is consider what the feminist ethics of care, as a critical moral theory and practice, opens to and offers when thinking of the work of disrupting settler colonialism.

We understand settler colonialism to be an ongoing project, deeply connected to land which is not only a means of maintaining capital, power, and profit – but recognizing, as Tuck and Yang describe that “the disruption of Indigenous relationships to land represents a profound epistemic, ontological, cosmological violence” (Tuck & Yang, 2012, pg. 5). From this, we then prioritize thinking with feminist ethics of care about possibilities for resisting, interrupting and disrupting the settler colonial project, without creating a normative framework for how that is to be done. Instead we seek to explore the ways feminist ethics of care and postcolonial ethics, as suggested by Uma Narayan, can be “ ‘collaborators’ rather than ‘contenders for theoretical primacy or moral and political adequacy’” (Mooten, 2015, pg. 3).

To begin, then, we must consider the themes, or elements of feminist ethics of care which open towards the decolonizing project. Robinson (2019) responds to critiques that feminist ethics of care is a homogenizing Western white women’s theory. These critiques suggest that feminist ethics of care thinking, as Raghuram writes “occurred from and through unnamed locatedness in the global North ... This locatedness is embedded through the histories that the literature on care ethics draws upon – feminist theorisations of care from a stellar cast of women, reflecting on care and ethics and within the context of

late twentieth century feminist politics in the global North.” (Raghuram, 2016, pg. 517). While Raghuram accurately describes the locale of the emergence of the feminist ethics of care, she makes a leap in claiming that the *work* of feminist ethic of care is homogenizing, and colonizing, normative care practices or morality. Robinson (2019) takes up these claims, calling on “theorists of care ethics to draw out, deepen and make more visible the ways in which the feminist ethics of care” resists homogenizing and colonizing care as it dismantles “the co-constitutive hierarchies of power – including (but not limited to) those of race and ‘place’” (pg. 4). We will look now to the integral elements of feminist ethics of care and consider how, and in what ways it is open to the decolonizing project.

As a relational ontology, the feminist ethics of care provides opportunity to disrupt and contest dominant Modernist and post-colonial thought – its resulting binaries and hierarchies included –, and the settler colonial project. As Robinson (2019) states, “In its repudiation of the modern, disembodied moral subject, care ethics opens the door to the relational subject – connected, situated, heterogenous, plural” (p. 3). In its prioritization of relationality, feminist ethics of care offers a way of thinking and being with others that recognizes and responds to them *in-context*. In recognizing and responding to others, each of us must also recognize and respond to the contextual nuances, histories, and complexities that entangle us in webs of binaries and hierarchies. This relational ontology is one way we see feminist ethics of care opening towards disrupting settler colonialism – by requiring an engagement in, as Robinson writes, “foregrounding the ways in, and extent to, which contemporary ontological hierarchies and epistemological binaries are a product of the long history of the European project of modern colonialism” (Robinson, 2019, pg. 4).

Feminist ethics of care does require and demand of us relationality, interdependency, responsibility, and that we prioritize the contextual, temporal, and nuances of care and care work, yet it does *not* define a universalizing, homogenized, moral framework or a right/wrong way to care. Rather it works to create possibilities for critiquing the logics of Western modernity that have informed our understanding of morality and the colonial and neocolonial projects *in-context*. In recognizing, naming, and responding to the ways that Western and colonial logics have worked to shape our understanding of dominant binaries and hierarchies (self/other, mind/body, male/female) feminist ethics of care takes an essential step to contesting them.

As Robinson (2019) suggests, the view of feminist ethics of care as a universalizing and homogenizing moral theory makes visible the depth of Western and colonial logics. In a way, this view places these logics *on to* and at the forefront of the theory’s current work, instead of noticing the intersections of Western colonial logics, the feminized and western origins of feminist ethics of care, and how it calls on us to *act and do otherwise*. We understand that in valuing and being responsive, attentive, attuned to the contextual, and active in naming and disrupting binaries-hierarchies, we create space and

opportunity for ‘otherness’, difference, to be welcomed. This is how, in theory and in action, feminist ethics of care strips power from the settler colonial project which violently displaces and oppresses difference, it does this *through* relationships and relationality. The feminist ethics of care calls on us as relational subjects to acknowledge and be unsettled by, in context, what settler colonialism has and continues to make.

But it is not enough for us to acknowledge. The feminist ethics of care also calls on us to take responsibility for the other, and our embeddedness in this web of power, hierarchies and binaries, and respond in a way that cares for, and with, the other – an act that creates space for a decolonizing project. As the feminist ethics of care requires us to think deeply about the contextual, temporal, nuanced and interdependency of care and care work we are then required to *respond*, and take responsibility, in-context, and with careful consideration for the place and time in all our relations.

Feminist ethics of care offers space to take up a what Raghuram, Madge and Noxolo describe as a ‘postcolonial responsibility [which] means that we are not talking about ‘distant others’ but others whose lives and modes of living are still proximate ... and influenced by (neo)colonialism in its variegated forms.’ (Raghuram, Madge, Noxolo, 2009, pg. 9, as cited in Mooten, 2015, pg. 8) To this, Mooten (2015) considers how feminist ethics of care and postcolonial responsibility create a “weakening of the boundaries between self and other [which] strengthens not only the interdependence that characterizes postcolonial relations, but also brings to light the many inequalities that inhere within global feminized postcolonial relations.” (p. 9).

In opening towards and taking up a postcolonial responsibility, ethical care and caring relations can create the opportunities to explore difference while disrupting hierarchies as part of a decolonizing project - as Spivak suggests “‘we all know when we engage profoundly with one person, the responses – the answers – come from both sides. Let us call this responsibility. And ‘answerability’ or accountability” (Spivak 1998, pg. 340 as cited in Mooten, 2015, pg. 10). If we can, in caring relations in-context, take on this responsibility as both postcolonial and feminist ethics of care theories requires of us, then we can not only take up what unsettling settler colonialism means in a way that values and cares *with* difference, but we can make important movements in the work of decolonizing our contexts.

To think with an example, early childhood education in Ontario continues to be dominated by Western, colonial and neoliberal logics. We see shifts and movements in pedagogical approaches, dominant theories, and regulation/quality assurance which work to inform “best practices” and our understandings and expectations of children in our programs. These approaches may appear innocent, but define and ‘other’, creating binaries and hierarchies – ways of being, learning, and doing that are right/wrong, better/worse. They also do this without recognition of the contextual, the nuanced, the histories of place – they are colonizing and universalizing. In one way, thinking with the feminist ethics

of care – and the urgent need to dismantle settler colonialism - we can imagine the possibility that opens when we think of pedagogy and curriculum as something created *with care*, in-context, which responds to the web of power, complexities, histories, hierarchies and binaries that problematize difference and violently create an ‘other’ – that opens to ways of being.

In concluding this section, it’s important to make clear we are not suggesting here that feminist ethics of care is a panacea solution for decolonizing projects - nor should it be - but what it does offer is a starting place that allows for critical unsettling work to begin through ethically caring relations and imagined possibilities in practice with young children.

The Human-Centric Critique

We’d like to bring your attention to another critique levelled at feminist ethics of care: that it is too human-centric. Today, we’d like, in part, to situate our response to this critique in early childhood education as a result of recent calls to de-centre the human, the adult specifically in early childhood practice, and to deepen the conversation and complexify care ethics. For some, feminist ethics of care in early childhood education has not gone far enough.

In response, we argue that feminist ethics of care *does* make space for this wider, more-than-human lens. We offer, however, a nuanced view: feminist ethics of care is, as we noted a ‘human ethic;’ but one that de-centres the *individual* human. Perhaps not unlike posthumanist interpretations of care ethics offered by feminist scholar, Maria Puig de la Bellacasa’s in her 2017 work, *Matters of Care: Speculative Ethics in More Than Human Worlds*, we understand the position of the human within feminist ethics of care as situated, entangled, uncertain and unknowing in complex care relations.

First, we’d like to point you to feminist ethics of care scholars, Bernice Fisher and Joan Tronto’s widely cited definition of care that says:

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* (Fisher & Tronto, 1991, as cited in Tronto, 1993, p. 103).

This definition leads with an important point: care is viewed as a human, ‘species activity.’ While at first it appears to affirm a neoliberal perspective of the individual who exerts a certain force over the material world, making it and repairing it, controlling it and managing it, Fisher and Tronto’s second part of this definition defies this neoliberal interpretation. It is not neoliberalism intention to ‘seek to interweave in a complex, life-sustaining web;’ there is no place, as Peter Moss (2014) says, for “complexity and messiness, diversity and context” (p. 66). In fact, Tronto (2013) notes that “from the standpoint of an

ethic of care, neoliberalism is a disastrous worldview” (p. 38). The human situated in the Fisher and Tronto definition is not a neoliberal one, but a relational one (Tronto, 2013). Furthermore, Fisher and Tronto’s assertion that the world includes *more* than the human, the ‘environment,’ comprised of complex relational webs whereby care is an activity, rather than a universalizing ethic, is an important point. And one that Tronto (2013) raises when she writes about her earlier definition of care : “In arguing that care is an activity, a kind of practice, we left open the possibility that there might be other forms of care that are not on this ‘most general level’” (p. 19).

Beyond this definition of care, when we consider Tronto’s (1993; 2013) phases of care that include caring about, caring for, care giving, care receiving and caring with, what is crucial is the acknowledgement of the relationalities *in* and *between* these care phases. They are not linear phases or steps; and they do not hierarchically situate the care giver over and above the care receiver. Feminist ethics of care accounts for a multiplicity embedded in ethical care activities, forming solidarities (not necessarily in agreement) with not only the ‘other,’ but also with the ‘many.’ Tronto (2013) writes: “What is important to keep in mind is that claims made about individuals that do not place them in a relational setting will be incomplete” (Tronto, 2013, p. 37).

Further, moving beyond the definition of care that Fisher and Tronto offer, we also want to point to Tronto’s (2013) assertion that “caring practices can be *nested*” (p. 21) along with an important fifth phase of care, “caring with” (p. 23) We view the nesting of care practices and the ‘caring with’ as central to understanding the individual as decentred in feminist ethics of care. Interestingly, Tronto’s (2013) “caring with” is not widely discussed by posthumanist scholars who engage with care and care ethics. However, it is precisely this, that care happens *with* others *and within* other care practices, of which are informed, constructed and constituted by other wider (or specific) social, political or even material and environmental contexts, that allows us to think more broadly about feminist ethics of care. Nested care and ‘caring with,’ much like Tronto’s (2013) earlier assertion that ‘other forms of care’ are possible, leaves the door open to consider more-than-human ethical relations within feminist ethics of care.

The attention paid to ‘caring with’ argues for multiplicity as well as solidarity in societal, democratic spheres calling for “justice, equality, freedom for all” (p. 23). While the focus is certainly on ‘*all*’ humans in her work, in her preface Tronto (2013) notes that this ‘caring with’ is most of all concerned with caring about care and caring about the future and “with whom one disagrees, as well as the natural world and one’s place in it.” (Tronto, 2013, p. xii). We think this is a really important point that shows that “caring with” and nested caring practices include pluralities, dissonance, tensions that cannot always be resolved by an ideal, ethical human at the centre. We think this is certainly the case in early learning environments when we consider children as both care receivers and care givers, with agency and as participants in ethical encounters with humans and non-human.

Another idea that emerges from feminist ethics of care work, specifically in relation to early childhood education, that exposes the individual as decentred, are the concepts of uncertainty, unknowing and partial knowledge. For example, feminist ethics of care scholars, Langford and Richardson (2020) write that an “ethics of care embraces the unknown and unpredictability of human relations” (p. 36). This sentiment echoes the critiques of early childhood scholars such as Sonja Arndt and Marek Tesar (2019) who argue for an “ethics of unknowing” to replace an ethics of care (p. 38). They suggest that a shift is required to focus on what is unknowable and to move “beyond the purely human. . . adult-centric lens” (Arndt & Tesar, 2019, p. 54). However, we think that feminist ethics of care, does in fact support this move.

The idea that educators have partial knowledge of a child’s needs is precisely at the heart of Tronto’s (2013) first phase of care, ‘caring about.’ Feminist ethics of care as expressed in care as ethical interactions in early learning settings, for example, does not position the adult as overseer, as controller; rather, the adult is closely attuned and responsive to ever-evolving and unpredictable encounters (Langford & White, 2019). Langford & White (2019) offer an important nuance to determining a child’s needs, writing: “. . . reflection on contexts should not make a child so knowable to an educator that the educator is no longer open and sensitive to what the child is trying to tell her” (p. 66). The educator is not at the centre of the caring ethical act. In fact, Langford and White (2019), and perhaps Tronto (2013), would perhaps argue that the adult has *never* been at the centre of feminist ethics of care as understood in early childhood education. Acts of ethical care are precisely in opposition to acts of control, certainty and a linear focus on developmentalism or a universal ethic. Feminist ethics of care is situated in partial knowledge, uncertainty and rejects instrumentality, hierarchies, the human/more-than-human binary in the same way that it is incommensurate with the patriarchal, neoliberal and colonial agenda.

In the introduction to her book, Maria Puig de la Bellacasa (2017) says that: “Care is a human trouble, but this does not make of care a human-only matter” (p. 2). We agree. Feminist ethics of care calls upon us to act, often motivated initially by human interaction, *with* humans; yet, it does not situate *the* human above all other relationalities. The decentred human in feminist ethics of care, and within early childhood education especially, functions within entangled, situated and webs of caring relations which are continually questioned, unknown and formed in every unique encounter. There is no ethical, caring formula in feminist ethics of care and yet, there is a commitment to engage in ethical care with other humans. As Puig de la Bellacasa (2017) concedes: “. . .ethics remains a human thought” (p. 218); and yet, there is certainly space within feminist ethics of care and Tronto’s work specifically, to consider more-than-human possibilities and relationalities.

Conclusion

We hope that our presentation has created opportunities and possibilities to revisit feminist ethics of care as a contemporary critical theory. We have advanced three ways in which feminist ethics of care opens to post-foundational and post-colonial thought and work. We hope you will consider ways that you might think with feminist ethics of carer, alongside other theories, as we continue to reconceptualize our ways of being and doing in relations.

References

- Arndt, S. & Tesar, M. (2019) An ethics of care in culturally diverse early childhood settings: Toward an ethics of unknowing. In R. Langford (ed.), *Theorizing Feminist Ethics of Care in Early Childhood Practice: Possibilities and Dangers*. 37-55. London: Bloomsbury.
- Gilligan, C. (1982). *In a different voice: Psychological theory and women's development*. Cambridge, MA: Harvard University Press.
- Gilligan, C. (2011). *Joining the resistance*. Cambridge, UK: Polity Press.
- Gilligan, C. & Snider, N. (2018). *Why does patriarchy persist?* Cambridge, UK: Polity Press.
- Hamington, M. (2018). The care ethics moment: International innovations. *International Journal of Care and Caring*, 2(3), 309-18.
- Hankivsky, O. (2014). Rethinking care ethics: On the promise and potential of an intersectional analysis. *American Political Science Review*, 108(2), 252-264.
- Hekman, S. (2014). *The feminine subject*. Cambridge, UK: Polity Press.
- Hyndman, J. (2004) Mind the gap: bridging feminist and political geography through geopolitics, *Political Geography*, 23(3): 307–22. doi: 10.1016/j.polgeo.2003.12.014
- Langford, R., & Richardson, B. (2020). Ethics of care in practice: An observational study of interactions and power relations between children and educators in urban Ontario early childhood settings. *Journal of Childhood Studies*. 33-47. Doi:10.18357/jcs00019398
- Langford, R. & White, J. (2019) Conceptualizing care as being and doing in ethical interactions and sustained care relationships in the early childhood institution. In R. Langford (ed.), *Theorizing Feminist Ethics of Care in Early Childhood Practice: Possibilities and Dangers*. 59-77. London: Bloomsbury.
- Laugier, S. ((2020). The ethics of care as a politics of the ordinary. In S. Bourgault & Frans Vosman (eds.) *Care ethics in yet a different voice: Francophone contributions*. (pp. 29-57), Leuven, Belgium: Peeters Publishers.
- Moss, P. (2014). The story of neoliberalism: A grand narrative of our time. *Transformative Change and Real Utopias in Early Childhood Education: A story of democracy, experimentation and potentiality*. 60-74. London: Routledge.
- Mooten, N. (2015). Toward a postcolonial ethics of care: In what interest, to regulate what sort of relationships, is the globe evoked? Gayatri Spivak, <https://ethicsofcare.org/author/nmooten/>
- Noddings, N. (1986). *Caring: A feminine approach to ethics and moral education*. Berkeley, CA: University of California Press.
- Puig de la Bellacasa, M. (2017). *Matters of Care: Speculative Ethics in More Than Human Worlds*. Retrieved from <https://ebookcentral-proquest-com.ezproxy.lib.ryerson.ca>
- Raghuram, P. (2016). Locating care ethics beyond the global north. *ACME: An International Journal for Critical Geographies*, 15(3), 511-33.
- Raghuram, P., Madge, C. & Noxolo, P. (2009). Rethinking responsibility and care for a postcolonial world. *Geoforum* 40(1): 5-13.
- Robinson, F. (2019). Resisting hierarchies through relationality in the ethics of care. *International Journal of Care and Caring*, 4(1), 11-23.
- Ruddick, S. (1989). *Maternal thinking: Toward a politics of peace*. Boston, MA: Beacon Press.
- Spivak, G. (1998). Cultural talks in the hot peace: Revisiting the “Global Village”. In *Cosmopolitics: Thinking and Feeling beyond the Nation*, eds. P. Cheah and B. Robbins, (pp. 329-48), University of Minnesota Press.
- Tronto, J. (2013). *Caring Democracy: Markets, Equality, and Justice*. New York: New York University Press.
- Tuck, E. and Yang, K. W. (2012). Decolonization is not a metaphor. *Decolonization: Indigeneity, Education & Society*. Vol 1, no. 1 pp. 1-40