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Book Symposium: Asha Bhandary's Freedom to Care

Asha Bhandary's *Freedom to Care* — A Kantian Care Engagement

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Abstract

This review locates Asha Bhandary's *Freedom to Care* in the history of philosophy, notes some of the theory's distinctive features that clearly advance the care theory tradition, and raises some puzzles and questions regarding specific elements of the theory. My remarks focus mostly on Part I of the book and on the following four topics: (1) Bhandary's Rawlsian roots, (2) Bhandary's engagement with Eva Feder Kittay, (3) Bhandary's choice of J. S. Mill and John Rawls as her main historical interlocutors, and finally, (4) Bhandary's methodological choice of 'men/fathers,' 'women/mothers,' and 'children/ girls/boys' as the main focus of much of her analysis.

Résumé

Cette analyse situe la théorie du soin d'Asha Bhandary, telle que définie dans *Freedom to Care*, dans l'histoire de la philosophie, note certaines caractéristiques distinctives de la théorie qui font clairement évoluer la tradition de la théorie du soin, et soulève des énigmes et des questions concernant des éléments spécifiques de la théorie. Mes remarques portent principalement sur la première partie du livre et sur les quatre sujets suivants : (1) les racines rawlsiennes de la théorie de Bhandary ; (2) les échanges de Bhandary avec Eva Feder Kittay ; (3) le choix de Bhandary de prendre J.S. Mill et John Rawls comme principaux interlocuteurs historiques ; et enfin (4) le choix méthodologique de Bhandary de cibler les « hommes/pères », les « femmes/mères » et les « enfants/filles/garçons » dans une grande partie de son analyse.

Keywords: care; dependency; Kant; Kittay; Mill; Rawls

1. Introduction

Asha Bhandary's excellent *Freedom to Care*¹ presents a rich and compelling theorization of liberal dependency care; it is sophisticated and innovative, and it engages much existing care and liberal care theory in tremendously interesting and productive

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¹ If no other reference is given, parenthetical page references are to Bhandary's Freedom to Care.

ways. In addition to locating *Freedom to Care* in the history of philosophy and noting some of its particularly attractive features — especially with regard to identifying the actual structure of dependency work in a society — I also identify some aspects of it that I find myself less sure about. Not surprisingly, the general tenor of my engagement is Kantian in nature. My remarks focus mostly on Part I of the book and on the following four topics²: (1) Bhandary's Rawlsian roots, (2) Bhandary's engagement with Eva Feder Kittay, (3) Bhandary's choice of J. S. Mill and John Rawls as her main historical interlocutors, and finally, (4) Bhandary's methodological choice of 'men/fathers,' 'women/mothers,' and 'children/girls/boys' as the main focus of much of her analysis. My overall aim is to continue the conversation about how we can improve our inherited (liberal) theories and practices with respect to care relations, now also with the help of Bhandary's terrific *Freedom to Care*.

2. Bhandary's Rawlsian Roots

In order to appreciate both the structure of Bhandary's account of liberal dependency care, as well as my engagement with it below, it is useful to situate it historically. A natural staring point here - and Bhandary agrees - is Rawls. One remarkable thing about Rawls was his ability to support women graduate students, who in steadily increasing numbers entered Western academia from the late 1960s onward. Harvard was, if not the first, at least one of the first (and maybe the most successful) universities to create research conditions that were sufficiently supportive of women. One of the results of this was that quite a few remarkable women Kantian feminist and political philosophers came out of Harvard's philosophy department early on. For example, from the late 1960s into the 1980s, their philosophy PhDs included such women as Onora O'Neill, Susan Moller Okin, Barbara Herman, Jean Hampton, Adrian M. S. Piper, and Christine Korsgaard.³ Although Rawls did not supervise all of them, he seems to have been a critical factor in making it possible for Harvard to successfully support women philosophers. Each of these thinkers has made important contributions to feminist and Kantian philosophy generally and, as we will see shortly, without them, there may well not have been such rich Rawlsian-inspired and Kantian philosophy of care scholarship today.

Another well-deserved compliment to Rawls is, in my view, that although his original theory of justice as fairness was not deeply informed by or sensitive to feminist concerns, not only was he susceptive to them once they were raised, but many important objections and alternative Kantian approaches came from exactly these women graduates from Harvard. To see why and how, note that Rawls's theory of justice as fairness was originally informed by Immanuel Kant's (meta-) ethical writings especially the *Groundwork for the Metaphysics of Morals* and the *Critique of Practical Reason* — and it was an attempt to construct a Kantian, procedural social contract theory that utilized the framework of a rational choice theory within an empirical framework. Relatively early on, some of these thinkers, such as O'Neill

 $^{^{2}}$ This focus entails that there are many topics, ideas, and proposals in Bhandary's work with which I cannot engage this time around; it is plainly a much too rich and interesting book to be able to engage with all of it in such a short review.

³ For an overview of the entrance of women into Kant scholarship, see Varden (2020b).

and Herman, turned away from Rawls's justice as fairness in their explorations of both Kantian ethics and Kant's legal-political philosophy.⁴ Rawls clearly must have come across as encouraging his students to trust their own minds — *sapere aude!* — rather than dogmatically follow his lead. Consequently, too, however, the work of these women Kantian scholars, and those who have followed their general lead here,⁵ tend to be less familiar to scholars who work more closely within Rawls's Kantian framework, including Bhandary. Moreover, I argue below, some problems in care theory require philosophical tools that are not available in Rawls's philosophy but are available in Kant's, such as the problem of how to give proper representation to people whose cognitive abilities are such that they cannot represent themselves in the original position. Hence, I believe that care theory will be strengthened if bridges are built to reach those who went in different Kantian directions than Rawls.

Rawls's A Theory of Justice (Rawls, 1999a) presents civil society as a socially collaborative response to what David Hume calls 'the circumstances of justice,' which Rawls understands as the conditions of "conflict of interest" and "moderate scarcity of resources" (Rawls, 1999a, p. 110). With Hume, Rawls argues that if these circumstances of justice did not exist, then "there would be no occasion for the virtue of justice" (Rawls, 1999a, p. 110). The justification of the state's uses of coercion, in turn, is that it better enables us to deal with these inconveniences characteristic of life on our own (in the so-called 'state of nature'). Bhandary situates her project as a continuation of this fundamental assumption regarding the circumstances of justice (p. 9).

Central to Rawls's theory of how to envision our socially collaborative project are certain, by now well-known, theoretical devices, such as the 'original position,' the 'list of primary goods,' and the 'veil of ignorance.' They are devices that allow us to envision or clarify how we reason when we reason well about basic questions of justice — a reasoning that is ultimately enabled by our two moral powers to have a sense of justice ('reasonable') and a conception of the good ('rational'). Correspondingly, Rawls proposes that his two basic principles of 'justice as fairness' can be seen as hypothetically chosen by any one and all of us insofar as we reason or deliberate in line with our deepest convictions of justice (so understood). Later — in the work that culminated with his *Political Liberalism* (Rawls, 1993) — Rawls re-envisioned his theory of justice as fairness as one of a family of liberal, political theories that are possible, competing candidates for critiquing the idea of justice in modern, liberal democracies. And this is where I would like to make a first stop to query Bhandary.

I find it difficult to figure out whether we should think of Bhandary's liberal dependency care account as one (the best) of these competing liberal, political theories *or* if she thinks of her theory more along the lines of Rawls's original

⁴ For the work that may be most well known and relevant here, see Herman (1993) and O'Neill (1996, 2000).

⁵ For example, I'm thinking of Hay (2013), Hay & Varden (2022), LaVaque-Manty (2006), Papadaki (2010), Pascoe (2011, 2013, 2015), Varden (2006, 2012, 2018, 2020a, 2020b), though note if we just focus on the issue of Kant and women, then the list becomes much more extensive. For an overview of much of this literature, see Varden (2020b). Note, however, that Bhandary's book contains an excellent overview of the rest of the care tradition's many thinkers and contributions; it is plainly a terrific resource for faculty and students alike in this regard.

('comprehensive') 1971 aspirations for his theory of justice as fairness. Sometimes, my impression is that she wants her theory to be, in Rawls's (political liberalism) terminology, 'political, not metaphysical,' but given that she wants her theory to be global in reach and thus to cover not only societies characterized by the 'fact of reasonable pluralism' but also what Rawls in his *The Law of Peoples* (unfortunately) calls "decent societies" (Rawls, 1999b, *passim*), I find myself puzzling over exactly how she would situate her own work in relation to these other theories. This leads me to a general puzzle regarding how Bhandary conceives of the distinction between what we might call the 'spheres of ethics' (non-enforceable aspects of morality) and 'justice' (enforceable aspects of morality). Let me expand a little on each of these points.

Bhandary speaks to some these puzzles, explaining that her theory is "shallow yet wide," and she borrows from Amy Baehr to clarify what she means (p. 102). According to Baehr, a 'deep' liberalism "presents its recommendations, whether or not they are to be enforced with state power, as grounded in an accurate account of morality" (p. 102). Because Bhandary does not ground her account in a theory of morality but in an account of autonomy, she argues that it is

shallow yet wide. Liberal dependency care holds that autonomy is needed for real people as political beings, and in this way the doctrine is only targeted at a narrow scope. Nevertheless, it recognizes that citizens are embodied human beings who will also possess these skills in their private lives, and this unintended consequence makes the commitment to autonomy a wide one. It is shallow because the value of autonomy in liberal dependency care is not based in claims about the metaphysical truth of reason as the origin of morality and autonomy. (p. 102)

So, Bhandary's liberal dependency care account is shallow (and not deep) because it only applies to political beings, it is not metaphysical because it does not critique the foundations or ultimate sources of its principles of just dependency care (a theory of morality), and it is wide because autonomy skills do not operate only in people's political lives but also in their private ones. My worry, however, is that if the theory is global in reach — and thus applicable to all nations across the globe and not only liberal ones — then the lack of a critique of her theory's own normative foundations ('metaphysical' or 'deep') means that the source of the authority of the theory is unclear in ways that invite the objection that it universalizes contingent (Western liberal) forms of life.

This concern about the 'depth' of the theory also relates to Bhandary's bracketing of the question of the theory's relationship to coercion. Bhandary is very clear that she does not want to take a stance on how her theory deals with coercion (p. 10), while Rawls is very clear that he does think that the 'basic structure' (the basic, public legalpolitical institutions) is inherently coercive in nature. For Rawls, public laws and policies governed by the principles of justice as fairness are, by definition, coercive. They are determined by the legislative authority, applied to conflicts and disagreements through the judiciary authority, and enforced by the executive authority. In addition, taxation is required to finance the related laws and policies — and taxation is not voluntary, but coercive. If we follow Bhandary's lead of setting aside the tricky question of coercion, including the question of how much of care is to be financed by taxation, then I worry that we cannot speak to how we go about realizing the principles of her theory without thereby doing wrong. In addition, if we go this route, then we cannot use her theory to convince theoretical and political libertarians of most stripes. Problematically too, in my view, is that if so, then the theory does not yet have the philosophical resources we need to address the problem of coercion as we move forward in terms of institution building. If we did have those resources, and if they were to listen, then central actors such as supreme court judges, national politicians, and national executive officers would be able to better understand the complexity of the matter and do better. Moreover, if the principles of justice as fairness as well as the additional principles Bhandary proposes as necessary to enable good care relations are not to be coercively enforced, then I am not sure why Bhandary is hesitant to include such emotions as affectionate love, which she agrees is constitutive of caring relations involving intimacy. That is to say, although I agree that much caregiving is simply doing the hard labour, such as turning one in the hospital bed to avoid bed sores, anyone who has spent some time in a hospital bed knows the difference between being treated by a competent, unkind, and uncaring caregiver and a competent, kind, and caring one. Indeed, insofar as one struggles with the will to live, these differences in the provision of care can be experienced as life-determining. In my view, this is one point where an engagement with such feminist Kantian thinkers as O'Neill, Herman, Carol Hay, and myself would be fruitful. Our discussions agreements and disagreements - delve into the distinctions between ethics and rights, including by discussing how much work imperfect duties can and should do in Kantian theories, general discussions surrounding poverty and taxation, how to make space for vulnerable aspects of our being, and the histories of oppression tracking the complexities of caregiving and care-receiving.

3. Bhandary's Engagement with Kittay

At this point, let us turn back to the historical development of Rawlsian thought in directions that ultimately paved the way for Bhandary's liberal dependency care theory. It is uncontroversial to say that the most important facilitator of these care transformations of Rawls's theory was one of the Harvard graduates mentioned above, namely Okin. Okin's momentous *Justice, Gender, and the Family* (Okin, 1989) criticized Rawls's (and other prominent liberal accounts at the time for their) inability to critique the asymmetry of dependency care relations, the importance of human vulnerability for theories of justice, and the complexity of justice in the family. Okin's line of criticism was tremendously influential and appreciated (also by Rawls), and it was soon joined not only by scholars who criticized the prominent liberal theories but also by those who sought ways to re-envision Rawls's theory so that it could theorize care relations better. One of these early, key players is one of the main inspirators for Bhandary's work, namely Kittay.

Kittay's *Love's Labor* (Kittay, 1999) was a game changer in Western philosophy in general and care theory in particular. Having studied at the Graduate Center at CUNY, Kittay was trained in a distinctly 'continental' approach, in contrast to the 'analytical' bent of Harvard philosophy. She also knew first-hand and was early on

deeply troubled by the philosophical canon's limitations with regard to understanding motherhood and disability. Hence, in good continental tradition, she used her own life experience actively in her pursuits to improve the state of affairs in philosophy. Love's Labor contains her first remarkable reflections on motherhood and disability, a proposal for how Rawls's position can be re-imagined to take into account the issues identified by Okin, as well as the general challenges Kittay found characteristic of all dependency relations of care. As Bhandary explains concisely in her book, Kittay argues that if we take seriously that we are each "some mother's child" (Kittay, 1999, p. 25), then we should think of all persons as having not only two moral capacities but three, where the third is "a capacity to respond to vulnerability with care" (Kittay, 1999, p. 102). Kittay also emphasizes that care relations tend to be characterized by 'nested dependencies' in that care-receivers are dependent on caregivers, while caregivers, in turn, are typically dependent on others to access the material resources needed to care for care-receivers as well as for themselves. Hence, for example, once a mother has given birth to her absolutely vulnerable and dependent child, she needs another person - a doula - to take care of both of them as a whole, to care for and assist the mother so that the mother in turn can take care of the newborn. It follows that if there is no doula available to the new mother, she will have to sacrifice herself insofar as this is needed to care for the newborn — and this is the typical norm we find in most historical and contemporary societies. Mothers sacrifice themselves - their careers, their financial security, their physical health, their emotional health, and so forth - to take care of their (newborn) children. Hence, Kittay argues that we should use the concept of 'doulia' to capture this ability to respond to vulnerability as characteristic of the asymmetrical dependency relations as a whole.

To solve this problem of nested dependencies, Kittay adds the fact of human dependency to the circumstances of justice as well as a corresponding sixth primary good to Rawls's list of (five) primary goods, namely "both to be cared for in a responsive dependency relation if and when one is unable to care for oneself, and to meet the dependency needs of others without incurring undue sacrifices oneself" (Kittay, 1999, p. 103). Kittay thinks that these two elements are necessary so as to include utter dependents as well as to ensure that dependency workers will not be exploited. Moreover, if we deliberate in the original position with these new restrictions in place, then we are likely to adopt a third principle of justice as fairness, "[t]he principle of the social responsibility for care," which states: "To each according to his or her need for care, from each according to his or her capacity for care, and such support from social institutions as to make available resources and opportunities to those providing care, so that all will be adequately attended in relations that are sustaining" (Kittay, 1999, p. 113; original italics deleted). In this way, Kittay envisions that Rawls's theory can be made responsive to the challenges of asymmetrical dependency relations of care. States that uphold all three principles will ensure both that those in need of care receive it and that there is sufficient material support available to those who provide this care (Kittay, 1999, pp. 89-90).

Although Bhandary takes up some of Kittay's proposals, she rejects others. For instance, she gives up Kittay's aspiration of transforming Rawls's original position so that it can directly represent permanently cognitively disabled people because,

she argues, their disabilities make it impossible to ever engage in practical deliberation of the kind involved in the original position. Correspondingly, she also rejects the proposal of adding a third moral power to the deliberating parties (p. 31), and instead she suggests that securing resources for seriously cognitively disabled persons can be done by the deliberating parties knowing that they may have family members who are cognitively disabled (p. 44). She also keeps the fact of dependency as part of the circumstances of justice, but she proposes that the sixth primary good should be limited to the receipt of care (p. 35). Most of *Freedom to Care* thus focuses on developing a stronger defence and understanding of how to eliminate the current asymmetrical dependency relations in which care-providers typically find themselves around the world. Cognitive disabilities are a permanent fact of human life, whereas the bad conditions of caregivers can be overcome permanently through eliminating the oppression of our current cultures and basic institutions. The main innovations in Bhandary's book focus exactly on this, i.e., on how to eliminate much of the inherited badness in our cultures and institutions with regard to dependency work.

One of the important proposals is what Bhandary calls the "arrow of care map," which is "an abstract way to theorize amounts of caring labor given and received by each individual" (p. 55). In other words, the arrow of care map is a theoretical device that focuses our attention on the question of who (which social group) provides care for whom (which social group) in an actual society. In addition, Bhandary suggests that there are four principles that should serve as "constraints on any possibly just society" (p. 14), meaning that as we learn to build societies that take dependency work seriously, we constantly check our practices against these principles. To put the point in Rawlsian language, when deliberating in the original position, we would choose the following four principles of justice regarding dependency work: (1) "The Survival Baseline Principle," according to which "parties in the original position will share a desire to receive enough care to survive"; (2) "The Anti-Disadvantage Principle," which is "further requires that the person who is the caregiver not be disadvantaged by virtue of their role as a caregiver"; (3) "The No-Correlation-To-Disadvantaged-Social-Groups Principle," according to which "[c]aregiving must not be the responsibility of an identity group that is already disadvantaged"; and (4) "The Limited-Concentration Principle," which states that "[c] aregiving must not be concentrated in a small group of individuals, even if those individuals have nothing else in common besides being caregivers" (p. 14). In my view, both the arrow of care and these four principles are extremely fruitful innovations of Bhandary's. I believe she's absolutely right to emphasize that when we want to develop better care theories and more caring cultures and institutions, we must look to the relevant facts on the ground (the arrow of care) and we must look for dependency patterns of the kind she is emphasizing by these principles. I am not, however, entirely convinced by each of the principles or the account, so let me share some concerns that might, of course, only reveal that I have not quite fully understood the position.

First, I am not entirely convinced by the 'survival principle,' unless we carefully think through what we need to survive as human beings as well as what kind of care children need to develop, transform, and integrate their various capacities such that it enables them to become as autonomous as possible — or to say this in a 'deeper' way, as capable of moral responsibility and of pursuing their own conception of the good (freedom) as their capacities allow.

Second, I find that the reasons given to exclude persons with cognitive disabilities from active deliberations in the original position actually apply to all of us insofar as we are insufficiently mature or currently too ill or disabled to engage in practical deliberation on our own behalf. After all, insofar as we are incapacitated or lack relevant knowledge (say, of questions of medical health), we need someone to speak on our behalf. To put it differently, I believe that, in all these positions, we need to think through how we can act on our own or somebody else's behalf — what kinds of laws we need to secure legal guardianship — and, so, it is not only a question of redistribution of material resources.

Third, I find myself resisting the idea that to capture care dependency work, including for cognitively disabled persons, the deliberating parties only need to think of themselves as representatives of their families. After all, not only parents have standing as legal guardians for children. For example, so too do physicians and teachers. In addition, spouses get this right and responsibility in virtue of being married, and so it is not a problem that can be allocated only to deliberators in the original position by virtue of being parents only.

Fourth, in my view, some of the challenge is to envision how care laws ensure that decisions made on our behalf are continuously informed and updated by our best, related kinds of public reason *without thereby* losing sight of how these laws also protect us as particular, distinctive, individual human beings and as parents, as partners, as spouses, etc. For example, the laws must secure both that my cancer treatment is up to date medically and that my treatment is consistent with my deeply held moral (and religious) beliefs.

Fifth, and relatedly, I believe that, from the point of view of legal-political theory, care relations are relations not only between all legally authorized caregivers (parents, nurses, physicians, therapists, teachers, etc.) and their care-receivers (including parents and children) but also between spouses and between families and servants or other non-licensed⁶ people who assist families with care labour in their homes. Ultimately, I think that Kittay and Bhandary inherit these problems from Rawls and, to some extent Hume, as I explain in the next section.

4. Bhandary's Choice of Historical Interlocutors: Hume and Rawls

When we develop our care theories in ways informed also by the historical theories of justice — and I absolutely agree with Bhandary's judgement that doing so is wise — a challenge that quickly arises is: which classical theories should we engage and how? On the one hand, the challenge is that although quite a few classical theories of justice include writings on issues of care, these writings have received a lot less attention and are thus not as well known or critiqued as accounts of, for example, private property or punishment by the same thinkers. On the other hand, most of these texts were

⁶ I think this qualification applies because licensed people — such as plumbers, lawyers, nurses, electricians, physicians, and physiotherapists — are publicly regulated and protected through the laws, policies, and institutions constitutive of enabling their licensure.

written by (straight) men (and in the Western tradition, predominantly white men), and they are thus filled with much sexism, classism, heterosexism, racism, and so forth. Hence, it's not obvious which of these works are worthwhile to study. For the main part, Bhandary chooses to follow Rawls, including his choice of Hume's circumstances of justice, and Mill. In my view, there are advantages and disadvantages related to these choices. Here I focus first on the disadvantages incurred by Bhandary in that she gives up on Kittay's way of understanding and securing the rights of people who are seriously cognitively disabled or incapacitated (legal guardianship). Then I focus on another set of problems that bring us back to the problem of coercion, namely: against whom, exactly, do we hold our care claims?

Starting with the problem of legal guardians, I believe that the ultimate reasons Rawls — and Kittay and Bhandary — is unable to critique these relations philosophically are that he assumes Hume's circumstances of justice and never engages the early/modern 'state of nature' discussions. Instead, Rawls simply presupposes the existence of a state with a monopoly on coercion as the solution to the circumstances of justice — and then argues (through hypothetical consent) from there. In so doing, however, Rawls cannot provide accounts of the basic rights and liberties listed in his first principle of justice as fairness; the right to 'survive' (Bhandary) or be cared for (Kittay) or the rights and duties involved in legal guardianship (Varden) presumably would be among these basic rights. The classical early/modern state of nature theories, in contrast, do provide significant resources for discussing exactly these complexities. For example, John Locke and Kant both explicitly discuss (and disagree on important points regarding) children's rights and duties - discussions that complement general discussions regarding the circumstances of justice, including the question of why we establish legal-political institutions in the first place (including laws regarding legal guardianship). For example, Locke thinks that children's rights correspond to parents' duties (and vice versa). Important discussions arise here (including in contemporary secondary literature) regarding to what extent this relationship necessarily stays in the state of nature (since children cannot enter civil society through actual consent) and whether it makes sense to think of this relationship in terms of reciprocal rights and duties since children, insofar as they need special rights, lack an ability to exercise rights and duties (as they are incapable of moral responsibility). In contrast, Kant thinks of children's rights as part of a broader category of 'status' rights - which also includes marriage relations and relations between families and servants — and he argues that the establishment of a public authority and related status, including family (guardianship) law, is constitutive of making these relations rightful.7

Finally on this point, these discussions between Locke(ans) and Kant(ians) are also interesting and important for those of us who care about care theory because Locke (ans) and Kant(ians) disagree about what a state can and must do once it establishes its monopoly on coercion. Insofar as Lockeans follow Locke's commitment to each

⁷ For an entrance into the related Lockean engagements, see, for example, Simmons (1994). I discuss Lockean, Kantian, and care theorists (Kittay and Virginia Held) in Varden (2012). A philosophical advantage of my approach for Bhandary's project is, I think, that it gives a different account of our rights and duties insofar as they track our moral capacities vis-à-vis our and non-human animality. For more on this, see Varden (2020b, 2020c).

person's natural executive right, they also argue that not only is actual (explicit or implicit) consent necessary to establish a state but that the state's coercive power is co-extensive with individuals' rights against one another. If so, then much of the redistribution Bhandary's position entails must be voluntary or done through charity. Turning to the Kantians, some of the complexity of these discussions arises from the extent to which they agree with libertarians like Locke or with Rawls(ians) or they disagree significantly and present an altogether different account of individuals' rights against one another versus citizens' claims on their shared public authority. Especially interesting in the current context, perhaps, is some Kantians' account of both why only the state has enforceable rights to deal with problems of poverty and why the state has special responsibility for systems - such as the economy and education systems — insofar as citizens' exercise of freedom becomes dependent on them. Indeed, the Kantian approaches I find most compelling argue that this is where Kant's account is similar to that of Rawls both in terms of how Rawls views justice as fairness as an account of citizens' claims on their public institutions and in terms of public reason. The advantage of combining them, in other words, could be that Kant provides Rawls (and Kittay and Bhandary) with what he does not have: an account of our individual rights against one another as distinct from our rights as citizens (our claims on our public institutions).⁸ And this, in my view, is ultimately the kind of philosophical resource we need to address the problem of coercion — including against whom exactly do those in need of care have enforceable claims and why - and to speak to exactly why, even in a world where we all magically have or are wonderful parents and caregivers, we still need family (guardianship) law, which in turn is needed to dismantle the 'father's' or the 'caregiver's' castle. And these arguments or philosophical resources are not within reach if we simply assume Hume's circumstances of justice (and states with a monopoly on coercion).

5. On Bhandary's Methodological Choice of Men, Women, and Children as the Main Focus of Analysis

As someone who also writes a lot on philosophical topics that engage questions of dehumanization and historical oppression and violence, I know intimately many of the challenges involved in choosing our examples and key concepts well. Hence, although I do raise some worries regarding Bhandary's choices below, let me first emphasize that I do so without thinking that figuring out exactly how to do this well is easy and obvious; it just isn't. And we all make mistakes — I certainly have and I don't know anyone who hasn't — especially as we engage, relate to, and theorize lives we do not know first-personally or intimately. Overall, my main worry in this regard is that *Freedom to Care* focuses too much attention on those who fit socially and historically prominent categories — 'men/fathers,' 'women/mothers,' and 'children/girls/boys' — and not enough careful attention to or incorporation of voices representing lives that are less prominent and privileged.

⁸ For an overview of the status quo in Kant studies on property, see Varden (in press).

Let me try to clarify some of my worries through Kittay's famous phrase that everyone is some mother's child. Well, to start, not everyone is and sometimes that they are not is not a bad thing at all. For example, not only women or mothers become pregnant, have babies, or are parents. At this point in time, the main determining factor for carrying a pregnancy to term is having a biological uterus; in the future, it is possible that this may no longer be necessary. In addition, some children have one parent while others have two fathers, and they obviously couldn't be more loved or cared for better than they are. Finally, many live lives that are not easily reconciled with the narrative of everyone being somebody's child. Parents die, some biological parents are unable to parent, and, so, many children get parental care where they can find it and from several sources.

A danger when theorizing these relations is correspondingly that if we do not take special care, we easily add burden to these lives by not having language that appreciates the complexities of their lives - both good and bad - and we also do not provide those who face difficult circumstances in these regards with the philosophical resources to grasp that they are just as valuable and amazing as those children who have much easier starting points. For example, we may not speak to how growing up in this or that way is likely to provide them with different starting points and thus different advantages and disadvantages - in life. To state an easy example, if we grow up with complexity and we are able to grow with it, we are likely to become wiser human beings than those who have it easier - which is not to say that we should all grow up with hardship. It is just to say that human life is messy and complicated to do and to theorize. In my view, it is better if we care theorists do not assume these complexities away but keep them close to heart and mind as we theorize. I am currently finding myself also thinking that it is probably better for the general analysis to use neutral language, like 'pregnant persons,' 'partners,' 'spouses,' 'care-receivers,' 'caregivers,' and so forth - and then, as we want to make space for concerns that can only be understood if we allow for various contingent human and historical facts, we do so explicitly and with extra care. Among our aims should be to represent the specific lives well such that those whose lives are represented both recognize themselves and find the theorizing respectful, interesting, and useful. The other way around, namely to assume and use socially dominant forms as the 'norm(al)' (the 'we') and then sometimes, from the perspective of the 'we,' draw attention to 'the exceptions,' to those who are not 'like the rest of us,' comes with lots of troubles either directly, because it becomes a we-they analysis, or indirectly, because of the way in which the text has reaffirmed and drawn on the historically prominent associations along the way. Let me try to illustrate these points a little with direct references to some choices Bhandary makes in Freedom to Care.

In Chapter 7 — "Teaching Boys How to Care" — Bhandary's focus is on how to educate boys better. I absolutely agree with Bhandary — and Mill and Simone de Beauvoir and ... — that one of the challenges we inherit from previous generations around the globe is the way in which men are traditionally brought up. Traditional male privilege causes a lot of harm generally and disproportionately toward those social groups — such as women and children — whose social identities and positions make them more vulnerable to the aggressive elements of this inherited male privilege. Traditional male privilege also causes much harm to those who have it,

obviously, since living in those ways makes it more difficult to fully realize many kinds of relationships and experiences, from intimate, to playful, to caring and trusting ones. I do not at all want to detract from the importance of this below.

I do, however, think that it is equally important that we deal with how all children are brought up with regard to class identities, racial identities, religious identities, sexual orientations, and gender identities. As Bhandary emphasizes, racialized oppression and violence in many varieties is an enormous problem all over the world. Why, then, focus only on the boys and how they relate to girls? Why not start broader? More generally, if we were to start with the problem of being protecting and enabling legal-political conditions where we — children, teenagers, and adults — can stay alive, which is close to Bhandary's heart, maybe we should also start with all children being taught how to care about and be kind with regard to everyone and become especially aware of how many identities that track debilitating and destructive patterns of oppression and violence. Hence, I worry a little that if we formulate our focus mostly in terms of 'women,' 'men,' 'children; boys and girls,' then this sets the stage in a way that makes the other issues appear or feel less important — and this may be why boys received a whole chapter's worth of attention.

I also worry that it is possible to use the arrow of care and the four principles in relation to a particular society where we combine them only with the socially prominent social categories. That is, given the oppressive societies we inherit, many may look for dependency patterns only by means of 'men,' 'women,' and 'children' and much oppression involving diversity never surfaces. After all, when we look for who cares for whom or which groups are dependent on which, then we need social categories to identify the 'who.' In some countries, there are officially no LGBTQIA communities: 'such people don't exist here,' and similarly dehumanizing or existence-denying things are said about many social groups. These groups often also are not cared for or do not receive care; quite the opposite - asking for care can be dangerous (as existing is deemed a crime). In other words, I believe Bhandary's theory would be strengthened if it were impossible for it to be wrongly or mistakenly applied so as to ignore those who occupy social categories that the powerful in a given society deny or oppress. It is not clear to me that this is currently the case, and given the prominence of cis language and straight lives in Freedom to Care, I worry that the text does not give sufficient resistance to such bad applications.

Finally on this point, I think some of these puzzles about methodology relate to the general problem of how, as we strive to find better ways to think and write about various issues of care from the bottom up, we must improve our ability to listen to and address all voices and lives, not just the prominent ones. Let me try to make this point from a controversial direction. Bhandary incorporates without resistance Elizabeth Brake's analysis in *Minimizing Marriage* (Brake, 2011). In my view, however, there are related complications with Brake's analysis. I do believe that these complications are absolutely unintentional on Brake's part, but I also believe that they exist and that they reveal the unruly nature of these methodological questions. In my view, a surprising feature of the minimizing marriage account is that it is implicitly both quite socially privileged and straight despite its explicit intentions to the contrary. For example, a longstanding fight for significant groups of LGBTQIA and polyamorous people is the right to marry, to have access to this type of family law. On Brake's theory, this desire and related activism is, ultimately, fundamentally misguided: no one would rationally want access to the oppressive, historical institution of marriage. In my view, however, these people are not misguided about what they want and need. Wanting access to full (not minimalized) marriage rights is not, as such, irrational. This is not to say that marriage is for all (the same method entails that it is not; for many, it is a very bad idea), nor is it to say that there are not things that need to be transformed and improved in our current marriage laws around the world (clearly they do need improvement and our theories of care need to speak to how). In addition, in many parts of the world, access to marriage is still the best way for poor women to obtain some economic security. These arguments do not apply to the world's economically privileged women, but that does not mean that they are not crucial for these women. More generally, I am worried about an applied philosophy that does not start from the bottom up in that it first listens carefully to all the different types of voices - including those whose visions of their lives lived well are very different from ours - and, so, too quickly and unintentionally uses theory to criticize or undermine people's lives and struggles for access to rights.9

6. Concluding Remarks

I hope the above reflections make it obvious how important Bhandary's *Freedom to Care* is. It is first-rate scholarship that (explicitly) stands on the shoulders of some of the ground-breaking thinkers of our time and then lift some of their ideas to a new level. It is also a book that invites engagement and careful reflection — and it is plainly deeply rewarding to do so. Fortunately too, it is a book that is accessible also to the non-experts, including students, and it provides a superb overview of most of the existing care theory. Enjoy!

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⁹ These complexities regarding method and marriage are naturally a central theme in Varden (2020b).

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