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Title page

Title: Moralities of Care in Later Life

Authors Andrew Dawson & Bryonny Goodwin-Hawkins

Addresses, emails, faxes and tells:

Andrew Dawson

School of Social & Political Science
University of Melbourne
Parkville
Victoria 3071
Australia

Email: dawsona@unimelb.edu.au

Fax: (03) 8344 7906

Tel: (03) 8344 4201

Bryonny Goodwin-Hawkins

Geography & Earth Sciences
Aberystwyth University
Llandinam Building, Penglais Campus
Aberystwyth SY23 3DB
Wales, UK

Email: brg16@aber.ac.uk

Fax: +44 (0)1970 622606

Tel: +44 (0)1970 622659

Moralities of Care in Later Life

Abstract

Key words

‘We war again over her legs. I venture: “It’s like watching a car crash. You are doing everything in your power to prevent yourself from feeling better. Why would you do that? If you continue to do this you will end up in a wheelchair and hate yourself even more.” She then rolls out the Rolls Royce of insults, the one that, every time, causes me to flinch and fill with anger. It’s designed to render all the efforts I’ve made over the years as completely useless. She knows how offensive it is, yet still screams: “Go on then - put me in a HOME.”’

Care is a word made warm with meaning. She *cares*. He is *caring*. You are *cared for*. At once a value and a virtue, care is entwined with conceptions of what is right and what is good. Indeed, as the medical anthropologist Arthur Kleinman (2009) notes, care is a definitive moral practice. Yet as a practice so touching suffering and need, care is fraught, too. “The majority of moral choices,” Zygmunt Bauman (1992:11) writes, “are made between contradictory impulses ... the impulse to care for the Other, when taken to extreme, leads to the annihilation of the autonomy of the Other.” Sometimes, care hurts.

For Patricia Gillespie, whose autoethnography we excerpt above, care for a mother in ‘deep old age’ (Featherstone & Hepworth, 1989) was a moral tangle of love, conflict and contradiction. Having paused a busy career to become her mother’s primary carer, Patricia wrote with graphic honesty of their flipped relationship. Over several years, she charted the daily intimacies of care, alongside the bureaucratic thickets of state health and welfare

systems. Achingly, she diarised the long, slow days that followed her then-hospitalised mother's decision to refuse all food. As her mother neared an intentional death, Patricia, who so cared, fought for her mother's right *not* to be cared for.

Patricia and her mother's care experiences - intimate, raw, messy in many ways - frame the themes of this special issue: 'Moralities of care in later life'. Care comes in many guises, both affect and action (Buch, 2015). Care is bound into close relationships between people, between generations. Care is needed and care is given in different forms, at different times, throughout our lives. How we care is mediated by cultural norms, just as it may be prompted by moral expectations and constrained by societal structures. Care may come into being in the changing of bandages and bedsheets, as it did for Patricia and her mother; it may be as intimate as the touch of skin, or as impersonal as hospital admission forms. Care, as it was for Patricia and her mother, may be contested in a bitter word, or rejected at the bitter end. Care is complex - and, in that, profoundly human.

Yet, for all care's humanity, there is no explicit anthropology *of* care (see also Thelen, 2015). Anthropologies of health and medicine may come the closest, through suffering bodies that want/need/receive caring assistance, and those who provide it (e.g. Henderson, 2011; Kleinman, 1988; Wendland, 2010). Of course, *healthcare* is not necessarily *caring*: as Tatjana Thelen (2015) observes, public attention is regularly captured by systemic failures of care. Thus, from policy to science to scandal, the clinic (and clinical) has become a particular ground upon which ideals of 'good' health, care, life, and death play out (e.g. Kaufman, 2015; Mol, 2008).

As this clearly suggests, care is about much more than health. Recalling Kleinman (2009), in this issue we approach care through moral framings of ‘the good’ (Robbins, 2013).

Anthropology’s recent turn to moralities (e.g. Fassin, 2012; Zigon, 2007) and ethics (e.g. Das, 2015; Keane, 2016; Laidlaw, 2014; Lambek, 2015) might also be described as a *re*-turn to the classic concerns of the social sciences (e.g. Durkheim, 2014 [1902]). Through philosophy and theology as well, much ink has been spilled over what the moral or ethical is and how it might be known - debates that, rekindled amongst anthropologists, are pithily summarised in the title of James Laidlaw’s (2014) recent response piece, ‘Significant differences’.

The contributions to this issue find several stepping off points amidst the anthropology of moralities: some convenient, others complex. Far from raising the colours of a particular theorisation, we aim here to ethnographically explore the intersections of care and morality in later life. We look to later life not because older people inherently *need* care, but because later life sees care emerge in ways that are new, sometimes expected, sometimes not, perhaps circumscribed, and often fraught (see also Buch, 2015). Patricia and her mother, for example, re-oriented their daily lives around care, just as care re-made their relationship. All eight contributions offer glimpses into the moralities of care as they are experienced and articulated by older people, from Australia and New Zealand, to Europe, North America, and Asia. All eight ask what ‘good’ care means - and for whom.

The three opening articles explore ‘good’ care as relational. They consider how care is enacted both *by* and *for* others, and affected by cultural etiquettes and personal intimacies. Iza Kavedzija’s article begins with recent concerns over societal ‘atomisation’ in urban Japan, caused by increasing numbers of single people living alone. For older people who have

become alone through the loss of partner or peers, however, new caring relationships are ambivalently sought. “[W]hile hedgehogs might want to pile up for warmth,” one of Kavedzija’s interlocutors explains, “they might also feel uncomfortable when they are too close together”. This tension between desires for intimacy and wishes for distance leads Kavedzija to ask: how to care for those who are *not* one’s friends? She finds an answer in manners, arguing that acting in rightly prescribed ways expresses care for others, just as politeness draws reassuringly distant boundaries.

Whilst Kavedzija watches well-mannered encounters between members of the same post-retirement generation, Pia Jolliffe and Shirley Worland engage with etiquette across generations. Reflecting on fieldwork with Karen communities across several nations and social locales, they document expressions of the ‘principle of seniority’, in which honour is due to those older than oneself. Reinforced by bardic tales, such ‘good’ ways of relating to elders are visibly enacted at public ceremonies, and quietly carried out in everyday care practices. Despite the decades of conflict with Myanmar/Burma that have pushed many Karen into refugee camps or diaspora, Jolliffe and Worland suggest that continuities in intergenerational care have served as glue for kin and community.

But what happens when proffered care is refused? Brian O’Hare’s article introduces the ‘caretaker’s dilemma’. As a social work intern in Brooklyn, New York, O’Hare himself became a ‘caretaker’ for the residents of an older people’s affordable housing facility. The dilemma, as he experienced it, lay in the difficult choices care can provoke. For example, Ellen, a resident whose story O’Hare tells, strove to maintain her independence by hindering the ability of social workers and kin to provide the care she increasingly needed. Ellen’s

accidental death eventuated for lack of the care she herself had eschewed. The caretaker's dilemma is stark here: should care be given when it is *needed*, yet not *wanted*?

As O'Hare notes, the relational drama of the caretaker's dilemma plays out upon a structural ground. Ellen, like other residents, *had* to display independence for entering dependency made residents ineligible for continued tenancy. We should certainly ask - as the next two articles do - how the neoliberal state is implicated in moralities of care. Shiori Shakuto returns us to Japan, where the demographic transition of the 'Baby Boomer' generation into retirement has considerably added to existing strains in state and social support. By historicising the political economy of care, Shakuto shows how, since the effective end of the welfare era after the 1973-4 oil crisis, the Japanese state has slowly redistributed responsibility for the care of older citizens. With the state also mobilising morality through discourses of 'productive citizenship', Shakuto argues that retirees have internalised the structural problems of demographic change and rising welfare costs. The desire not to be 'a burden', she observes, is not as simply personal as it seems.

Juliana Mansvelt and Mary Breheny similarly question expressions of independent values amongst older New Zealanders. Over three decades since New Zealand's 'Rogernomics' paralleled 'Reaganomics', Mansvelt and Breheny ask: has the neoliberal state now constructed a morality of ageing? Clearly, the much publicised concept of 'successful' ageing is riddled with moral judgements and redolent of the individual 'choices' that neoliberal subjects are required to make. Of course, neoliberalism's 'choices' are in fact tightly constrained for so many. Rather than challenge such constraints, Mansvelt and Breheny's older informants turn tightened circumstances into positive narratives of independence,

responsibility, and hard work rewarded. By revising ‘making do’ from economic necessity into personal action, these ‘successful agers’ become virtuously so.

While the strictures of capital and governance undoubtedly influence later life (as they do *all* our lives) and certainly constrain care, we might, with Laidlaw (Eriksen, et al. 2015:914), wonder whether neoliberalism as “big bad package” is really so encompassing. Laidlaw and Jonathan Mair (Eriksen et al. 2015) have characterised academic invocations of neoliberalism as also a form of moral discourse. Their challenge to anthropologists, to remember specificities and histories, is taken up through the final three articles here. Ari Gandsman directly engages with critiques of the right to die movement as an effective outcome of the neoliberal state’s eschewal of care. When the burden of care is placed on the individual, such critiques run, the ‘right’ to die may become less a choice than an obligation. Could legalising assisted suicide thus render older people disposable? Gandsman disagrees. Drawing thoughtfully on research with right to die activists in North America and Australia, he sees behind activists’ expressed desires to control their deaths a deeper discourse on what constitutes a ‘good’ life.

Comparing two postindustrial places in Northern England, our own contribution considers how ‘good’ ways of living are made at work. Ashington, once the ‘world’s largest mining village’, and Lyng Valley, which produced textiles, were formerly dominated by their respective industries. Industrial materialities, we suggest, made for industrial moralities - and specifically, locally so. Mining’s real underground risks and team camaraderie encouraged solidarism; the textile industry’s piece rates and fine-grained hierarchy shaped individualism. Three decades after British industry’s demise, we argue that these very different industrial moralities evince ‘afterlives’ in care amongst former workers in older age.

Finally, Silvia Bofill Poch contemplates Spanish ideals of familial care alongside carers' lived realities. In Spain, 'good' care has historically been seen as a familial, and specifically female, responsibility. Yet a growing older demographic plus women's increased participation in the workforce has produced a 'care crisis'. This, Bofill Poch believes, is the 'moral breakdown' (Zigon, 2007) that has pushed people into awareness and to articulate their moral positions. Like Jolliffe and Worland, Bofill Poch finds informants who speak warmly of caring for elders. Others amongst her informants, however, look upon familial care with ambivalence, and even bitterness. Care, they challenge, is neither simply love nor easily fulfilment.

Together, these eight articles chart and challenge, asking questions of ethnographic material and questions of readers, too. They are articles that Patricia Gillespie would have read with relish. Patricia herself was to have been a contributor. At the inception of this special issue, she was our PhD student, writing righteously and beautifully as we - 'good cop' and 'bad cop' – policed academic rigour. We now write this editorial at the one year anniversary of Patricia's death following a short illness.

In her ethnographic film *Number Our Days* (1976), Barbara Myerhoff describes her personal connection to research with the ageing Jewish community in Venice, California. Most anthropologists, she says, speaking to camera, can never become one of the people they study, "but I *will* be a little old Jewish lady". It is a moment made poignant - Barbara Myerhoff did not live into her older age. As we write in continuation of Myerhoff's project to ethnographically evoke older people's lives, and as we remember Patricia Gillespie, we are

reminded that we do not experientially know what it is to inhabit older age - nor can we be certain that we ever shall.

“I just want to make people think!” Patricia would say, as we worked to convince her to conclude her chapters and articles. We hope that readers of this issue will find much to think with amongst the articles. And, we leave the task of concluding to Nigel Rapport (who is, at least, older than us).

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