

INTERSTICES OF CARE: RE-IMAGINING THE GEOGRAPHIES OF CARE

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In this introduction we argue that taking a topological approach to care can encourage us to understand both how caring relations and practices are produced and the forms they take as they shift and transform. We suggest that thinking topologically about the articles collected in this special section highlights how caring actions and practices ripple out into the world beyond immediate caring relationships and the immediate moment. Responding to a call within geographies of care to be thoroughly attuned to the placed-ness of caring relations and to contribute work that theorises from places beyond the global north, the papers in this collection are situated in diverse geographical and cultural contexts, thoroughly contextualised in place and time and explore complicated relations that shape and challenge care. The geographies of care presented in this collection are a sampling of the diverse forms of care that are possible and, we argue, that by employing a topological approach to care, the possibility of what care can be and mean multiplies and expands.

KEYWORDS

geographies of care, politics of care, topology

INTRODUCTION

Geographers have sought to push the boundaries on conceptualising and problematising care, developing a body of work that demonstrates the complexity of caring relations. Building on this work, we are excited to understand how these relations are formed and how care can also involve the creation of relations that fit less comfortably within our assumptions of what care is and can be. Towards these ends, the articles in this special section explore both the mundane and the surprising forms of care that emerge in reaction to and through interaction with (an)other. In so doing, the articles demonstrate how the diverse ways in which care is shaped complicate the terrain of what it means to care, how to care, and for whom we choose to care.

In this introduction, we read across the special section's articles to argue that, within their diversity, they present interesting questions about the meaning of care and caring engagement. Here we propose taking a topological approach to reading these geographies of care, which can push research and understandings of care into its interstices: the innermost intersections and gaps between objects and subjects engaged in the construction and transformation of caring relations and spaces of care. Thinking topologically allows us, in the words of Blum and Secor, to “[close] the circuit between psychic and material space” (2011) by demonstrating how our conceptualisations of care, along with practices, social structures, and human and non-human others come into relation with the spaces that we inhabit. Using a trefoil knot as a metaphor for care, we can think through both the constancy of care in human life as well as the unpredictable shapes and knots that may ensue when human hands, actions, and intentions interact in caring engagement. If we were to handle the trefoil knot and if it was made of pliable material, we

could manipulate these objects by stretching it, creating more knots, making holes bigger or smaller. The object has no beginning and no final state. It is constantly being negotiated and explored (for more information on topological figures and their use in geography see Blum & Secor, 2011; Martin & Secor, 2014; Secor, 2013).

In what follows, we briefly discuss geographies of care and how, by deploying a topological reading and approach to care, we can understand how socio-spatial contexts and relations of care take shape. While most of the individual papers themselves do not explicitly take topology as their theoretical approach, in this introduction we briefly discuss the geographies of care presented by each author and highlight the strikingly different topologies emerging within each particular context. The articles draw on feminist ethics of care, relationality, psychoanalysis, and political ecology but, read together, they illustrate how caring actions and practices ripple out into the world beyond immediate caring relationships and the immediate moment. We end this introduction with an attempt to reflect upon the definition of care and how that definition can be expanded to embrace greater complexity and contradiction.

PROBLEMATISING GEOGRAPHIES OF CARE

The problematisation of care and attention to its failings is particularly timely for the current political moment. Various crises are forcing us to ask about established notions of care and whether they are adequate for addressing these challenges (Askins, 2015; Robinson, 2011). As geography has moved beyond medical contexts, conceptualising care more broadly as an element of sociocultural constructions of space (Conradson, 2003), research has worked to further its political potential. Research in this vein has challenged the social and geographical limits of care (Bowlby, 2012; Milligan & Wiles, 2010; Raghuram et al., 2009) and demonstrated how understandings of care reinforce existing power relations (Atkinson et al., 2011; Bartos, 2018; Lawson, 2007). Geographers have also worked to build conceptualisations of care as tools for the creation of careful spaces and practices, advocating for caring approaches in research, workplaces (Lawson, 2007, 2009; McDowell, 2004; McEwan & Goodman, 2010; McKie et al., 2002) and in working for social justice (Gleeson & Kearns, 2001; Staeheli & Brown, 2003).

Geographies of care have embraced geography's broader turn to relationality (Massey, 2005), intersecting with feminist ethics of care's relational ontology (Tong, 1993; Tronto, 1993). Parvati Raghuram (2016), however, pushes us to recognise the current limitations imposed by the bias of this research situated in, and theorising from, the global north. She argues that the development of caring ethics requires more work starting in and theorising from the global south and closer analysis of placedness: the ways in which care varies across its spaces and its actors, the duties involved, and the rationales motivating and shaping care. The papers in this special section are situated in American courtrooms; on the internet, in Japanese bars, in Ghanaian homes, in biotech laboratories and farmers fields in Peru. We argue that the authors present geographies of care that are thoroughly contextualised in place and time and explore complicated relations shaping and challenging care. Furthermore, the authors capture the shifting topological configurations of these incredibly varied and contingent geographies of care and detail the processes of their construction.

THINKING OF CARE TOPOLOGICALLY

The definition of topology that we are using here is “post-mathematical” (Martin & Secor, 2014), in that we are grappling with the constant distortions of the relational spaces in which caring relationships are bound up. There is no “break” as it is impossible to be outside of relations of care, either for the self or the other. Topological spaces are both material and psychical (Blum & Secor, 2011): multiple places, times, people, and objects are brought together in the actions of a moment and in the perceptions of care that are provided and perceived as such. In this topological approach, multiple forms of care are possible as these diverse conditions come together within the essential framing of connection and the needs of an (other). Martin and Secor (2014) argue that a topological approach cannot be limited to topological description, nor used as a synonym for relationality. They insist that topological approaches must be about “how and through what process those relations are repetitively reproduced, and yet continually changed,” leading towards understanding both the epistemological and ontological assumptions with which it may be employed (2014, p. 435, emphasis in the original). Mikko Joronen has further argued that a focus on how relations are produced opens up conceptual space for understanding the different ways of “being-related” (2016, p. 99). A topological approach has, for instance, expanded our understandings of the concept of home (Kallio, 2016), trauma (Blum & Secor, 2014), and exception (Belcher et al., 2008; Debrix, 2015). Caring practice is ever changing, adapting, and responding to contingent circumstances and spaces. It is at the core of decisions that animate and support daily life, yet may also bring disconnection, neglect, and harm. Thinking topologically about how geographies of care are constructed can allow us to pay closer attention to the practices and assumptions that shape our lives by acknowledging the forces – a heterogeneous mix of times, spaces, events, and psychical processes – that constitute our environments, who we are, and the relationships that we find ourselves in. A topological approach therefore encourages us to understand both how caring relations and practices are produced and the forms they take as they shift and transform. The possibility of what care can be and mean multiplies and expands.

The framework of topology does not provide clear guidelines about how to care or how to identify the caring needs of others. A topological approach, however, can be applied as a heuristic towards understanding elements of care that are shaped and transformed across diverse contexts. To recognise and understand topologies of care we direct our attention into the interstices of care: the spaces inside and between the actors and objects of care, where engagement and negotiation, actualisation and failures of care are enacted. Read together, the papers in this special section traverse diverse caring terrains, rendering the topological by detailing complexity of relation and process. Further, they push us towards necessary and vigilant interrogation of what it means to care, avoiding any profession of clarity, prescriptive definitions, easy formulas or assumptions in research or our own practices.

Garrett Graddy-Lovelace (2020) asks her readers to ponder a world in which the care of plants is slowly alienated from human hands and transferred to a technologised cadre within international pre-breeding programmes. Graddy-Lovelace explores and contrasts the intergenerational and interspecies connections built during the daily work of farmers and pre-breeders’ efforts aimed at fostering new plant forms. Here the topological terrain of care is moulded by 21st century agricultural trends in which the superiority of technological capabilities for precision and efficiency is presumed and the farmer-plant relationship is ironically marginalised by the programmes that wish to utilise the agrarian knowledge produced by that relationship. This geography of care highlights what kind of care might be lost as relations between growers and food are transformed and human-environmental intimacy is eroded.

Intimate relations are again taken up in Kelsey Hanrahan's exploration of the knowledge of the other

(2020). Here, an elderly woman dying in a small Ghanaian village restructures the caring networks that animate daily life. Hanrahan draws attention to the challenges encountered as individuals work to engage in care: the challenges of expressing, recognising, and meeting the constantly shifting needs of a woman at the end of life. Ultimately, care is situated amongst multiple actors: older women living in the village, her son and daughters, and Hanrahan herself. In this article, she points the way towards thinking about how bodies seek, negotiate, and respond to each other and the various meanings and acts of care that intersect through the process of dying.

Heidi Nast (2020) writes about women's care work through the growing practice of Adult Male Breastfeeding (AMBF). Nast traces the AMBF scene through the United States, Japan, and China, arguing that men suffering from the ongoing global economic transformations that began in the late 20th century are psychically searching for “an(other) mother.” A sense of and a space for care is constructed by connecting psychical and erotic understandings of breastfeeding as nurturing and restorative with the spaces of milk bars, the lactating breasts of privately hired women, and pornographic films. Here care's shape is prodded towards assuaging male fears and satisfying erotic desires in the midst of changing societal conditions, while simultaneously creating uncaring and exploitative situations for women and children.

Lastly, Ann Bartos (2020) works through the process of how caring relations were negotiated in a recent high profile case of rape and harassment in the United States. Developing the framework of a “topological polis,” Bartos explores the judicial decision in convicting and sentencing Brock Turner, a man who raped a young woman behind a garbage dumpster. In so doing, Bartos maps American society's care and nurturance of white males, an act of care that in turns eliminates space for achieving equity, justice and, importantly, care of the victim. In tracing out the relations of care beyond the initial site of the care act, Bartos shows how caring choices are political acts that can leave other parts of society bereft of recognition and respect.

CONCLUSION

The topologies of care presented here demonstrate the ways in which care is being moulded into different, even surprising, forms as it is employed as a motivation and as a practice towards meeting needs. Care is constructed under the forces of a technologised agricultural industry that marginalises, yet depends upon, intimate knowledge of farmer–plant relationships; care is constructed to meet a dying woman's needs in ways that reflect the difficulty of understanding what her needs might be and how best to provide for them; care is constructed to meet men's psychological needs and desires in ways that dehumanise the women with the biological capacity to meet those needs; care is constructed to meet the needs of a violent perpetrator and the social integrity of the white male in American society at the expense of addressing violence against women and the needs of the victim. These papers, read together, begin to show us the multiplicity of “being related” through care. Not only does care appear in different places and in different practices, but how those caring relations come into being, the meaning of those relations, and their broader social impacts suggest that within the fundamental and inescapable connectedness that lies at the heart of feminist ethics of care and relational approaches, ways of being and caring are not a given, but acutely open to transformation.

Yet, what exactly is care? Revisiting the early work of Joan Tronto and Bernice Fisher, they define care 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” (Tronto & Fisher, 1990, p. 40). This definition is deeply desirable in its aspiration. In contrast, this special section busts apart the collective pronoun “we” used above and resurrects firmly the political question of who decides what is cared for in our becoming world. The descriptions provided above for the papers in this special section reflect a basic working definition of care, wherein care “involves taking the concerns and needs of...other[s] as the basis for action” (Tronto, 1993, p. 105) but with the added caveat that this action does not necessarily benefit the other and that it may have negative ramifications beyond the immediate relationship. Again, we are never outside of relations of care, but analysis of caring relationships stripped of stereotypical notions and viewed topologically can reveal practices that may be damaging for aspirations of a liberatory and equitable politics. Further, these same insights can be instructive; a topological focus on care can lead us to attend ever more carefully to the dynamics of our various relationships, learning to prioritise some over others, and lead us to new political possibilities.

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