Introduction

Cripping Care: Care Pedagogies and Practices

Patty Douglas, PhD
Brandon University
Carla Rice, PhD
University of Guelph
Christine Kelly, PhD
University of Manitoba

> "…Any radical pedagogy must insist that everyone's presence is acknowledged" (hooks, 1994, p. 8).
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> "…To begin always anew, to make, to reconstruct, and to not spoil, to refuse to bureaucratize the mind, to understand and to live life as a process—live to become…" (Freire, 1993, p. 98).
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> "Disabled people have never demanded or asked for care!" (Wood as cited in Thomas, 2007, p. 107).

Any attempt to understand or take up "care" in its lived, philosophical and political aspects is a slippery affair. If nothing else, feminist, disability and care scholars and activists converge around the vitality of care. Care is fundamental to being and becoming human together. It encompasses the intimate, fleshy and mundane exchanges between bodies engaged in everyday affects and acts—of giving and receiving, of living and growing, of teaching and learning—that are fraught with ethical complexity. Although "predominantly regarded as an inferior practice to education" (given its associations with "feminine" nature, affect and dependency) (Gibbons, 2007, p. 125), care is central to all human life, and as such, must be acknowledged as interconnected with and of equal importance to education (Hobgood, 2015; Wood, 2015). Like education, care is particular, highly contextual, and political. From our starting supposition that care is essential to life, and grounded in a feminist disability studies perspective, this special forum *Cripping Care: Care Pedagogies and Practices* engages care's complexity in relation to multiple intersecting issues: (1) the rights of persons with disabilities and chronic illnesses to support; (2) dawning public knowledge about the violence of institutional care and custody regimes against young, aging, disabled and racialized persons (including in colonial institutions); (3) critiques from feminist, disability and Global South scholars of care's oppressive tendencies; and (4) the implications of neoliberal care regimes for the world's disabled and aging populations (see, for example, Aubrecht & Krawchenko, 2016; Williams, 2011). Indeed, these complexities of care have increasingly come to occupy a central place on scholarly and global policy agendas (Yeandle et al., 2017).

Critical care theorists raise fundamental moral questions about the needs, rights, responsibilities, and power of carers and those who need support; questions whose philosophical and political moorings have much in common with those grounding critical pedagogy (Monchinski, 2010; Tronto, 1993). Care scholars have not yet considered how care relations—and the teaching and learning that occur through care exchanges—are necessarily pedagogical. The pedagogic features of care remain overlooked and undertheorized despite the general orientations of the fields of education and social care to the centrality of relationships in the daily activities of living. This is especially curious given that pedagogy scholars in diverse areas ranging from environmental education (Goralnik et al., 2012) to early childhood and post-secondary education (Magnet et al., 2015; Wood, 2015) have argued for adopting an ethics of care alongside that of justice, and for closely attending to care as integral to any critical, disability or other social justice pedagogy.

In this forum, we build on the critical pedagogical insight that practices of teaching and learning rooted in Eurocentric humanist systems of education delimit ways of knowing/what counts as knowledge (Freire, 1993; hooks, 1994). We assert that care relations grounded in similar logics likewise constrain what can be known about and across difference. Insofar as care relations position the carer as agent and those who need support as acted upon, hegemonic care practices—like Freire's "banking system" of education and hegemonic teaching practices—override more open-ended, processual and potentially fertile exchanges across human differences, as well as between human and non-human life and the animate and inanimate world. We make the case that care, like education, is not simply an investment that yields losses or gains. It is not a resource that owners can "deposit" or "withdraw". It is, rather, a reciprocal relationship that requires the active—though not necessarily the equivalent or equal—involvement of all present in care exchanges.

*Cripping Care: Care Pedagogies and Practic*es asserts a new turn in feminist disability studies to advance care conversations by (re)orienting to care as critical pedagogical terrain. To "crip" care as vital terrain for teaching and learning means "to shake things up, to jolt people out of their everyday understandings of bodies and minds, of normalcy and deviance" (Kafer, 2013, p. 15; also see Sandahl, 2003). Care scholars have recently begun to recognize the value of a cripped approach to care. Sally Chivers (2017), for example, crips care advice literature within the context of neoliberal austerity thinking "to politicize, activate, and understand marginalized body-minds" (p. 7) in ways that (re)value care and disability. In this special forum, we turn the tables and open the terrain of care itself as necessarily pedagogical, replete with lessons about the self, other and world including histories of power and marginalization, resistance and reclamation, normalcy and deviance, affect and violence, fleshy sensuality and dehumanizing systems. Cripping care as pedagogical is a radical rethinking of—and learning from—the fraught knot of "normalcy and deviance" (Kafer, 2013, p. 15) at the core of care relationships and 'caring' regimes. Our approach to cripping care recognizes care as fundamental to life. It also recognizes how caring relationships characteristically carry a jolting, perhaps irresolvable paradox—that of transgressive possibility and coercive constraint, intimate inter-dependence and constraining power, love, and violence. In this, care seeks to normalize or cure while also holding possibilities for individual and collective transgression and freedom (Douglas, 2010, 2016; Kelly 2013, 2016, 2017).

Disability perspectives have long challenged common and scholarly approaches to care, insisting on the ways that care is intertwined with patronizing attitudes and behaviours that can be used to oppress those who require support or work in the field of care. Most alarmingly, claiming to "care for" people with disabilities as a socio-medical category has justified segregated education and living arrangements, institutionalization, abuse, sterilization, painful and ineffective treatments, and many other harms to disabled bodies (Ben-Moshe, Chapman & Carey, 2014; Kelly, 2016; Rice, 2014). These harms are often uncomfortably motivated by sincere caring intentions and concern. In the Global North, Independent Living approaches question the conflation of disability with dependency and the need for care, and emphasize the right to autonomous personhood, favoring terms like "help," "support," or "assistance" rather than "care" (Shakespeare, 2006). At the same time this disavowal of the term care is not a disavowal of fundamental social and health services required by many to participate in everyday activities. Scholars working at the intersection of disability, feminist and other critical approaches to care have more recently issued calls for disability studies approaches that center interdependence in ways that bring the perspective of disabled people and the force of political economy to the fore, taking into account gendered, racialized, and classed aspects of care work while sustaining earlier disability critiques of the realities of violence against disabled persons within care relationships (Douglas, 2016; Kelly, 2013, 2016, 2017).[1] We are called to interrogate the needs, interests, and rights of those who require support and those who provide it (both human and non-human), the policy infrastructure that governs the uniquely public/private spaces of care, as well as the deeply embedded cultural references that our understandings of care are steeped in. There is also much relational space among these experiential, policy and symbolic arenas, spaces that are perhaps the most difficult to explore.

The scholarly articles that make up this forum on cripping care attest to the growing urgency for critical disability studies to interrogate care's complexities and excavate the pedagogical possibilities (Rice et al., 2016; 2017) of intimate and structural care relationships in the service of disability emancipation (Viscardis et al., under review; Rice et al., forthcoming). Together, these four articles crip understandings of care relationships as non-objectifying, unscripted and immeasurable but also finely attuned to power in its myriad aspects, including its aesthetic, sensual, fluid, non-material, affective, non-linear and spontaneous dimensions. The forum crips care as not only fundamental to life, but also divergent and potentially emancipatory, offering glimpses of becoming human together in relationships that move beyond neoliberal, ableist, capitalist, and colonial modes of power, expected subjectivities and humanist notions of the human. Together, the articles exemplify the radical and engaged pedagogy Bell Hooks (1994) describes as a "practice of freedom," one that centrally involves critique as well as passion, creativity, excitement and caring exchanges that implicate us all in the call to critical reflection about ourselves, the other and the world. This locates the forum—and intervenes in care conversations—at the intersection of disability studies, feminist and other critical approaches to pedagogy and care and inserts a distinctly feminist crip approach to care practices.

A Distinctly Feminist Crip Approach to Care

A distinctly feminist crip approach to care forged through this forum (re)orients those in care relationships—mother and child, human and animal, teacher and student, mad activist and family member—as relationally constitutive learners/teachers who generate knowledge through approaching the care exchange as a teaching and learning encounter. Each article attends to the intricate dance within relational space, along with what might be learned from one another through this pedagogical focus about non-normative embodied life, power and remaking care anew. In this approach, crip theory interweaves with feminist disability studies and other critical approaches to open up conversations about disability and care in ways that are both generative as well as radical, working across tensions around identity politics that can reify difference and polarize care conversations along transnational, race, class, gender and sexuality lines. As such, the forum traverses interdisciplinary terrain including disability, feminist, mad, new materialist, and transnational feminist and educational scholarship. “Crip,” like “queer,” Kafer tells us, “examine[s] how terms such as ‘defective,’ ‘deviant’, and ‘sick’, have been used to justify discrimination against people whose bodies, minds, desires and practices differ from the marked norm” (2013, p. 17; also see McRuer, 2006; Sandahl, 2003). Collectively, the authors offer fresh perspectives on disability and care that contest normalizing, often violent care regimes and practices—including normalizing therapies or institutionalization—under the guise of care structured by ableist colonial logics, patriarchy and neoliberal capitalism. Critically engaging the paradox of care, cripping care as put forward in this forum foregrounds the agency, experience and value of disabled persons, and has implications for remaking social policy, support and services in ways that do not foreclose disabled persons’ access to life or eschew all those in caring relationships.

In her contribution, “What Is a Service Animal? A Careful Rethinking,” Margaret Price opens new questions about how hierarchies and histories of human and non-human difference are forged and maintained. Through her intimate first-person exploration of the complexities of care between human and animal in Canada and the United States, Price reveals how the governance of service dog regulations overrides the affective and ambiguous elements of caring relationships, making requisite animal (and human handler) “fitness” in ways that expel—or at least highly regulate—disability and difference, whether human or animal. Bringing old and new materialisms together in an approach she calls “crip spacetime,” Price crips the ways we might think about how human/animal and object/affect become together: “…There is no clear distinction between ‘person’ and ‘environment’; rather, disabled life (and death) become through a complex dance of space, time, objects, texts, and organisms." Price foregrounds both the sensuous pleasures and material constraints and violence that echo throughout in caring relationships. In her commentary, she offers a rethinking through which we might come to learn differently about the caring relationships, histories, objects and affects that compose our everyday worlds.

Nandini Ghosh and Supurna Banerjee crip understandings of care and disability within the context of the Global South in their article, "Too Much or Too Little? Paradoxes of Disability and Care Work in India." They examine mother-daughter relationships in three rural villages in India for girls with profound physical and/or cognitive disabilities. The authors surface the intimate ways care is lived and negotiated by mothers and daughters in these contexts of severe poverty and patriarchy where community, medical and rehabilitation services are in short supply, and boundaries between duty/burden and love/violence blur in the everyday. Ghosh and Banerjee challenge readers in the Global North to question tendencies toward familiar and 'too-tidy' critiques of care as oppression or as 'natural' delight. Care, as the authors show, is a complex relationship that is often both, simultaneously. Through the sheer physicality and intimacy of their descriptions of care, Ghosh and Banerjee reframe the social model of disability alongside a politicized ethic of care within the specifically communitarian ethos of three rural villages. They call for culturally specific analyses that centre the tensions (Kelly, 2017) of care— autonomy/dependence, impairment/disability, public/private, individualism/communitarianism, and care/violence.

In "Cripping Care for Individuals with Psychiatric Disability: Looking Beyond Self-Determination Frameworks to Address Treatment and Recovery," Meghann O'Leary crips conversations about self-determination, care and psychiatric disability. Through an extensive literature review, O'Leary shows how dominant care theories and mental health discourses of self-determination do not address the ways in which the material conditions of transnational capitalism, including the intersecting oppressions of race, class and gender, produce unequal opportunities for self-determination and recovery. Working from a feminist materialist disability studies perspective, O'Leary employs autoethnography to excavate what she calls the "often-unacknowledged material conditions that contribute to mental distress." By surfacing the intimate ways in which this process unfolds in her own life, O'Leary calls for a radical re-visioning of care politics that addresses intersecting oppressions and theorizes care more completely.

Susan Baglieri and Jessica Bacon's article, "Teaching and Care: Cripping Fieldwork in Teacher Education," moves us to (re)consider institutionalized forms of care within public education in the United States. The authors describe part of a larger research study that aims to crip teacher education and build access to higher education for intellectually disabled adults. They focus on a "cripped" fieldwork experience with teacher candidates, which hosted adults labelled as intellectually disabled who opted (as part of their day program options) to attend college once a week. Drawing on the social model of disability and Noddings' concept of ethical care (1984), the study crips normative understandings of care within public educational contexts that characterize difference in terms of deviance and disabled persons as the "benefactors" of professionalized and paternalistic remedial care. In weekly reflection journals, teacher candidates come instead to explore care as a form of reciprocity that centers teaching and learning and blurs binaries. From within reciprocal relationships—albeit ones where power and vulnerability is unevenly shared— teacher candidates come to embrace the non-reductive and fundamental worth of all within relationships, and to forward radical notions of inclusion and care.

The articles in this special forum *Cripping Care: Care Pedagogies and Practices* assert a radical new care politics that pushes the borderlines of theorizing and praxis. Together, they crip the now-familiar notions of care in disability and feminist studies as business exchange, oppressive relation or romanticized bond without denying care's sensual pleasures, labour and pains, ethical questions or political economy. Cripping care as dynamic pedagogical terrain brings relationality and power to the center, and breathes life into care as a mutable, symbiotic living bond, as reciprocal, though not necessarily symmetrical, vulnerability that affects us all (Rice & Mundel, forthcoming). In its concreteness, care as relationship is also ineffable, open to the uniqueness and difference of another to whom we are intimately tied (van Manen, 1990, p. 142-156). This involves care—giving, receiving, and giving back; knowing, unknowing and discovering; creating, teaching and learning about self, each other and the world anew.

Patty Douglas, PhD is an Assistant Professor of Disability Studies in the Faculty of Education at Brandon University in Manitoba, Canada. Her research on disability, mothering and care uses critical, interpretive and art-based approaches to speak back to exclusionary systems, and work toward more liberatory pedagogies and care practices that open access to life. She is principal investigator on the Re•vision Centre affiliated project *Enacting Critical Disability Communities in Education*, bringing together autistic persons, family members, educators and artists to explore new meanings of autism and inclusion that move beyond deficit and remediation. She produced 17 short films on this project. More information abou the project can be found here http://enactingautisminclusion.ca/. Patty is currently working on her first book *Autism, Ethical Disruptions and Care Pedagogies*.

Carla Rice is Professor and Canada Research Chair at the University of Guelph in Ontario, Canada specializing in embodiment/subjectivity studies and in arts-based/research creation methodologies. She founded *Re•Vision: The Centre for Art and Social Justice* as a leading-edge arts-informed research creation centre with a mandate to foster inclusive communities, well-being, equity, and justice. She has received awards for advocacy, research, teaching and mentorship, published 4 books, 69 papers, 26 chapters, and 13 reports, and produced over 400 films. She currently contributes to nine research grants, including as co-director/PI of *Bodies in Translation: Activist Art, Technology and Access to Life,* a Partnership Grant that engages 23 community organizations and universities to cultivate d/Deaf, disability, mad, fat and aging activist arts in Canada over the next 7 years. For more information on the Re•Vision Centre see, https://projectrevision.ca/ ; for more information about Rice, see, http://www.carlarice.ca/.

Christine Kelly, PhD is an Assistant Professor in Community Health Sciences at the University of Manitoba. Informed by feminist and disability scholarship, Dr. Kelly uses qualitative methods to explore the politics of care and Canadian disability movements. She presently co-edits a book series for UBC Press, is leading a CIHR Project Scheme study on directly-funded home care, and is involved in initiatives related to disability, aging and care. For more information, see www.christinekelly.ca.

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Endnotes

[1] For other examples of this field-changing work see, Hughes, McKie, Hopkins, & Watson, 2005; Kröger, 2009; Mingus, 2011; Morris, 2001; Murphy, 2015; Robinson, 2006; Simplican, 2015; Williams, 2011.