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Caring for Whom? Racial Practices of Care and Liberal Constructivism

Asha Leena Bhandary

Department of Philosophy, College of Liberal Arts and Sciences, University of Iowa, Iowa City, IA 52242, USA; asha-bhandary@uiowa.edu

Abstract: Inequalities in expectations to receive care permeate social structures, reinforcing racialized and gendered hierarchies. Harming the people who are overburdened and disadvantaged as caregivers, these inequalities also shape the subjectivities and corporeal habits of the class of people who expect to receive care from others. With three examples, I illustrate a series of justificatory asymmetries across gender and racial lines that illustrate (a) asymmetries in deference and attendance to the needs of others as well as (b) assertions of the rightful occupation of space. These justificatory asymmetries are cogent reasons to evaluate the justice of caregiving arrangements in a way that tracks data about who cares for whom, which can be understood by the concept of the arrow of care map. I suggest, therefore, that the arrow of care map is a necessary component of any critical care theory. In addition, employing a method called living counterfactually, I show that when women of color assert full claimant status, we are reversing arrows of care, which then elicits resistance and violence from varied actors in the real world. These considerations together contribute to further defense of *the theory of liberal dependency care's* constructivism, which combines hypothetical acceptability with autonomy skills in the real world. Each level, in turn, relies on the transparency of care practices in the real world as enabled by the arrow of care map.

Keywords: interpersonal justification; contract theory; care ethics; care theory; liberalism; constructivism; intersectionality; women of color feminism; critical care theory; the arrow of care map; John Rawls



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1. Introduction

Prior to the advent of care ethics [1–4], mainstream western political philosophy had been written by people from populations who were socially licensed to receive care without providing it. For these people, usually western white males, the fact that they received both material caregiving and epistemic leaning¹ [5] was narrativized in ways that made it invisible or justified. These authors' conceptions of themselves were no doubt shaped by the ease with which they accessed care, the lack of a felt debt to their caregivers, and the deftness with which they grafted the substance of others onto themselves.

Care ethicists destabilized those dominant understandings by articulating the moral significance of the human need for care, thereby asserting the robust and nonreductive value of caring relationships. In addition to articulating care as a moral value and as a competing moral theory, care theorists have also articulated its political value [6–8]. I shall employ the term “care ethics” to refer to the moral theory, and “care theory” to characterize a broader swath of theories that address the value of care while combining them with other values in ways that do not always prioritize care as value or practice. Thus, “care theories”, as I use this term, are indebted to care ethics, but they can also conflict with some of the core tenets of care ethics, such as the relational self or the rejection of the justice paradigm [9].² For instance, an account may endorse care ethics and show how it relates to other doctrines [10]. Alternatively, a theory may evaluate the subject of care from within an

alternative framework, as for instance is the case with liberals theorizing about care and feminist liberals³ [11–14].

This article advances a form of care theory that is decidedly liberal. It is informed by feminism, but it departs from canonical feminist liberalisms and maintains distance from a set of care ethical tenets, such as positing the self-in-connection as the base unit for analysis. “Liberalism” characterizes a cluster of political theories, and the form of liberalism I advance [12] is a political theory that prioritizes the autonomy and freedom of the individual within the constraints required for fair social cooperation [15,16], (p. 65, [17]), [18,19]. In addition, I insist on conceptual separation between the *philosophical* doctrine of liberalism and the *actual* western societies where the doctrine has been developed, but which have never yet conformed to its ideals due to histories of racism, colonization, and gender oppression [19,20]. Thus, I develop a new variety of the philosophical doctrine of liberalism, one that enables critique of the real societies where the doctrine has been dominant. In addition, the critical theoretical lens I devise for these societies sheds light on the distributive inequalities that inform care ethical claims about entitlements to receive care. I thereby expand the toolkit of care theory to include liberal constructivism and a methodology I call “living counterfactually”. In doing so, I further advance the theory of liberal dependency care (LDC), which is an anti-oppression liberalism that evaluates care through the lens of a minority woman, thereby bringing together care theory, liberalism, and women of color feminism(s).⁴

The *theory of liberal dependency care* evaluates the justice of a society by including caregiving arrangements in its system of practices [16], and in doing so, it evaluates these arrangements in a way that is open-ended about the practices and caregiving relationships compatible with a just society [12,28–30].⁵ Crucially, the arrow of care map [28] supplies a conceptual scaffold for evaluating group-based patterns of caregiving. The arrow of care map demands that we track who receives care, and from whom, in ways that evaluate system-wide patterns and distributive inequalities. Thus, it requires an assessment of racialized distributions of caregiving, requiring that we ask the question: do people of color provide most of the care, and whose care needs are met at a high level? Due to the abstract nature of the mapping function, which takes human beings as the first basis for analysis and then asks social scientists to track data about care received and provided according to, first, salient social groups, and then, to continue looking for underacknowledged categories, the map is a vital tool for care theory to identify unequal distributions of care given and received, indirectly revealing who is considered worthy of care. The arrow of care map’s reliance on individual human beings as the basic units of analysis leaves open that people may have conceptions of the self and lives of value that are deeply intertwined with others. When we track care in a way that does not already assume the legitimacy of the relations of care, local patterns of caregiving and globalized care become evident. Tracking quantities of hands-on caregiving in intensity and duration, the map yields information about how care practices are arranged within and across societies. It brackets people’s relationships, and in doing so it provides an independent source of data, one that does not embed background inequalities into its justification.⁶ Understanding our care relations through the data as it is organized by this concept is necessary for a comprehensive evaluation of the justice of the system of practices. It brings into view the way that, for instance, in the U.S.—where emotional care, social cohesion, and material care are invisible and undervalued—these forms of labor are often assigned to the intersectional groups with the least social power, namely, women of color and individuals who do not have the security of citizenship.

If liberal theorists are to arrive at considered judgements about what a fair set of social practices will be, we must include our practices of caregiving.⁷ But to include caregiving practices is to unearth a form of labor that generally coincides with subordinate status in social hierarchies. Because the subjectivities of people in hierarchical social forms are relationally linked, asserting full claimant status for women of color, who are socially assigned the role of serving as the repository of society’s needs, will threaten the subjectivities of many men of all races and white women. To evaluate the obstacles to this

change, and the nuances required for it, I employ a methodology for a care theory of justice defined by women of color called “living counterfactually”.

2. Living Counterfactually

Imagine a world in which people of color refuse to care for white people.⁸ Call this world *W'*. In this (logically) possible world, the normative intuition that we are entitled to the care we need would no longer be a care ethical foundation. Instead, the referent for “we” would become more specific. With the global white population unable to access caregiving by people of color, they would have to meet their own care needs. Here, world *W'* is one in which, at first, whiteness is accompanied by the habits, entitlements, and subjectivities present in the current world. In this world, I expect that a social norm would gradually emerge requiring an explicit justification on occasions when one is called upon to care for others. This justification would likely be grounded in a variety of reciprocity (see [29] for an account of interpersonal reciprocity).

By entertaining this possible world, I am not necessarily recommending the corresponding action-guiding measure of not caring for others across asymmetric racial lines. There are contexts in which such care is legitimate. In addition, in the real world, people of color often experience negative repercussions when we withhold socially expected care and deference. Of particular interest to the present inquiry is that these negative consequences are not limited to persons who are formally employed in the caregiving sector. For instance, the mammification of women of color in white collar workplaces creates conditions under which minority women who are not caring and deferential are quickly labeled “uncollegial” [33–35].⁹ A final reason to refrain from recommending the global withdrawal of racialized care is that a global withdrawal of racialized care might create economic hardships for people of color who are caregivers for white families in the short term [36].¹⁰ Therefore, although I do assert the normative aim of upending racialized care as a system, and consider a commitment to achieving it essential to egalitarianism, determining how to achieve that aim will require the expertise of interdisciplinary scholars, including historians, anthropologists, policy makers, activists, and care workers.¹¹

In world *W'*, where racialized material caregiving has been upended, we would see modifications to the selves of people who have long received care without reciprocating it. Those changes, in turn, would liberate women of color because an expansive freedom for women of color will become possible only when we are no longer perceived as people who exist for use by others. I investigate obstacles to *this ideal state of affairs*—ideal in the sense that it is an ideal to be aimed for—through a method I call “living counterfactually”. *Living counterfactually*, as a minority woman, means asserting full claimant status in micro-interactions in the workplace, in one’s community, and generally, in both private and impersonal spaces. Because Latinas, Black, Indigenous, Arab, Asian, and/or Brown Women are expected to attend and defer to others, asserting full claimant status from this social position reveals the challenges and the requirements of the radical social change required to achieve justice.¹² To move through the world as a woman of color asserting full claimant status is like sending iodine contrast into an artery prior to a CT scan. It supplies contrast through which to diagnose the system. And, like this injection, it can burn.¹³

When we live in this way, we live *as if* the world were otherwise. We thus act as if affordances are present when they do not exist. As a result, the subjectivities that supervene on the unjust caregiving arrangement become evident through their holders’ expressions of rogue emotions, violence in its many forms, microaggressions, and confusion.

Mainstream egalitarian political philosophy does not *assert* the non-personhood of women of color, but actual social practices in the U.S. do not fully grant equal personhood status to women of color [38].¹⁴ We see this phenomenon clearly in the case of caregiving injustice in the U.S., which, together with racial and gender hierarchies, is a vital part of the social forms where philosophical liberalism is endemic.

For women of color, then, to withdraw care and deference from impersonal others is to reveal how the social form depends on these hierarchies. A social form’s underlying

social inequalities and sedimented hierarchies are revealed through overt violence as well as microaggressions which together betray “liberal” societies’ caregiving substructures.

Thus, when women of color live as full persons, which is to act on reasonable entitlements and to expect the corresponding affordances, allowances, and responses, we are living counterfactually, in ways that are not permitted, and also in ways that do not exist in a robust ontological sense based on the social meanings of our actions. We are living as if we are in a possible world, one that does not currently exist. Therefore, the completion of a woman of color’s expression of agency does not occur; our expressions of full claimant status do not receive the proper uptake, and we do not have the affordances that should accompany it, such as walking on a trail unmolested or having our workplace contributions recognized.¹⁵ Although we put forth an action, the meaning we enact is not the meaning it gains from dominantly positioned interlocutors, and therefore the action is not completed.¹⁶ Moreover, these actions’ lack of intelligibility to socially dominant subjects can elicit negative social and legal consequences.

Because caregiving demands that the carer direct their attention and actions toward others, there is both conceptual and practical overlap between hierarchical deference and caregiving. The umbrella concept for these dispositions and actions is an “other-directed orientation” (p. 79, [12]), because they each demand a psychological stance in which a person is oriented toward the other, permeating both what they pay attention to (other-directed attention) and the target of their action (other-direct action) (pp. 79–89, [12]).¹⁷ “Whiteness” depends on caregiving in many forms by non-whites. In the absence of these relations of care, deference, attendance, and epistemic prioritization, whiteness would not exist in its hierarchical form, which is as a world-structuring form of illegitimate privilege.¹⁸ I define “privilege” here as society-relative disproportionate ease of access to fundamental primary goods, to one’s relationships, and to a cultural context in which one feels at home, relative to others in the society where you live.

Correspondingly, the non-proximate cause of resistance to the freedom of women of color is that caregiving arrangements continue to be largely invisible, and that, in these invisible arrangements, which are in place to secure vital needs, women of color are the default repository for the needs of others. Some of these “needs” are deeply felt by individuals as emanating from their sense of themselves. They shape their understanding of what is just and right. For example, a man living in, and shaped by, a patriarchal society feels he should have his preferences met at a high level. In the space of social affordances, these preferences transmute into needs. Less well understood in the context of theories of justice is how white women’s subjectivities are also predicated on caregiving injustice in social practices that subordinate women of color. For this reason, I dissect this relational micro-construction below.

When violence against women of color is perpetrated by white women, the language with which to articulate this violence, and the means for receiving acknowledgement, justice, and repair, are often absent. The lack of uptake often occurs when the authority to which the complaint is addressed is a white man, because the dyadic relationship between white women and white men includes an affordance of femininity and vulnerability for white women not extended to women of color.

Let us now consider three cases of violence, where the violence is physical or epistemic, and it becomes obvious when viewed through an analytic lens that prioritizes the autonomy of women of color.¹⁹ My argument throughout relies on the undefended premise that women of color have legitimate needs to receive sensitivity, consideration, and epistemic leaning from others.²⁰

In the first two examples, which I include in the mode of personal narrative, or what Bat-Ami Bar On calls public autobiography, [46–48]²¹ I describe a minority woman who is ambiguously raced enacting an entitlement to run on a public trail, and that act being received with anger and violence when it conflicts with the claims of a white woman and her dog. The third example supplies an additional data point to fill in the larger social context in which microaggressions and racism take on varied forms. In that example, I rely

on testimony to describe an Asian family living in a large home in a predominantly white historic district enacting a legal entitlement to build a fence.

Although these cases can be profitably analyzed by the sophisticated discourse on epistemic injustice,²² I include them here in defense of LDC's anti-oppression liberalism. I leave open, at this stage, whether the phenomena of epistemic injustice more generally can serve as decisive considerations in favor of the two-level contract theory of the theory of liberal dependency care [12]. To ascertain whether that is the case, a comparative analysis is required to evaluate the theory of liberal dependency care against other leading theories, such as deliberative democracy, the capabilities approach, Rawls's own view, and other varieties of constructivism (e.g., [49]). Here, though, I employ these examples in a more limited way to illustrate how particular cultural constructions inform needs-interpretations, entitlements, and accountability—all of which are rooted in the injustice of caregiving arrangements.²³

3. The Trail

3.1. Episode 1. *Epistemic Leaning and Interspecies Status Hierarchies*

On a beautiful spring day in April 2020, during the beginning of the COVID-19 pandemic, in Iowa, I left my house for my routine run in a local park one mile away. I wore a neck gaiter, sunglasses, and a baseball cap. As I ran up a hill on a trail, a route I took that day to avoid the more heavily traveled main trail, I moved to its right edge to attempt a 6-foot separation from a couple and their two dogs, simultaneously pulling up my gaiter as a mask to avoid breathing on them.

The smaller of the two dogs, held on a retractable leash by a tall and slender white woman likely in her 40 s, silently darted horizontally across the trail and bit my leg, decisively. Evidently, the leash had not been retracted to control the dog's range. Shocked by the attack, I stopped in my tracks, and said, "Your dog just bit me!" The woman quickly picked up the dog and continued walking, her male companion and his dog also proceeding down the hill on the path. I remained in place, examining my leg, and told them that I was looking at whether he had broken the skin with his bite. The man then paused, as the woman continued forward. I continued with, "It really hurts", and then, "Maybe I should get your contact information, just in case". The man, registering the words, reached into his pocket to procure his business card, which he handed to me. This was the first moment at which it seemed like they (or rather, he) registered that I was a person. He said, now displaying either distress or concern, "Oh yes, we would be happy to send you all of her vaccination records, whatever you need". Then they continued their walk, proceeding down the hill.

Gathering myself, I continued my run, only to pause at the top of the hill, in pain from the injury, my calf throbbing and pulsing, realizing that I could not continue as planned because I was, in fact, injured. Thus, I deviated from my route, taking a shortcut through the trail system back to the cemetery adjacent to it, which is my standard point of entry and exit for this trail run. During this injured interlude, I had been thinking about the need for moral repair, and that I was not interested in litigation as its instantiation. Consequently, when I saw the couple in front of me, I resolved to approach them, and in so doing, to initiate a process of moral repair.

Upon seeing me approach, when I notified them of my presence by saying, "Coming up behind you", the woman accused me of chasing her. What I did next was an attempt to hold them accountable²⁴ for their actions and in doing so, to extract from them recognition of my status as a person. Maddeningly, the woman (henceforth Woman A) persisted in refusing to acknowledge that I had suffered, and her level of concern toward me seemed no different from what I imagine it would have been if her dog had chased, and bitten, a squirrel. Woman A exhibited resistance. The form her resistance took included repeatedly stating that her dog had never bitten anyone *before*. When stating this claim, she appeared to believe it erased what had just occurred.

Although I had been cooperative and neighborly at first, and perhaps even conciliatory, offering the possible exculpation that perhaps the dog had bitten me because my face was covered by my mask, sunglasses, and hat, woman A's demeanor and persistent denial led me to begin to suspect I was not being engaged with as a full person with the attendant claimant status and rights. The physical space my body occupied was not being granted to me.²⁵

I began to suspect that the most likely explanation for their attempt to convert my status was racism,²⁶ and that our interpersonal conflict was resulting from my refusal to accept this ascription. Some readers will not need further justification of this claim, but others may find it helpful. As an ambiguously brown, biracial, Asian-American woman, living in the Midwest during the years of Donald Trump's presidency and subsequent popularity has given me an education in recognizing the signs of racism. Nonrecognition of my bodily integrity and deafness to my claim-making are typical indicators of racism. So, after Woman A repeated, yet again that he has never bitten anyone before, I lobbed an exploratory rhetorical charge by saying, "Then why did he bite me? Has he never seen a brown person before?"

In response to my exploratory antagonism, her thin veneer of reasonableness dissolved. At this moment, a second conversion occurred. Woman A was now the aggrieved party. To attempt to substantiate her victimhood, she shouted: "I'm from South Africa. I'm sick of you Americans talking about race". And then, "If we are going to talk about race, we have to talk about gender And, I am a *woman*".

She seemed to think the fact of her womanhood made *her* a victim in relation to *me*, both of us appearing as cis women. Her complete lack of grasping the irony of this claim betrayed her lack of knowledge of Sojourner Truth's 1851 "Ain't I a Woman" speech. Unfortunately, her proclamation was not without cultural meaning in 2020, for Woman A's claim was presumably intelligible against the backdrop of racialized tropes of hardness of black and brown women, which are employed as contrastive to fragile white femininity. The phenomenon that white women understand themselves through their victimhood in relation to white men certainly extends beyond Woman A, and can occupy a salient locus in their cognitive schemas, thereby facilitating evasiveness about the evils they perpetrate [55].²⁷

However, this woman's attempt at feminine victimhood was so inane, given the facts of the situation, that it merely increased her male companion's discomfort with the situation, who spoke alternating to each of us, saying to her, "Please, [her name], please, stop", and saying to me, "Please, please, what can we do, we want to make it right". After he convinced her to walk away with their offending dog, we continued to speak (he was holding their other dog), and he ultimately acknowledged their wrongdoing, saying that how they responded was not right, and they had not displayed the proper concern for me.²⁸

Over the following several days, the bite turned red, and a bruise appeared in the shape of half a dog's jaw (half of the jaw because, when it occurred, I was wearing a capri length legging, so that the dog's lower jaw made contact with my bare skin, while the upper half of the jaw made contact with the legging). Ultimately, it took about three weeks to heal. I was reluctant to report the incident, but my friend, a responsible dog owner, and (whom I will note is also a white woman) repeatedly urged me to report it, so I called the city, who verified that the dog's vaccinations were up to date, and they then contacted the owners to require the dog to stay indoors for a monitoring period at their home.

Although not initially concerned about me, the man was permeable to my demand for interpersonal recognition and justification. When prompted, he emerged from his state of inattention. The woman, in contrast, was entirely impermeable to the fact of my physical suffering. Instead, she appeared concerned about her dog, whom she held in a protective way. I think it would be accurate to say that she cared quite a lot about her dog, and not at all about me. What this example demonstrates is the importance of asking the questions, "*Care for whom?*" about the broader social system, in terms of distributive arrangements, and then, as a matter of evaluating individuals, "*Toward whom* does a person

activate their caring disposition?" This second question, an ethical one as it occurs in an individual's action-guided life, supervenes on the background distributive arrangement. The example also illustrates how the moral tenor of social relations in social forms such as ours are structured by caregiving and deference by people of color, where this deference and attendance is a matter of race and gender. The inequalities of concern and access to physical space described above become more pronounced when considered in light of a second case [56,57].²⁹

3.2. Episode 2. Equations of Space

Let us return to the same park nearly a year later, where one can run about seven miles without repetition, and where, throughout the pandemic, a proliferation of (in my experience, only white) dog owners have flouted the laws requiring dog leashing in this park. In February (2021), I encountered a different woman (Woman B) who refused to move her dog from the trail so that I could pass. This event took place when we had about 1.5 feet of snow on the ground, with a narrow trail of packed snow. She had moved aside, and two of her dogs had accompanied her, but a third dog remained squarely blocking the only passable trail. I asked her whether she was going to move this dog from the trail or leash him so that I could pass, to which she responded by looking at me, and saying that, no, she would not leash her dogs, and also, "I've been walking like this with my dogs for 20 years". With a pause and then a hardened stare, she stated the challenge, "Have my dogs been aggressive toward you?"

When this woman failed to comply with the law, she demanded that I give a reason for expecting lawful access to natural space while she continued to act illegally. Moreover, rather than eventually conveying any regard for my mental and affective states, she demanded that I *epistemically lean* toward her dog. In fact, after I had stopped running, and was engaged in this interaction, and it seemed that the dog was quite elderly and somewhat confused and not that alert, whereas the woman had a hard stare and an aggressive stance. My conclusions resulted from attuning myself to the situation, which took effort, and was not the type of cardiovascular effort I planned to expend during my trail run.

Woman B, like Woman A, attempted to invert who was aggrieved, and her attempt to assert victimhood involved demanding a justification from me for my reasonable claims.³⁰ And, although in fact I did offer a reasonable justification, it was not one that she accepted.³¹ Tracing the gap between actual *acceptance* and what is *acceptable* often coincides with sedimented social hierarchies, and in the two cases above, the relevant social hierarchy was our visually coded races.³²

3.3. Episode 3. We Don't Like Your Fence!

Finally, let us consider a third example, one experienced by my family in 2020. I am not home when it happens, and so this is reconstructed through testimony of my family and our friend. In this example, an elderly white woman walks past our stately home in a left-leaning historic neighborhood in which property ownership is buttressed by generational wealth. Although we know many of our neighbors, we are unacquainted with this woman.

My partner is outside in the yard, which is situated on the top of a hill. This woman, let's call her Woman C, blurts from the sidewalk, launching her words up over our fence, says: "The neighbors have been talking about it. And you know, we don't like your fence". My partner responds with something like, "Well, it's nice to own a house and make those decisions for oneself". Because my partner is a physician who specializes in cognitive decline, he tempers his internal response with compassion, in case she suffers from some sort of decline of her cognitive capacities. His response is restrained, but she perseveres, now saying, "Where are you from?", to which he responds, "We're American". And she says, "No, you're Indian".

Our daughters observe, eyes wide, watching the strange lady. It is only when she has seemingly sated herself that she promptly turns toward our friend, a neighbor walking

her dog, to chat with her in a friendly and fully lucid manner. Registering the episode with amazement, this friend tells us it gave her a new appreciation of the existence of racism. Upon discussing the example at the dinner table two years later in order to write this article, my teenage daughter reported frankly that this experience is one of her core childhood memories.

These three episodes sample a larger experiential trove. And although the discerning reader may have already noted that all three conflicts occur as competitions over physical space, I set aside those questions about claims to territory to assess the significance of racialized asymmetries in justification for a theory of justice.

As one can see in each of the preceding cases, a normative presumption in favor of interpersonal justification will disadvantage the person occupying the position I occupied nearly every time. Asymmetric demands for justification, paired with the impermeability of the interlocutors to my reasonable demands, serve as considerations against an account of justice that is limited to what actual people agree to. Therefore, the discursive inequalities I have described are among the inequalities that make it essential to a theory of justice to augment actual discursive exchanges with an abstract account of entitlements and distributions. The value of interpersonal justification must be tempered by attention to the social hierarchies that shape the justificatory exchange. Repeated demands for justification can create an atmosphere of terror, as they do when domestic abusers gaslight their victims, slowly dwindling the energetic reserves of the person from whom justifications are demanded. Even when these asymmetric demands for justification do not rise to the level of psychological abuse, the phenomenology of being asked for justifications consumes the time and attention of the person who is interrogated for living as a full claimant.

4. Entitlements Are Relational

Moreover, if we are to think about the distribution of care, we must also think about inequalities in entitlements and the political and deliberative procedures by which we arrive at these judgements. We must ask, “When a person is entitled to care, from whom are they entitled to receive it?” There is always a person who will provide that care. “Entitlements”, are needs that are socially sanctioned, with corresponding affordances. They are construed as legitimate needs in dominant discourses.³³ Legitimate needs are standardly indexed to an individual. However, because social inequalities enter into functionings at an early stage, reifying these inequalities must be avoided. Moreover, what others will grant as a legitimate need for a particular person will be infused with the dominant social narratives about the groups of which they are a part.

For a need to be understood as a need, and not a mere preference, it requires the uptake of others. The others, though, are not necessarily those who understand the form of life from which the need emanates.³⁴ So, for instance, a non-white family living in a racist state might need a yard fence to create greater visual and physical separation from strangers who might pass by wearing MAGA hats for young brown children playing in a sprinkler. Their white neighbors will not construe visual and physical separation as a *need*. Instead, they might interpret it as a mere preference for privacy, and even as a deficit in neighborly virtue. In contrast, other minority families who experience the social form in ways that are relevantly similar will recognize it as a need, and this uptake, by others who experience the social form in ways that are relevantly similar, is essential to well-being and to mitigate stress. In addition, though, the need must be approved by an authority if it is to be effectively construed as a legitimate need. Correspondingly, those who must endorse it as a need rather than as a preference are *powerful others* who occupy a dominant position (dominant in some sense—as the makers of theory, as government officials or legislators, as community members with the power to shape community understandings).

A need for safety is understood in its general form as a legitimate need. But when a person has an *effective entitlement*, particular instances of their needs are comprehended by others as violations in the social system. For instance, when someone has an effective entitlement, legal remedies and/or interpersonal and community rectification are available

to that person when her effective entitlement is violated. So, for instance, laws forbidding sexual assault and harassment now make it the case that women are protected qua women in the workplace. But as Kimberle Crenshaw has shown, women of color are disadvantaged in the law because they have to articulate claims in terms of either gender or race [39].

Furthermore, if we are entitled to something, someone else is accountable to us if they violate our ability to satisfy that entitlement. Thus, entitlements are linked to accountability. Accountability for harm and entitlements are relationally defined in a distributive arrangement. Who meets the need that we assert is ours? Against whom do we assert our entitlements? Complicating the relational nature of entitlements are the ways the founding inequalities of a society render privileged members unaccountable in practice when their actions violate the objective needs of others.

Consequently, when entitlements are asserted by people of color, and when we enact them without even a superficial nod of deference to the global racial order, resistance arises, deriving from an implicit social norm that people of color should tend to whites. These demands are relationally inextricable from the content white care recipients insert into the notion of “reasonable life expectations”. When whiteness is informed by a colonial subjectivity, it includes the ideas of dominating others and appropriating their labor (p. 47, [19]).³⁵ In western liberal societies informed by white supremacy, whites’ responsiveness to the need of nonwhites carries the social meaning of charity or altruism rather than obligation or a kind of reciprocity demanded by relations of equality.

Thus, the injustice of existing caregiving arrangements informs the intuitions philosophers employ when theorizing about care. The caregiving structure shapes human entitlements, affordances, and accountability. The injustice of the caregiving structure has also informed intuitions in non-feminist moral and political theories, but the extent to which racialized care has informed theorizing about care by white feminists has also been underexplored.

Moreover, background maldistributions of care inform intuitions at *more than one* stage of theory development. They inform the modeling of persons and the assessment of distributive justice. Caregiving arrangements include social understandings about which (social) groups of people should act in materially caregiving ways, and for whom. Consequently, a theory of distributive justice is needed as a framework with which to evaluate competing claims, where the people charged with theorizing about justice should gather information about existing patterns using the arrow of care map methodology, which requires tracking the care people give and received to assess the overarching fairness of the distribution without assuming the legitimacy of the relationships where care occurs. The task for theorists of justice, therefore, properly includes when assessing social norms and expectations for social groups conflict with a distributively just society, defined as a basic structure that is acceptable when viewed from any social position.

5. Resetting Intuitions in Liberal Theories of Distributive Justice

Because care is the spine of culture [12,20], and how we are habituated in relation to care deeply informs our understandings of the world as well as our physical embodiment in it, many of the people who assert a commitment to equality in a cool and calm moment will not sustain that commitment in their bodily habit and comportment, when relations of care are stake [58].³⁶

Therefore, to arrive at a *sense of justice* in a world with distributive injustice, one that avoids the reification of those very hierarchies, a method for thinking abstractly about distributions of care is needed.

My neo-Rawlsian theory, the “theory of liberal dependency care” (LDC), defends a variety of constructivism, one that makes explicit the background distributive patterns of caregiving. Rendering these practices transparent will also affect what counts as a “reasonable” claim and way of life. LDC’s structure of justification consists of (1) an abstract form of evaluation to assess what we would agree to if we did not know our social position in society, and (2) a requirement for autonomy skills in the real world. The first aspect,

this abstract module, is a version of the Rawlsian idea of hypothetical acceptability that embraces his earlier formulation of its subject of justice as the “system of practices” [16].³⁷

LDC, like John Rawls’s account of liberalism, is a form of constructivism. Constructivism embraces an iterative process of justification, whereby the intuitions employed are reflexively assessed in light of the account of justice that results. However, although the model of the person in Rawls’s account of the original position is purportedly neutral, the way persons are understood is in fact informed by assumptions about what a reasonable life includes in social forms where caring labor has been invisible [20] (Chapter 4).

When we assess the social practices allocating space on a trail in the first two cases above, the unequal standing of persons along racial and species lines becomes clear. If this practice is to be justified, it will have to make explicit the claim that the white person’s dog gets more consideration than a woman of color.³⁸ This aspect of social conventions about walking freely in a park then requires a justification in response to the question, “Why do these dogs get more freedom on the trail than this Asian woman?” As one can see in both cases above, actual interpersonal justification failed, but a removed form of impersonal justification will quickly falter when attempting to justify these encounters.

In addition, the constructivism I advance requires autonomy skills for people in the real world. Employing these autonomy skills, individuals who are treated as less than equal can articulate the harms they experience. The consequent augmentation of autonomy skills to hypothetical acceptability creates space for lived disagreements about values. It does so while retaining the need for an abstract form of evaluation to evaluate quantities of care received. Knowledge of the society’s distribution of care given and received must be used to further evaluate judgements and intuitions.³⁹

Consider how individuals’ command of autonomy skills in the real world impacted the resolution of the first two cases above. The law was clear for both cases because this park is one where dogs must be leashed. In addition, after the second incident, city officials had recently benefitted from anti-racist trainings as the result of the Black Lives Matter movement. And, informed by that knowledge and the salience it conferred on possible instances of racism, they responded to my report of these incidents (and most likely, reports by others) by posting large signs throughout the park reminding people of the existing policies, and the fine of \$195 for noncompliance. Notably, they did not trivialize the occurrences. I take the normatively satisfactory institutional response to be the indirect result of the combined effects of the agentic skills of the people who galvanized protests against racial injustice. Consequently, Woman A’s inversion did not gain institutional traction. Instead of institutional complicity, city officials acknowledged the wrong.

The theory of liberal dependency care is a theoretical backdrop with which to interpret these cases, which illustrate how racist interpersonal hierarchies persist in ways that limit the freedom and autonomy of women of color.⁴⁰ The racist interpersonal hierarchies are thereby linked to global caregiving arrangements that designate women of color’s role as one of attending to the needs of others.

Without experience in a fully just world to serve as the fount of intuitions, thought experiments, hypotheticals, and counterfactuals are needed to refine the intuitions that are to serve as inputs into this device. In addition, *living counterfactually* serves as a lived method of diagnosing the basic structure’s incompatibility with the autonomy and freedom of members of subordinated groups. Living counterfactually supplies necessary insights to guide the intuitions needed to understand how racialized patterns of caregiving pervade the bodies and expectations of white people. The autonomy of women of color thus exerts pressure against the social forms that are premised on our appropriation.

The lived experiences described above also provide support for the need for critical evaluation of our social practices. An excavation of specific culture tropes reveals the ways that images and narratives inform assessments of reasonable expectations. Reasonable expectations are premised on a given identity group’s assignment of a domain of self-sovereignty and autonomy. Here, I have shown how the relational expectations of members of other groups collectively crowd out the domain for self-sovereignty of women of color.

To discern the content of individuals' entitlements and affordances requires a cultural excavation. Abstract claims for entitlements and needs are always enacted in a particular context, and it is only through cultural critique that we can refine intuitions. This cultural critique is one that must be engaged in by people with autonomy skills and understanding of dominant cultural norms.⁴¹

The examples I have discussed offer additional reasons in favor of liberalism as the structuring distributive framework within which to evaluate a society's caregiving arrangement. Theorizing from the perspective of a woman of color, I insist on the enduring need to prioritize autonomy in a society with just care practices, and to maintain a conceptual distinction between autonomy and care (p. 10, [20]). For example, embedding a requirement of responsiveness to others, or of caring, into a conception of autonomy would inevitably transmute into more epistemic leaning and deference from people of color. Therefore, if we are to understand the nature of a liberal society with just caregiving practices, we must begin with the autonomy of women of color, for doing so reveals the hidden nature of western "liberal" social forms and the determinate content embedded in abstract accounts of accountability, entitlements, needs, care, and equality. To diagnose caregiving injustice through the lens of a woman of color is to present new reasons in defense of a liberal constructivism. This constructivism must interrogate (1) the relational nature of entitlements, (2) the distributive backdrop that shapes whether a claim is a need or a preference, and (3) how accountability can be evaded by perpetrators of violence, when the victim acts against dominant cultural constructions. I have taken a few steps toward explicating each of these three components, thereby demarcating the next stage of a critical liberalism to serve as a variety of care theory that begins from social understandings as a woman of color.⁴²

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Notes

¹ "Epistemic leaning" is Sandra Bartky's term [5].

² The way I am defining "care theory" is also implicit in Daniel Engster's work (see [9] and private correspondence).

³ For liberals theorizing about care, see all contributors [11]. For a liberal theory of justice that incorporates care, see [12]. Because questions about care have overlapped with debates about women's labor and socialization, the liberal tradition of evaluating care has been shaped by Susan Okin's feminist liberalism [13]. For an overview of feminist liberalism, see also [14].

⁴ See e.g., Lorde [21], hooks [22], Lugones [23], Bhandary [12,20]. For decolonial feminisms, see Spivak [24], Narayan [25] and Khader [26]. See Welch [27] for a feminist discussion of autonomy in conditions of oppression.

⁵ See also [31,32].

⁶ See [6], (p. 11, Figure A) for the initial depiction of the arrow of care map.

⁷ For a range of liberal approaches to care, see [11].

There are forms of racialized care that are not defined by whiteness in Asian and Arab countries. In Europe, as well, less advantaged white groups care for the white groups in power. In Asian and Arab countries, for instance, social hierarchies locate care in servant classes. Therefore, a global form of addressing whiteness would not remedy all caregiving invisibility.

See Collins [33] for articulation and explication of the mammy trope. On controlling stereotypes for women of color in academia, see Muhs et al. [34]. On stereotypes for Asian and Muslim women, see Sheth [35].

Eva Yguico [36] argues that eliminating the gendered division of labor may have harmful effects on, for example, relatives who submit remittances to family members in the Philippines.

Of course, there will be many exceptions, based on part on the fact that many families are interracial. My recommendations apply to the overall global distribution of care and its systems, and not to legitimate relations of care. Families are the paradigm case for legitimate care relations.

The experience for racially ambiguous mixed race cis women may be most relevant here. On Muslim women, see Sheth [37].

I use “burn” here in a phenomenological sense to describe the sensation as reported anecdotally. The sensation is described medically as “warmth/feeling hot” [38] (Palkowitsch et al., 2014, Table 6).

See Crenshaw (1991) [39] for the way these inequalities manifest in the law, and also for the concept of intersectionality.

An “affordance”, in Gibson’s sense (1979) [40], is what the environment makes available to person X. See also Schapiro 2003 [41] (cited in [42] (p. 106, n 2). The minority person’s agency is thwarted when an “act” is not completed, because uptake does not occur, and the intended meaning does not ensue.

Compare [43] on the ways background social norms impede particular expressions of agency for disadvantaged persons. In this case, I prefer the language of “uptake” to Kukla’s contextual analysis of background social norms. This is my account here centers questions about who it is who endorses and hears claims. This approach deliberately makes individuals the salient objects of analysis, and it is complementary to the analysis of caregiving injustice I make possible with the “arrow of care map” [28].

See Tronto and Fisher for the original account of care as attentiveness and responsiveness (p. 127, [6]).

Here I follow Charles Mills to define whiteness relationally in a status hierarchy that demands deference from non-whites (p. 71, [44]).

See [45] for the argument that microaggressions cause stress, and the consequence of this stress is harm akin to violence against the body.

By epistemic leaning, here, I mean that the person who epistemically leans considers the world from the perspective and priorities of the other.

Susan Brison has argued forcefully for the relevance of personal narrative to the validity of the philosopher’s claims [46]. (Bat-Ami Bar On calls the use of personal narrative a kind of “public autobiography” (p. 3, [47]). Anthropologists call a similar approach “auto-ethnography” (For a good example, see Chin [48]).

See e.g., [49–53].

These encounters have the significance I attribute to them because they are located among many other similar interactions, constituting a pattern. They can be understood, therefore, only through a form of pattern-recognition, one more readily accessible to others who also experience racism.

On accountability, see hooks (p. 124, [22]), and (pp. 16–17, [54]).

Perhaps this was a case of being rendered a “subperson”, the category Charles Mills defines as characteristic of blackness (p. 6, [44]). Or perhaps I was being placed in a nonperson category. I will not take a position here on this question, because what is important for the present analysis is that these people were far more concerned with their dog than they were with me, and my claim to freedom had less uptake than their dog’s claims to freedom of movement.

As is the case with pattern recognition and instances of microaggressions, whether any one event is an instance of racism will be indeterminate. However, by evaluating the effects of multiple events on the target of the actions, we can see the accumulation of racist and intersectional microaggressions. It thereby paints a picture of the terrain an individual traverses in a particular social form.

See Claudia Card’s [55] groundbreaking work on evil for the argument that people who have suffered as victims can also perpetrate evil.

I do not want this episode to be read as if the man was the reasonable adjudicator in a fight among women. Indeed, triangulation to men when they have de facto or de jure power is an anti-feminist dynamic in a patriarchal society. The details about the man are relevant to this example because he was the other witness to the exchanges.

See (p. 63, [56]) on white privilege as habit. Literary affect studies critiques relations of sympathy and affection. For a recent work, see [57].

There are ample examples of white ontological expansiveness resulting in an unjustified demand for a justification. To list just one, consider neighbors who used our driveway for several years for their bed and breakfast clients, both they and their customers looked surprised and alarmed when we asked them to stop, or to move their car so that we could rush to work. They simply replied that the previous owner of our house (who had been largely bedridden), had allowed them use of the driveway.

- 31 In fact, initially hoping for reasonableness, I explained to this woman that, although she knows her dogs, and may have a high degree of confidence that they will not bite other people, other people who do not know those dogs do not know that they won't bite them. However, her hostile gaze quickly made evident that the attempt was futile.
- 32 In the interactions described above, where it seemed that these women simply *could not* consider me, it seems that what is acceptable has to be indexed to someone with very different affordances than these women. This line of inquiry then points to the need to index affordances to the reasonable individual, where reasonableness is not only a set of beliefs, but it is also corporeal. I take up this question in [58]. On psychocorporeal agency and affordances, see [59]. See [60] on the Habermas-Rawls dispute about acceptance versus acceptability. On my view, if the clause is "acceptable to her", then the woman's "strong horizons" [61] are invoked.
- 33 See my (p. 3, [20]) for my discussion of legitimate needs. Cf. (p. 312, [62]) for the view that determining which needs are legitimate is a matter of politics.
- 34 My view here is in the same family as Charles Taylor's account of horizons of significance. On my view, though, these horizons occur within a particular social form, and salient social stratification creates regularities in our experiences of moral salience and significance.
- 35 Cf. Mills, who claims that the liberal idea of reasonableness is based on the perspective of the western white person, who have "traditionally thought of nonwhite assets as a common white resource to be legitimately exploited" (p. 47, [19]).
- 36 For further elaboration on this concept, see my monograph in progress, *Being at Home: Liberal Autonomy in an Unjust World*.
- 37 See [29]. For a feminist defense of hypothetical acceptability, see also [63].
- 38 Here I use "persons" in a way that is inclusive of the view that dogs are persons or members of families (for a species-inclusive view of who counts as a moral patient, see (p. 75, [64])).
- 39 See [12] for the comprehensive account.
- 40 For an alternative account, see [65].
- 41 For the original account of autonomy skills, see Meyers [66] and many other works. For a role for autonomy skills in a liberal care theory of justice, see [12]. The critical awareness of norms engendered by these skills overlaps with Medina's epistemic virtue of metalucidity [52]. For discussion, see [20].
- 42 For the first stage, see [12].

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