

What is the history of care the history of?

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We¹ have chosen this title to introduce this special issue to refer to what scholars² have identified as the horizon towards which historians should orient a future gendered history of humanitarian action: the development of a history of care. Although the history of care is an area of research which is gaining momentum³, one can rightfully wonder: what is the history of care the history of? In formulating this question, our aim is to review the research which has been conducted by historians in interdisciplinary dialogue with

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 2. Esther Möller, Johannes Paulmann and Katharina Storning, *Gendering Global Humanitarianism in the Twentieth Century* (Cham: Palgrave Macmillan, 2020); Dolores Martín-Moruno, *Beyond Compassion: Gender and Humanitarian Action* (Cambridge: Cambridge University Press, 2023).
 3. The ongoing ERC COST project 'Who Cares in Europe?' as well as the exhibition 'Who Cares? Gender and Humanitarian Action', which Dolores Martín-Moruno organised with the International Red Cross and Red Crescent Museum, also show the rising interest in the history of care. See <https://whocaresineurope.eu> and <https://www.redcrossmuseum.ch/en/press/exposition-temporaire-3/>

philosophers, psychologists, sociologists and anthropologists to define the history of care as a promising field of study which can broaden the history of medicine by analysing a variety of relief actors, practices and spaces that have remained largely overlooked within the history of humanitarian aid.

In *Gendering Global Humanitarianism*, Esther Möller, Johannes Paulman and Katharina Storning have pointed out that the objective of the history of care is not just to add more women's names to humanitarian history, but rather to explore how gender interacts with notions of nation, class, race, age and religion to generate, reinforce or challenge hierarchies of power between humanitarians and the beneficiaries of their aid⁴. Indeed, Abigail Green had already suggested this approach in her article about the religious, gendered and national dimensions of humanitarianism to explore "the central role of women in shaping" this movement as activists in the nineteenth century⁵. Besides these essential readings, scholars interested in the history of care can draw inspiration from several works which have interpreted the activism of early female philanthropists such as Elizabeth Fry (1780-1845) and Josephine Butler (1828-1906), the social work carried out by charitable sisters and the engagement of voluntary nurses during the world wars as a caring power⁶. Closely linked to Michel Foucault's notion of pastoral power⁷, this caring power has historically allowed white, Christian, upper and middle-class women to participate in social reforms and missionary movements within the framework of —what some Postcolonial scholars have referred to as— either "Imperialist feminism"⁸ or "maternal imperialism"⁹.

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4. Möller, Paulmann and Storning, *Gendering Global Humanitarianism*, 8.
 5. Abigail Green, "Humanitarianism in Nineteenth-Century Context: Religious, Gendered, National," *The Historical Journal*, 57 n°14 (2014): 1157-1175.
 6. Annemieke van Drenth and Francisa de Haan, *The Rise of Caring Power. Elizabeth Fry and Josephine Butler in Britain and the Netherlands* (Amsterdam: Amsterdam University Press, 1999); Annelis van Heijst, *Models of Charitable Care. Catholic nuns and children in their care in Amsterdam, 1852-2002* (Leiden and Boston: Brill, 2008); Kara Dixon, "Wartime nursing power" in *Routledge Handbook on the Global History of Nursing*, eds Patricia D'Antonio, Julie A. Fairman and Jean C. Whelan (London and New York: Routledge, 2013), 22-34. Dolores Martín-Moruno, "A female genealogy of humanitarian action: compassion as practice in the work of Josephine Butler, Florence Nightingale and Sarah Monod," *Medicine, Conflict and Survival* 36, n° 1 (2020): 19-40.
 7. For Michel Foucault (1983), pastoral power is a form of governance which derives from the religious narrative.
 8. Antoinette Burton, *Burdens of History: British Feminists, Indian Women, and Imperial Culture, 1865-1915* (Chapel Hill, N.C.: The University of North Carolina Press, 1994), 2.
 9. Barbara Nelle Ramusack, "Cultural Missionaries, Maternal Imperialists, Feminist Allies: British Women Activists in India, 1865-1945" in *Western Women and Imperialism: Complicity and Resistance* eds

Nonetheless, historians were not the first scholars to deal with the notion of care. Originally, this category was theorised by feminist scholars in ethical, psychological and political theory from the 1980s onwards. The American psychologist and philosopher Carol Gilligan crafted the ethical concept of care in her seminal work *A Different Voice* (1982) to question the validity of Lawrence Kohlberg's psychological theory which concluded by stating that boys easily reached a higher level of moral development than girls. In response to Kohlberg, Gilligan argued that women think and act in the ethical realm more frequently in association with moral values linked to care rather than being oriented purely by an ethics of justice. For Gilligan, women tend to formulate the question "how to respond? (...) to the perception of need", instead of asking themselves "what is just?"¹⁰. Although Gilligan's work has received strong criticism —because the different female voice which she refers to can be seen as a way to reinforce an essentialist vision of femininity— she nuanced her views in *Resisting Injustice* to show to what extent a feminist ethics of care inevitably involves promoting the relational values that link all citizens to the responsibility that they owe to other persons who find themselves in a situation of vulnerability¹¹.

Together with her colleague Berenice Fisher, North American political scientist Joan Tronto has further developed Gilligan's argument by demonstrating that an ethics of justice does not necessarily come into conflict with an ethics of care in our modern democracies. Thinking about care as a set of practices, these authors understand it 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. This "world (...) includes our bodies, ourselves, and our environment"¹². This definition of care is flexible enough to historically contextualise —what Tronto (2008, 248-252) refers to as the four main phases of care: *caring about*, which means becoming aware of and paying attention to the need for caring; *caring for*, which is "the phase in caring when

Nupur Chaudhuri and Margaret Strobel (Bloomington and Indianapolis: Indiana University Press, 1992), 119.

10. Carol Gilligan, "Moral Orientation and Moral Development" in *The Feminist Philosophy Reader*, eds. Alison Bailey and Chris Cuomo (Boston: McGraw-Hill, 2008), 469.
11. Carol Gilligan. 2011."Resisting injustice: a feminist Ethics of care". Josep Egozcue Lectures, organised by the Víctor Grifols foundation for Bioethics.
12. Joan C. Tronto and Berenice Fisher, "Towards a Feminist Theory of Caring" in *Circles of Care. Work and Identity in Women's Lives*, eds Emily K. Abel and Margaret K. Nelson (Albany: SUNY Press, 1990), 36-54.

someone assumes responsibility to meet a need that has been identified”; *care giving*, which involves “the actual material meeting of the caring need” and requires “that individuals and organisations perform the necessary caring tasks”; and lastly *care receiving*, which involves the “response of the thing, person or group that received care”¹³. This last phase seems to be the most relevant one to explore to avoid the reproduction of a naïve vision of care that does not contemplate the tensions, conflicts and power relations that are involved when taking care of somebody who is in need. In this special issue, the authors explore the potentialities of historicising Fisher’s and Tronto’s definition, as well as others such as that developed by the French psychologist Pascal Molinier, as they allow them to explore care as work which should be “degenderised” within the framework of humanitarian institutions¹⁴.

Echoing the speculative work conducted by these feminist scholars as well as by sociologists¹⁵, gender historians have mobilised care as a useful category of enquiry for examining the often unpaid activities which have been traditionally performed by women because they were regarded as an extension of their duties in the private sphere¹⁶. As a historiographical category of analysis, care provides a fruitful perspective from which to “clarify the manners, skills and activities of caring for and about others”, the “gendered social dynamics that prop them up”, as well as the shifting emotional dimensions which have shaped care relationships¹⁷. However —as gender historians remind us— more historical research is needed to investigate the social conditions that have led to the feminisation, racialisation, progressive externalisation and commodification of care.

13. Joan C. Tronto, “Du care,” *Revue du MAUSS* 32 (2008): 243-265.

14. Pascal Molinier, “Au-delà de la féminité et du maternel, le travail du care,” *Champ Psy* 2, n° 58 (2010): 161-174.

15. Sociologists have mobilised care as a category that enables light to be shed on the gendered nature and social devaluation of tasks that involve care processes. Intersectional approaches have also shown how economically vulnerable women and women of colour are responsible for caring in the Global North. However, this feminist notion of care has received strong criticism from sociologists who work on Disability Studies, because it masks a multi-faceted form of oppression, see for instance Christine Kelly, “Building bridges with accessible care: Disability studies, feminist care scholarship, and beyond,” *Hypatia* 28, no. 4 (2013): 784-800.

16. Dirk Hoerder, Elise van Nedeveeren Meerkerk and Silke Neunsinger, *Towards a Global History of Domestic and Caregiving Workers* (Leiden: Brill, 2015); Clyde Plumauzille and Mathilde Rossignaux-Méheust, “Le care, une ‘voix différente’ pour l’histoire du genre,” *Clio: Histoire, Femmes et Sociétés* 49, no. 1 (2019): 7-22.

17. Plumauzille and Rossignaux-Méheust, “Le care”, 1.

Historians of medicine have also advocated for the development of a history of care to expand the horizons of their own discipline¹⁸. Since Roy Porter's call to include "the patient's point of view", medical historians have moved their focus from the study of *curative* practices to that of *caring* activities in order to better comprehend the experience of disease as a co-production negotiated between patients and health-care agents¹⁹. As Oliver Faure has suggested, the study of care actors, spaces and practices can be very productive for identifying unexpected historical sources which could allow us to shed light on everyday life experiences in increasingly medicalised environments such as hospitals²⁰. Additionally, adopting care as a theoretical lens could enable us to critically examine the hierarchical and gendered division of health-care specialisations. As Anne Hugon has shown, preventive medicine has been historically considered as a female domain because of its association with education and care, while curative medicine has been associated with masculinity, as it involves the exercise of reason (the ability to diagnose) and the capability of action (the ability to prescribe or even administer the appropriate treatment)²¹. Up to the present day, the gendered idea that *doctors cure and nurses care* has also permeated the self-images of health professionals and their inter-professional relationships. However, as Nancy Jecker and Donnie J. Self have argued, the cure-care division remains problematic for several reasons. Firstly, because this differentiation presupposes that *care* and *cure* have always been distinct spheres, rather than, in reality, overlapping domains in practice. Secondly, the cure-care dichotomy leads to a one-dimensional understanding of care, as not only can physicians care without curing (for instance, when they

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18. H  l  ne Castelli, "Les gestes d'H  c  m  de. Femmes pourvoyeuses de soin en Gr  ce archa  que et classique," *Clio. Femmes, Genre, Histoire* 49, no. 1 (2019): 23-42; Anne Jusseaume, Paul Marquis and Mathilde Rossingaux-Meheust, "Le soin comme relation sociale: bilan historiographique et nouvelles perspectives," *Histoire, M  decine et Sant  * 7 (2015): 9-15.
 19. Alexandra Bacopoulous-Viau and Aude Fauvel, "The Patient's Turn Roy Porter and Psychiatry's Tales, Thirty Years on," *Medical History* 60, no. 1 (2016): 1-18; Flurin Condrau, "The patient's view meets the clinical gaze," *Social History of Medicine* 20, no. 3 (2007): 525-540; Roy Porter, "The Patient's View: Doing Medical History from Below," *Theory and Society* 14, no. 2 (1985): 175-198.
 20. Olivier Faure, "Une histoire du soin est-elle possible?," *Histoire, M  decine et Sant  * 7 (2015): 91-101.
 21. Anne Hugon, "Le refus du travail de care? Une fronde des doctresses de la Protection maternelle et infantile en contexte colonial (Gold Coast, ca 1930)," *Clio: Histoire, Femmes et Soci  t  s* 49, no. 1 (2020): 167-179.

suspend medical treatments that they judge to be futile), but nurses can also care *for* patients without necessarily caring *about* them²².

To enrich the history of medicine, the authors who contribute to this special issue adhere to a Feminist conception of care, as it provides a productive analytical tool for understanding how female relief agents have felt the responsibility to aid, as well as for examining the plurality and complexity of the activities that they have performed to promote the well-being of dependent and vulnerable persons. Within the humanitarian movement, these caring activities —dressing wounds, providing clothes, feeding children, protecting war prisoners and refugees, speaking out against violations of human rights and raising funds— have frequently been performed by women who have not necessarily followed any professional or medical training²³. In fact, historians of humanitarianism have shown to what degree the boundaries between professionally trained nurses and volunteers have been blurred in times of crisis, as occurred during the First World War²⁴. In this special issue, we go one step further and consider that women humanitarians have constituted a heterogeneous group of educators, human-rights activists, relief workers, nurses and —in a few cases— delegates who worked for international organisations, who have cared about distressed populations in a myriad of ways. Thus, a feminist-oriented category of care provides an innovative approach for bringing together gender and humanitarian history to restore a plethora of relief practices which have frequently been considered as marginal in the histories of medicine and nursing²⁵, even though they have

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22. Nancy Jecker and Donnie J. Self, "Separating care and cure: an analysis of historical and contemporary images of nursing and medicine," *The Journal of Medicine and Philosophy* 16, no. 3 (1991): 285-306.
 23. Dolores Martín-Moruno, Brenda Lynn Edgar and Marie Leyder, "Feminist perspectives on the history of humanitarian relief (1870-1945)," *Medicine, Conflict and Survival* 36, no. 1 (2020): 2-18.
 24. Marie Leyder, "The American and Canadian wartime godmothers of Belgian soldiers. Joseph de Dorlodot's Correspondence and Documentation Office (1915-1919)," *Medicine, conflict and survival* 36 no. 1 (2020): 82-102; Marie Leyder "Engagées en première ligne: Mairaines de guerre et infirmière sur le front de l'Yser pendant la Première Guerre mondiale", (Phd. Diss, University of Geneva, 2023).
 25. The history of care echoes the pluralist approach which has also been claimed in medical history. Rather than disqualifying marginal medical practices as 'quackery', historians who study 'medical pluralism' show that these practices were intimately connected to the history of modern medicine. Robert Jütte, *Medical Pluralism. Past - Present - Future* (Stuttgart: Franz Steiner Verlag, 2013).

been capital for the development of international programs aimed either at relieving or eliminating human suffering.

By adopting care as a historical category, the authors also examine the moral dimension of women humanitarians' work in close connection with shifting notions of pain, as well as with a wide spectrum of affective responses which include sympathy, compassion, pity, shame, remorse, indignation and resentment. The contextualisation of these emotions allows us to highlight the plurality of motivations which have historically channelled "the need to help", as well as the reception of aid by its beneficiaries²⁶. Moreover, a history of emotions approach enables the authors to explore "the ways positive feelings, sympathy, and other forms of attachment can work with and through the grain of hegemonic structures, rather than against them"²⁷. Thus, the study of benevolent humanitarian attitudes opens the door to investigating the complex legacy of colonial history and the history of slavery within this movement²⁸. As Rob Skinner and Alan Lester argue, "ideas and practices associated with imperial politics and administration have both been shaped by and have in themselves informed developing notions of humanitarianism"²⁹. As the political scientist Michael Barnett has pointed out, the humanitarian movement has been shaped around a "paradox of emancipation and domination", as "any act of intervention, no matter how well intended, is also an act of control"³⁰. Put in other words, a reflection on care allows us to mirror the paradoxical dilemma at the heart of humanitarian action: compassion, as an expression of love towards a distant other, is one of the

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26. Lissa H. Malkki, *The Need to Help. The Domestic Arts of International Humanitarianism*. (Durham and London: Duke University Press, 2015).
 27. Michelle Murphy, "Unsettling care: Troubling transnational itineraries of care in feminist health practices," *Social Studies of Science* 45 no. 5 (2015): 719; Dolores Martín-Moruno, "Crisis? What Crisis? Making Humanitarian Crises Visible in the History of Emotions" in *Making Humanitarian Crises: Emotions and Images in History*, eds. Brenda Lynn Edgar, Valérie Gorin and Dolores Martín-Moruno (Cham: Palgrave Macmillan, 2022): 8.
 28. Jane Lydon, *Imperial Emotions. The Politics of Empathy across the British Empire*. (Cambridge: Cambridge University Press, 2020); Polly Pallister-Wilkins, "Humanitarianism: Race and the overrepresentation of 'Man,'" *Transactions of the Institute of British Geographers* 47, no. 3 (2022): 695-708.
 29. Rob Skinner and Alan Lester, "Humanitarianism and Empire: New Research Agendas," *Journal of Imperial and Commonwealth History* 40, no. 5 (2012): 731.
 30. Michael Barnett, *Empire of Humanity: A History of Humanitarianism* (Ithaca: Cornell University Press, 2011), 11-12.

most powerful emotions for generating forms of domination³¹. By interpreting humanitarian history as the emergence, development and institutionalisation of an ethics of care³², the articles gathered in this special issue analyse the colonial dimensions of the humanitarian movement in the Imperial period, as well as its legacies in the post-colonial world. This critical approach to care enables us to consider to what extent humanitarianism has maintained or challenged white supremacy beliefs. As argued by Pallister-Wilkins, in its attempt to mitigate the worst excesses of violence, humanitarianism has not always challenged white supremacy standpoints, but instead secured their existence by deploying a logic of care which has reassured white people's anxieties about the well-being of black and indigenous populations as well as those about their own security at the top of the racial hierarchy³³.

To demonstrate the potentialities of care for writing a gendered history of humanitarian action, this special issue also establishes a dialogue with the research conducted by anthropologists. Anthropological contributions invite us to move beyond essentialist and minimalist visions of care in which humanitarian action is limited to assistance and protection, to consider wider conceptions of aid as a project of social transformation and justice³⁴. As Didier Fassin goes on to say, humanitarianism represents a “politics of compassion” and, therefore, of “inequality” that has functioned as a type of global governance from the 1990s³⁵. Following this line of enquiry, anthropologists such as Ilana Feldman and Miriam Ticktin recognise care as a form of governance that is not just limited to individual subjectivity, as it also includes networks, infrastructures and experiences³⁶. This perspective enlarges the scope of Tronto's definition of care from individuals to institutions and also allows the examination of how care practices and experiences

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31. Davide Rodogno, “Certainty, compassion and the ingrained arrogance of humanitarians” in *The Red Cross Movement. Myths, practices and turning points*, eds Neville Wiley, Melanie Oppenheimer and James Crossland (Manchester: Manchester University Press, 2020): 27-44.
 32. Barnett, *Empire of Humanity*, 11-18.
 33. Polly Pallister-Wilkins, “Saving the souls of white folk: Humanitarianism as white supremacy,” *Security Dialogue* 52, no. 1 (2022), 98-106.
 34. Craig Calhoun, “The imperative to reduce suffering: charity, progress and emergencies in the field of humanitarian action” in *Humanitarianism in question: politics, power, ethics*, eds. Michael Barnett and Thomas G. Weiss (Ithaca, N.Y.: Cornell University Press, 2008), 73-97.
 35. Didier Fassin, *Humanitarian Reason: A History of the Present* (Berkeley and Los Angeles: University California Press, 2012), 3.
 36. Ilana Feldman and Miriam Ticktin, *In the name of humanity. The government of threat and care* (Duke University Press, 2010).

intertwine with notions of place, space and interaction. For instance, John Silk, who has worked on the moral geographies of care, has developed the concept of “caring at a distance” to analyse how existing conceptions of care extended from face-to-face encounters within a shared physical location to acting for distant others in distant contexts—a notion which is quite prevalent in humanitarian accounts of field missions and testimonials³⁷.

By exploring ‘care’ as a historically situated action, the articles gathered in this special issue analyse humanitarian initiatives from a transnational perspective which connects a wide range of geographical settings from the First World War to post 9/11 Afghanistan. By looking at the interactions between gender and other social markers such as class privilege, Valérie Gorin and Dolores Martín-Moruno reconstruct the initiatives led by two leading female Swiss figures—Marguerite Frick-Cramer (1887-1963) and Marguerite Gautier-van Berchem (1892-1984)—who were at the head of the prisoners tracing agencies established under the wing of the International Committee of the Red Cross (hereafter ICRC) during the world wars. Although their work did not imply a face-to-face relationship, Frick-Cramer’s and van Berchem’s services activities can be considered as a form of care which was aimed at creating transnational networks to protect war prisoners and provide them with news from their relatives. Their work was invaluable for combatting mental health disorders such as the so-called barbed-wire disease suffered by both military personnel and civilians who were in captivity during wartime. Moved by emotions such as indignation, Frick-Cramer and van Berchem represented a new humanitarian sensibility at the ICRC and advocated for the recognition of new recipients of humanitarian assistance such as displaced civilians and colonial troops. Despite their efforts for caring about those distant others who were not already protected by international law, their legacy has remained quasi-absent from the historical accounts promoted by the ICRC due to the strong masculinist vision which has shaped this international agency since its beginnings.

In their article, Alejandra de Leiva and Jon Arrizabalaga invite us to retrace the mysterious path of the Belgian nurse Julia Lahaye (1886-1978)—also known as Mme Perdomo—during the Spanish Civil War. Represented as both an amoral spy by Belgian authorities during the First World War and a selfless nurse by Spanish and Swiss Red Cross representatives during the

37. John Silk, “Caring at a distance,” *Philosophy & Geography* 1, no. 2 (1998): 165-182.

Spanish Civil War, Perdomo represents a meaningful case for studying to what degree gender stereotypes have hidden the real motivations that many female volunteers had for taking care of others. By thoroughly reconstructing Perdomo's conflictual experiences in Belgium as a woman who had had an extra-marital relationship with a German military official and been declared stateless by Belgian authorities for having collaborated with the enemy, the authors interpret her humanitarian work in Spain as repentance for her betrayal of her country. Rather than compassion towards war victims, de Leiva and Arrizabalaga argue that Perdomo's humanitarian ethos was nourished by strong feelings of shame and remorse for the crimes that she had presumably committed during the First World War.

In turn, Guillaume Linte examines the colonial dimensions of care through the creation of the so-called *L'Œuvre du Berceau Indigène* in Sub-Saharan Africa during the interwar period. This was a female charitable association led by Auguste Bonnacarrère who became governor of Togo and Cameroon, successively, and his wife, Mrs Bonnacarrère. Under the mandate of the League of the Nations and the French Empire after the First World War, these African colonies became a fertile territory for implementing maternal and child health programs led by European ladies who provided care to African women and their children to combat the demographic decline. In this colonial context, care was not only marked by an essentialist vision of womanhood, but also by strong class and racial differences. Despite the fact that *L'Œuvre du Berceau Indigène* became instrumental for expanding the civilizing mission of the French Empire in Sub-Saharan Africa, the Ministry of the Colonies did not accept its status as an autonomous and charitable association. Firstly, because *L'Œuvre du Berceau Indigène* was only composed of women and did not include any physicians on its board —an objection which revealed the patriarchal dimensions of the French Empire— and, secondly, because in practice this allegedly private female association functioned according to Auguste Bonnacarrère's personal interests to support his political career in the colonies.

Moving on to the decolonisation process, Bertrand Taithe introduces us to a radically different culture of care, that represented by the British teacher and activist Elisabeth Wilson (1910-2000) who, in 1943, founded the relief organisation Hudfam —a local equivalent of Oxfam— to combat the chronic poverty of the so-called Third World. This developmentalist approach to humanitarianism was particularly well illustrated in Wilson's pioneering initiative of commercialising embroidered objects —such as tea-

cozies— which had been created by refugees in Hong Kong in rehabilitation programs to combat their apathy and were used as fair-trade goods for fundraising purposes. According to a therapeutical approach, the production of humanitarian handicrafts entailed a narrative of care, which connected the local community of Huddersfield with the sufferings of the distant other. For Wilson, besides its material dimensions, caring about the world also involved feeling a strong spiritual inspiration which combined influences from Quakerism, Unitarianism, Buddhism, Zen, Hinduism and, even, Carl Jung's psychoanalysis to shape her singular pacifist vision. As Taithe shows, Wilson's conception of care was also a form of self-care: speaking out against the root causes of armed conflicts was a way of healing her own depression and giving a sense to her life. Indeed, Wilson used to introduce herself as a mother of four children, rather than a humanitarian or a feminist, because she understood her activism in international causes as a form of care which she linked to a longstanding tradition of inspirational female figures such as Teresa de Avila.

Finally, Julie Billaud demonstrates to what extent care has become a form of global governance through the analysis of the humanitarian programs launched by the US in post-9/11 Afghanistan to fight against terrorism by supporting the rights of women against the oppression exerted by the Taliban regime. This led to the image of Afghan women in burqas being presented as a humanitarian subject *per se* to global audiences: where they are shown as powerless, innocent victims according to a colonial imaginary which opposes Western civilisation to barbarism. As Billaud observes, based on her field work in Afghanistan, international rehabilitation programs were mainly implemented through self-empowerment workshops which included relaxation, mindfulness as well as peer-coaching as capital emotional management techniques. Instead of treating the root causes of women's suffering which were more related to the history of Afghanistan from the Cold War period — namely, from the Soviet Union's invasion of its territory in the 1980s — these initiatives focused on the transformation of the self according to the neoliberal order. As the author concludes, these gender programs — which appeared to be a sort of carnivalesque performance— were resented by local populations as they were perceived as a form of domination from the West. As Billaud reminds us, humanitarianism can also show us the darkest side of the ethics of care. In this case, it rendered women's bodies as the symbolic place through which Afghan national identity is still being shaped.

By developing the history of care, this special issue has a threefold objective. Firstly, to deconstruct gender stereotypes according to which

women humanitarians have been frequently represented as maternal figures or angels of mercy in order to recognise their valuable work and their conflictual experiences within organisations which were frequently headed by men. Secondly, the focus on care allows us to contribute to the current reconstruction of the history of humanitarian aid “from the bottom up”, while transcending the heroic representations promoted by humanitarian institutions in their official accounts³⁸. Although the case studies included in this special issue exclusively focus on the role of female humanitarian agents, the history of care also appears to be a productive perspective from which to deconstruct hegemonic masculinities within the humanitarian movement — a task that still needs to be done³⁹. Last but not least, our call to engage with the history of care seeks to open new avenues for broadening the history of medicine by studying practices which have not been traditionally considered as a source of knowledge but which have contributed to establishing the shifting contours of global health. ■

Bibliography

- Bacopoulous-Viau, Alexandra and Fauvel, Aude. “The patient’s Turn Roy Porter and Psychiatry’s Tales, thirty years on.” *Medical History* 60, no. 1 (2016): 1-18.
- Barnett, Michael. *Empire of Humanity: A History of Humanitarianism*. Ithaca: Cornell University Press, 2011.
- Burton, Antoinette. *Burdens of History: British Feminists, Indian Women, and Imperial Culture, 1865-1915*. Chapel Hill, N.C.: The University of North Carolina Press, 1994.
- Calhoun, Craig. “The imperative to reduce suffering: charity, progress and emergencies in the field of humanitarian action.” In *Humanitarianism in question: politics, power, ethics*, edited by Michael Barnett and Thomas G. Weiss, 73-97. Ithaca, N.Y.: Cornell University Press, 2008.
- Castelli, Hélène. “Les gestes d’Hécamède. Femmes pourvoyeuses de soin en Grèce archaïque et classique.” *Clio. Femmes, Genre, Histoire* 49, no. 1 (2019): 23-42.

38. Bertrand Taithe and John Borton, “History, memory and ‘lessons learnt’ for humanitarian practitioners”, *European Review of History* 23, no. 1-2 (2016): 210-224.

39. Bertrand Taithe. “Humanitarian Desire, Masculine Character and Heroics.” in *Gendering Global Humanitarianism in the Twentieth Century Practice, Politics and the Power of Representation*, eds. Esther Möller, Johannes Paulmann and Katharina Storning, 35-59. (Cham: Palgrave Macmillan, 2020).

- Condrau, Flurin. "The patient's view meets the clinical gaze." *Social History of Medicine* 20, no. 3 (2007): 525-540.
- Dixon Kara. "Wartime nursing power." In *Routledge Handbook on the Global History of Nursing*, edited by Patricia D'Antonio, Julie A. Fairman and Jean C. Whelan, 22-34. London and New York: Routledge, 2013.
- Fassin, Didier. 2012. *Humanitarian Reason: A History of the Present*. Berkeley and Los Angeles: University of California Press, 2012.
- Faure, Olivier. "Une histoire du soin est-elle possible?" *Histoire, Médecine et Santé* 7 (2015): 91-101.
- Feldman, Ilana and Ticktin, Miriam. *In the name of humanity. The government of threat and care*. Duke University Press, 2010.
- Foucault, Michel. "The subject and power." In *Beyond Structuralism and Hermeneutics*. Chicago: Chicago University Press. 1983.
- Gilligan, Carol. 2011. "Resisting injustice: a feminist ethics of care." Josep Egozcue Lectures, organised by the Víctor Grifols foundation for Bioethics.
- Gilligan, Carol. "Moral orientation and moral development." In *The Feminist Philosophy Reader*, edited by Alison Bailey and Chris Cuomo, 467-477. Boston: McGraw-Hill, 2008.
- Green, Abigail. "Humanitarianism in the nineteenth century context: religious, gendered, national." *The Historical Journal* 57, no. 4 (2014): 1157-1175.
- Hoerder Dirk, van Nedeveeren Meerkerk Elise and Neunsinger Silke. *Towards a Global History of Domestic and Caregiving Workers*. Leiden: Brill, 2015.
- Hugon, Anne. "Le refus du travail de care? Une fronde des doctoresse de la Protection maternelle et infantile en contexte colonial (Gold Coast, ca 1930)." *Clio: Histoire, Femmes et Sociétés* 49, no. 1 (2020): 167-179.
- Jecker, Nancy and Self, Donnie J. "Separating care and cure: an analysis of historical and contemporary images of nursing and medicine." *The Journal of Medicine and Philosophy* 16, no. 3 (1991): 285-306.
- Jusseume Anne, Marquis Paul and Rossingieux-Meheust Mathilde. "Le soin comme relation sociale: bilan historiographique et nouvelles perspectives." *Histoire, Médecine et Santé* 7 (2015): 9-15.
- Jütte, Robert. *Medical Pluralism. Past - Present - Future*. Stuttgart: Franz Steiner Verlag, 2013.
- Kelly, Christine. "Building bridges with accessible care: Disability studies, feminist care scholarship, and beyond." *Hypatia* 28, no. 4 (2013): 784-800.
- Leyder, Marie. "The American and Canadian wartime godmothers of Belgian soldiers. Joseph de Dorlodot's Correspondence and Documentation Office (1915-1919)." *Medicine, conflict and survival* 36 no. 1 (2020): 82-102.
- Leyder, Marie. "Engagées en première ligne: mairaines de guerre et infirmières sur le front de l'Yser pendant la Première Guerre mondiale." Phd. Diss, University of Geneva, 2023.
- Malkki, Liisa H. *The Need to Help: The Domestic Arts of International Humanitarianism*. Durham and London: Duke University Press, 2015.

- Martín-Moruno, Dolores. *Beyond Compassion: Gender and Humanitarian Action*. Cambridge: Cambridge University Press, 2023.
- Martín-Moruno, Dolores. "Crisis?, what crisis?, making humanitarian crises visible in the history of emotions." In *Making Humanitarian Crises: Emotions and Images in History*, edited by Brenda Lynn Edgar, Valérie Gorin and Dolores Martín-Moruno, 1-28. Cham: Palgrave Macmillan, 2022.
- Martín-Moruno, Dolores. "A female genealogy of humanitarian action: Compassion as practice in the work of Josephine Butler, Florence Nightingale and Sarah Monod." *Medicine, Conflict and Survival* 36, no. 1 (2020): 19-40.
- Martín-Moruno, Dolores, Edgar Brenda Lynn and Leyder Marie. "Feminist perspectives on the history of humanitarian relief (1870-1945)." *Medicine, Conflict and Survival* 36, no. 1 (2020): 2-18.
- Molinier, Pascale. "Au-delà de la féminité et du maternel, le travail du care." *Champ Psy* 2, n°58 (2010): 161-174.
- Möller Esther, Paulmann Johannes and Storning Katharina. *Gendering Global Humanitarianism in the Twentieth Century*. Cham: Palgrave Macmillan, 2020.
- Murphy, Michelle. "Unsettling care: Troubling transnational itineraries of care in feminist health practices." *Social Studies of Science* 45 no. 5 (2015): 717-737.
- Pallister-Wilkins, Polly. "Saving the souls of white folk: Humanitarianism as white supremacy." *Security Dialogue* 52, no. 1 (2022), 98-106.
- Pallister-Wilkins, Polly. "Humanitarianism: Race and the overrepresentation of 'Man.'" *Transactions of the Institute of British Geographers* 47, no. 3 (2022): 695-708.
- Plumauzille, Clyde and Rossigneux-Méheust, Mathilde. "Le care, une 'voix différente' pour l'histoire du genre." *Clio: Histoire, Femmes et Sociétés* 49, no. 1 (2019): 7-22.
- Porter, Roy. "The patient's view: doing medical history from below." *Theory and Society* 14, no. 2 (1985): 175-198.
- Ramusack, Barbara Nelle. "Cultural missionaries, maternal imperialists, feminist allies: British women activists in India, 1865-1945." In *Western Women and Imperialism: Complicity and Resistance*, edited by Nupur Chaudhuri and Margaret Strobel, 119-136. Bloomington and Indianapolis: Indiana University Press, 1992.
- Rodogno, Davide. "Certainty, compassion and the ingrained arrogance of humanitarians." In *The Red Cross Movement. Myths, practices and turning points*, edited by Neville Wiley, Melanie Oppenheimer and James Crossland, 24-44. Manchester: Manchester University Press, 2020.
- Silk, John. "Caring at a distance." *Philosophy & Geography* 1, no. 2 (1998): 165-182.
- Skinner, Rob and Lester, Alan. "Humanitarianism and empire: new research agendas." *Journal of Imperial and Commonwealth History* 40, no. 5 (2012): 729-747.
- Taithe, Bertrand. "Humanitarian desire, masculine character and heroics." In *Gendering Global Humanitarianism in the Twentieth Century Practice, Politics and the Power of Representation*, edited by Esther Möller, Johannes Paulmann and Katharina Storning, 35-59. Cham: Palgrave Macmillan, 2020).
- Taithe, Bertrand and Borton, John. "History, memory and 'lessons learnt' for humanitarian practitioners." *European Review of History* 23, no. 1-2 (2016): 210-224.

Tronto, Joan C. "Du care." *Revue du MAUSS* 32 (2008): 243-265.

Tronto, Joan C. and Fisher, Berenice. "Towards a feminist theory of caring." In *Circles of Care. Work and Identity in Women's Lives*, edited by Emily K. Abel and Margaret K. Nelson, 36-54. Albany: SUNY Press, 1990.

Van Drenth Annemieke and de Haan Francisa. *The Rise of Caring Power. Elizabeth Fry and Josephine Butler in the Britain and the Netherlands*. Amsterdam: Amsterdam University Press, 1999.

Van Heijst, Annelis. *Models of Charitable Care. Catholic nuns and children in their care in Amsterdam, 1852-2002*. Leiden and Boston: Brill, 2008. ■

