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***The Heart of Justice: Care Ethics and Political Theory*, by Daniel Engster. Oxford: Oxford University Press, 2007, x+274 pp.**
ISBN 978-0-19-921435-8 hb £54.00; 978-0-19-956249-7 pb £20.00

In this unusually wide-ranging book, Daniel Engster offers a theory of politics that takes care as a central value. This is the most fully developed application of an ethics of care to politics to date. The ethics of care, a type of moral reasoning which pays particular attention to needs, relationships and dependency, has evolved, over the past three decades, into a range of closely connected, but far from systematized, theories. Theories of care have mostly, but not exclusively, been concerned with ethical rather than political issues. Several authors writing on care have sketched fundamental principles of caring social practices and institutions and many have employed reasoning in terms of care in order to support various welfare policies. None has, however—to my knowledge—provided a systematic and fairly comprehensive account of what a caring society and caring politics should look like. Engster's book fills this gap.

The book includes separate chapters discussing the implications of a political theory of care for domestic politics, economic justice and international relations. The author proposes distinctive principles and policies to guide political action in each of these domains. For example, a particularly helpful, convincing and original chapter outlines the aims of the economically just society and indicates the policies which enable a society to achieve these aims. One of the main motivations people have for working, argues Engster, is to be able to care for themselves and their dependents. Therefore, the first virtue of an economic system is to enable all individuals to give care. He then identifies four more specific economic goals of a caring government as: (a) the promotion of a level of economic productivity and prosperity which can allow all people to meet their biological and developmental needs; (b) a minimally fair distribution—such that the economic resources are actually used for meeting the relevant needs; (c) the promotion of individual responsibility which ensures that all capable citizens contribute to the shared political goals of caring (and that the desideratum of the first principle is attainable) and; (d) the support and accommodation of direct care services and personal caring activities (p. 140). These aims translate into several principles of economic justice, the first of which being that all individuals should have access to jobs remunerated well enough to allow them to care for themselves and their dependents. Moreover, jobs should not systematically interfere with workers' ability to care, economic activities should not unreasonably endanger workers, governments should ensure enough caring services are available and, finally, it should provide these services to those incapable of work.

Similarly detailed accounts are offered to flesh out a vision of caring domestic and international politics. A final, substantive, chapter addresses the question how caring

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dispositions can be cultivated in people with the help of relevant social policies. Proposed policies are aimed at early child care, schooling, gender, transforming the media and the family, and are meant to both reflect a pro-active attitude on the side of the government and be respectful of people's freedom to pursue their own understandings of the good life. The argument combines careful normative reasoning with a wealth of empirical—sociological and psychological—data. This blend of normative and empirical analysis highlights the practical relevance of Engster's advocated policies and renders them appealing across a wide spectrum of political positions, which, I suspect, is one of the central aims of the book. For the remainder of this review I shall therefore concentrate on the theoretical foundations of Engster's theory.

Because The *Heart of Justice* focuses on politics rather than on ethics, Engster refers to his theory as 'care theory' rather than 'an ethics of care'. This being said, his work is a direct continuation of the ethics of care tradition, whose classical authors are Carol Gilligan, Nell Noddings, Annette Baier, Virginia Held, Sara Ruddick, Eva Kittay and Martha Fineman. Following an established tradition, Engster identifies the aim of care as meeting certain needs; unlike previous authors on care, he adds the fostering of basic capabilities into the scope of care. His own definition of caring is 'everything we do directly to help individuals to meet their vital biological needs, develop or maintain their basic capabilities, and avoid or alleviate unnecessary or unwanted pain and suffering, so that they can survive, develop and function in society' (p. 29). On this account, feeding an infant or teaching children basic maths are examples of caring, while plumbing and playing music is not. (More controversially, it also follows that meeting the emotional needs of an adult friend does not qualify as caring. More on this counterintuitive consequence below.) And, while all instances of caring are morally admirable, they are morally obligatory only when the recipients of care cannot meet their own needs.

Engster argues that caring for others understood in the above terms is the core of morality: individuals have a moral duty to care for others—when possible directly—and individuals have a moral right to receive care when they cannot meet the relevant needs themselves. Since individual caring cannot ensure that everyone receives adequate care, governments should take on the responsibility to socially organise care such that it reaches all individuals who need it.

Where does a duty to care stem from? Following a line of argument previously taken by Held, Kittay, Folbre and Fineman (and which draws upon earlier work by Robert Goodin), Engster grounds a universal duty to care and the corresponding right of individuals to receive care in the universal nature of human dependency. Far from being exceptional, dependency is a feature of all lives during infancy and childhood (spanning, as it happens in the case of human beings, over almost two decades). Most of us are dependent on others occasionally throughout our lives (when ill) and at the end of our lives. Finally, some people are so disabled that they live in a state of permanent dependency. Without care nobody would be able to survive and lead an even minimally decent human life. The distinctive contribution Engster makes to grounding care in dependency is a Gewirth-style argument which runs as follows. Since our actions show that we value our lives and proper functioning, we cannot but also value care, which makes these things possible. Since we have all started life in dire dependency, we have implicitly claimed care from others in order to survive and develop and, in doing this, we have implicitly appealed to a norm which makes care morally obligatory. Thus, on pain of inconsistency or hypocrisy we cannot agree to a principled rejection of such a norm.

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There are three points which I would like to discuss in what follows. One is that Engster unjustifiably (philosophically, if not politically) leaves out emotional and symbolical needs, which, while not necessary for mere survival, are important enough to entail psychological and moral suffering when frustrated. This leads to counterintuitive limitations of our understanding of care—as illustrated above. It also gives theoretical support to a neutral positioning of Engster's version of care ethics towards values such as egalitarianism or democracy, which is the second point I shall discuss. While it is helpful for galvanising political consensus, the last consequence represents, in itself, a problem for care theory understood as a theory of *justice*. Third, I will argue that Engster's argument for a moral duty to care is vulnerable to criticism based on individual responsibility, and that the best defence against such criticism would also entail that he should embrace some sort of egalitarianism—at the very least in the distribution of care.

Although 'need' has been the central concept of the ethics of care from the very beginning, it has so far remained relatively under theorized. Various authors on care have intuitively used it to refer to most of what we usually call 'needs' in common language, that is biological as well as emotional needs. Indeed, an implicit understanding of importance of the latter might be the best way to account for the emphasis placed by an ethics of care on the value of caring face to face, in personal relationships. Throughout his book, however, Engster refers to biological needs only. Other needs are included at best indirectly, either *via* capabilities, since care is meant to develop and maintain basic capabilities or *via* the third element of caring as identified by Engster, which is the avoidance or alleviation of suffering. It should be possible, however, to develop and maintain capabilities, without even getting close to engaging with many important emotional needs. As for the goal of avoiding or alleviating suffering, this is the least elaborated part of Engster's definition of caring. A minimalistic interpretation of suffering seems rather redundant since vital biological needs are defined as those needs whose frustration is life-blighting. A wider interpretation of suffering would generate an over-demanding ethics of care which Engster explicitly wants to avoid. One problem with restricting the relevant needs to biological ones is the counterintuitive restriction of what we usually take to be morally valuable care. A paradigmatic example would be listening to, and comforting, a distressed friend. Since various emotional needs as well as more symbolic needs for social recognition and fair treatment seem to be as relevant to good lives as biological needs, it is not clear their exclusion from a theory of care is justified.

Engster's theory's failure to incorporate less material needs into his account—such as emotional needs or people's need to be recognized as equals and treated fairly—is consistent with, although not necessarily implying, Engster's theory's principled lack of commitment to values such as equality or democratic politics. His version of care theory (unlike that of other authors, most prominently Joan Tronto's) is explicitly agnostic about egalitarian distributive justice or the democratic organization of political life. By contrast, a more comprehensive understanding of needs would lead to alliances with particular theories of politics and of social or economic justice.

The explicit agnosticism about moral and political values other than care carries implications for Engster's analysis of justice in various domains. To take again the example of economic justice, Engster denies a particularly strong connection between Marxism and a care-centred economy. Marxism, however, being centred on needs, can very likely be developed into supporting a caring understanding of economic justice just as much as Engster's own account does.

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On a related point, Engster does not engage upfront with the question of how care itself should be distributed, but implicitly supports a sufficientarian ideal. Other authors—such as Baker et al. (2004)—have argued that what we want, as a matter of justice, is that people be equally cared for (whichever your favourite understanding of egalitarianism). This position seems more in line with Engster's own theory of care than sufficientarianism: not only because, as citizens of Western democracies, we happen to value equality and thus feel slighted by unjustified unequal treatment; but also—and more fundamentally—because it is unfair that some people receive less care than others, given that the entitlement to care—as it is understood by Engster himself in this book—is entirely independent from personal merit and responsibility.

Denying this last assumption would make Engster's justification of the moral imperative to care, and of individuals' right to care, *particularly* vulnerable to a form of criticism to which it is vulnerable anyway. For, it is possible to argue that the care received does not generate any duties on the part of care recipients. The care we get while we are dependent on other people during infancy and childhood, this argument would go, is due to us from those who are responsible for our existence (that is, our parents) and creates no obligation on our side since we have not chosen to exist in the first place. And the care we receive as adults is either in the form of gifts, or the result of market transactions or more informal transactions we make with other people. In any of these cases the care we receive does not generate a duty to give care ourselves. On this view, as (normally abled) adults we have no automatic right to others' care, but we are free to purchase it, get it in exchange for similar or different services we can provide or, at times, receive it as a gift. It is up to individuals to make the choices which will ensure the needed care if and when they need it. The most upfront way to reject this market-oriented approach to care is to say that people should get care not because they deserve it, but simply because they need it. In other words, that the entitlement to (at least some kinds of) care does not hinge on individual responsibility and hence cannot be lost through irresponsible action. At the same time, such a theoretical move would make it unclear why anything less than some type of egalitarian distribution of care would be acceptable.

A final point, closely related to the above, regards the exact status of Engster's care theory. Throughout the book he emphasises that his account of care is a minimal, hence incomplete, theory of justice. As such, it remains silent on many moral and political issues and is thus compatible with, but does not necessarily require, various other core values such as democracy, individual freedom or economic equality. Whether or not we embrace any of these values, argues Engster, we should recognise the moral value of caring as being the heart of any theory of justice—given that none of these values could be realised and sustained without the caring necessary for human survival and functioning. At times, however, Engster says his care theory is a theory of justice *alternative* to egalitarian, libertarian or communitarian theories. This contradiction, I believe, is significant because it indicates a general instability of Engster's theory as developed in his book. The more we understand it as a minimalistic theory, the easier it will be to uphold it (although even in its most minimalistic form it might prove incompatible with libertarianism, for the reasons I give above). At the same time however, a very minimalistic understanding of care theory will inevitably be unable to provide an alternative to any other theory. A less minimalistic form of care theory might be required if we include a more substantive—and controversial—understanding of needs at its core, as I have suggested above. Such a version of care theory will be less likely to be universally endorsed and will find itself more closely allied with some moral and political

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theories than with others. It will, at the same time, be more convincing as a theory of justice.

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***The Metaphysics of Memory,* by Sven Bernecker. New York: Springer, 2008, ix+191 pp. ISBN: 978-1-4020-8219-1 hb £81.00**

Given the recent dearth of philosophical work on memory, Sven Bernecker's *The Metaphysics of Memory* comes as a welcome intervention, particularly as it brings historical philosophical debates around memory into contact with relevant recent philosophical work and (though to a lesser extent) with relevant empirical work on memory. The book will be an indispensable addition to the library of any philosopher of memory; due to its systematic but accessible character, it will also be a useful resource for other researchers and advanced students in need of an introduction to the area.

Bernecker begins with a brief chapter providing some background on the project of the book. His focus on fact (rather than object, property, or event) memory, on veridical (rather than ostensible) memory, and on occurrent (rather than dispositional) memory is natural and familiar. His distinction between reproductive memory (memory for facts) and metarepresentational memory (memory for one's own mental states) is less so, and as he returns to the distinction elsewhere in the book, it would have been helpful to see it developed in more detail.[1] Chapter 1 also considers preliminary analyses of reproductive and metarepresentational memory; these amount to a schematic statement of the venerable causal theory of memory, according to which remembering requires a causal connection (via a memory trace) between a current representation and an earlier representation. Part I of the book then develops and defends a more precise version of the causal theory, while Part II argues for direct realism about the objects of memory and responds to scepticism about memorial knowledge by applying epistemological externalism to memory. Part III, the shortest but most interesting section of the book, is concerned with reconciling the factivity constraint (the requirement that the content of a memory matches a previously represented content) with the observation that memory is in general reconstructive, arguing in the process for a novel memorial contextualism according to which 'whether a memory state must be identical with the representational state it causally derives from or whether it suffices that the two states are merely similar depends on the conversational context of the rememberer and the attributor' (p. 169).

Part I begins with a chapter discussing a range of direct arguments for and against the causal theory. For example, In response to Malcolm's argument (against the theory) that

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