

# Groundwork for Transfeminist Care Ethics: Sara Ruddick, Trans Children, and Solidarity in Dependency

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*This essay considers the dependency of trans youth by bridging transgender studies with feminist care ethics to emphasize a trans wisdom about solidarity through dependency. The first major section of the essay argues for reworking Sara Ruddick's philosophy of mothering in the context of trans and gender-creative youth. This requires, first, stressing a more robust interaction among her divisions of preservative love, nurturance for growth, and training for acceptability, and second, creating a more nuanced account of "nature" in relation to nurturance for growth to avoid casting transition as contrary to a trans youth's healthy development. In the second major section of the essay, I depart from Ruddick's framework to emphasize the difference of care for trans youth by trans and/or queer communities and through mutual caregiving, stressing a trans wisdom about dependency and solidarity found in the work of Sylvia Rivera and Marsha P. Johnson. Turning to Eva Feder Kittay's links between dependency work and equality, I argue that Rivera and Johnson's work contains a distinct knowledge derived from practice necessitating the connection between solidarity and dependency in particular communities. I then call for more work on trans care ethics, trans ethics, and trans wisdom more broadly.*

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There is a witness to the transsexual's script, a witness who is never consulted. She is the person who built the transsexual's body of her own flesh and brought it up as her son or daughter, the transsexual's worst enemy, his/her mother.

Whatever else it is gender reassignment is an exorcism of  
the mother.

— Germaine Greer

A bisexual mother with severe envy of, and anger toward,  
males promotes an excessive symbiosis, producing a

pathological identification between herself and her son . . .

Thus, unfortunately, are the dimensions of his body ego, such a crucial element in gender identity, opened to include her—her body and her bisexually distorted femininity—as part of himself. When a boy’s father does not put an end to this process of two people of opposite sexes devouring each other’s gender, the boy who feels he is a girl may be produced.

— Robert Stoller

#### WHERE IS TRANS CARE ETHICS? TRANS DEPENDENCY AND FEMINISM

Much has been written and filmed recently on the “question” of trans youth, jump-started by the significant rise in media attention directed at trans youth and other gender-creative youth in recent years. This includes shows about trans children by Oprah in 2004, by Barbara Walters on *20/20* in 2007, and more recently by Anderson Cooper in 2011, Katie Couric in 2013, as well as a series featuring Jazz Jennings in 2015, and a trans child appearing on the cover of the *National Geographic* “Gender Revolution” issue in 2017 (Winfrey 2004; Walters 2007; Cooper 2011; Couric 2013; *I Am Jazz* 2015; *National Geographic* 2017). These specials, typically focusing on the difficulties and triumphs of raising trans and gender-creative youth in a dual-income, white, middle-class family, call attention to the extra work required for trans-focused family care when resources, knowledge, and accommodations are difficult to secure.<sup>1</sup> Many trans youth, especially children, still depend upon their parents and other caregivers not only for food, shelter, and water but also for assistance with finding ways to express themselves and access medical services in the context of a society that is largely hostile or indifferent to trans lives. This dependency also emphasizes the vulnerable position of people who care for trans people, as understandings of “proper” parenting typically acknowledge only the methods relevant to raising a “proper” cis (nontrans) child.<sup>2</sup>

However, turning to trans studies makes it difficult to explain this dependency experienced by trans youth. In the context of trans youth, dependency entails the needs of a vulnerable dependent person who relies on another to persist in a society that often threatens to nullify their life through words and deeds. In the context of trans studies, however, dependency carries baggage from its use to cast trans lives as inauthentic. Associations between trans people and dependency risk calling back to antitrans arguments criticizing a different sense of dependency in the register of trans people being created or puppeteered by doctors’ agendas and technology, as suggested by feminist theorists such as Mary Daly, Janice Raymond, and Bernice Hausman (Daly 1978, 69; Raymond 1979, 92, 136; Hausman 1995, 7). In contrast, the consolidation of trans studies in recent decades escaped its tether to antitrans feminists and their claims that trans people are hopelessly dependent upon patriarchal medicine

and culture, taking on a rich life of its own stressing self-determination and agency (compare Bornstein 1994, 87; Prosser 1998, 16–17; Stone 2006, 229–30; Stryker 2006, 247; Overall 2009, 19; Salamon 2010, 1–2). However, despite this resilience, dependency in trans studies risks remaining at best an undiscussed topic or even a dirty word due to the history of trans people being portrayed as, for example, “dupes of gender” because they are “dependent upon the development and use of specific medical technologies” (Hausman 1995, 140). What is thus required is a discussion of trans dependency in a different voice.

Fortunately, feminist care ethics has provided a source for thinking dependency and care in a different way. In *Maternal Thinking*, Sara Ruddick constructs a ground-up account of motherhood as a discipline informed by concrete practices of mothers (who can be of any gender) (Ruddick 1995, 46). Emphasizing that knowledge and truth criteria arise from human activities that are directed toward particular goals (13–14) within a particular social context (15), Ruddick asserts that the demands of maternal work require a distinct way of thinking (24). Specifically, mothering begins as a substantial undertaking of care in response to a particular dependent child (17). Hence, the goals relevant for mothering are related to these practices of care, and involve responding to demands of “preservation, growth, and social acceptability” that require the work of “preservative love, nurturance, and training” on the part of mothers (17). For Ruddick, preservative love involves the basic care that all children, as vulnerable, dependent beings, require to continue living (18). Nurturance, going beyond preservative love, involves fostering a child’s growth and development (19). Finally, training involves the instruction that a child requires to survive and thrive when living in a world with others, beginning with a child’s “acceptability” to their mother’s social groups (21). These all combine to create a rich, practice-focused description of care work and thought.

The flexibility of Ruddick’s account initially seems amenable to transformation in the context of caring for trans youth due to her practicalist approach. Rather than looking at mothering as grounded in foundational or essential maxims outside of human interactions, Ruddick asserts that maternal thinking begins with particular acts of care in relationship to a particular dependent child. It is only from this practical perspective that more general pictures of mothering are formed. Through Ruddick’s approach, raising a trans child can be understood in relation to concrete practices of preservative love, nurturance, and training rather than *a priori* maxims or assumptions that trans children must be raised as cis (non-trans) children.

However, literature on Ruddick’s work has suggested that despite her practicalist approach, her construction of a broad, universalistic account of mothering tethers her framework of mothering to a white, middle-class perspective in a way that may also lead to suspicion about its promises for trans and gender-creative youth. For example, Alison Bailey critiques Ruddick’s universalization of maternal practice into the categories of preservative love, nurturance, and training as a totalizing, ethnocentric move (Bailey 1994, 192). Bailey argues that Ruddick’s epistemic framework of mothering relies on the sameness provided by universal categories, and instead turns to an

emphasis on mothering as a field of difference (192–93). Specifically, Ruddick's categories are unable to account for black feminist accounts of motherwork such as Patricia Hill Collins's contextual emphasis on "survival, identity, and empowerment" (194), and specific relationships of privilege enjoyed by white mothers and their children in the context of racist state violence (196). Likewise, Jean Keller argues that Ruddick's framework requires significant reformulations to adequately consider care work by adoptive parents (Keller 2012, 22). Though Ruddick's approach may initially seem useful for mothering trans children, it is important to pay attention to the limits of reworking her approach, and also justify that her approach is sufficiently amenable to revision.

Whereas Bailey powerfully stresses that a difference approach to mothering is the only way to not cede epistemic priority to white, middle-class visions of maternal practices (Bailey 1994, 195), Keller stresses a "middle path" between "Ruddick's universalism and localized accounts of mothering," with a focus on encouraging more voices to join the discussion of mothering while holding onto Ruddick's useful work of categorization (Keller 2010, 844). Interestingly, Keller also specifically mentions mothering gender-nonconforming youth in this context (845–46, 848–49). Although Keller mostly gestures toward this subject, she nonetheless provides a key precedent for expanding Ruddick's account to include mothering trans and gender-creative youth, mentioning mothers of "gender-bending children" among the new voices that her expansion of Ruddick's framework might include (849).

I agree with Bailey's emphasis on contextual differences in mothering, and I worry about the epistemic space taken up by a philosophy of caring for youth designed from the situated location of nontrans philosophers (which is to say almost all philosophers, feminist or otherwise). I also find Bailey's emphasis on epistemically centering differences among mothers compelling, and I hope that future work in transfeminist care ethics will center specific ways of understanding mothering and care from differently situated trans people.

Thus, when considering caring for trans and gender-creative youth, I plan both to take Keller's middle path to discuss care for trans youth as discussed in more publicized narratives of care for white, middle-class trans youth, and then to diverge and follow Bailey's emphasis on difference when discussing mutual caregiving and caring for trans people that does not fit Ruddick's mold. Referring back to Ruddick's emphasis on practicalism and caring as a form of thinking, I then build upon this difference to emphasize trans ethical wisdoms of solidarity through dependency. Beginning with Keller's "middle path," I first argue that Ruddick's division among three realms of maternal practice is more interactive than she suggests, as caring for trans youth involves messy interplays among preservative love, nurturing for growth, and training for acceptability. Second, I will assert that considering care for trans youth requires a more nuanced view of nurturance and nature than Ruddick provides to account for medical interventions that trans youth may require. After this, I will follow Bailey's emphasis on difference to emphasize the gap between Ruddick's framework of mothering and the history of trans youth receiving care from both trans or queer communities and their trans peers. Finally, by centering the care work of trans activists

Sylvia Rivera and Marsha P. Johnson, I demonstrate a situated, trans, ethical wisdom of care that links dependency with solidarity in particular communities. Hence, though I begin by centering the relationship between trans youth and dependency, I use this to establish that dependency and care have been (and will continue to be) a crucial part of trans wisdom and practice, suggesting that further work is required to explore trans care ethics, trans ethical wisdoms, and trans wisdoms more broadly in their multifarious dimensions.

#### MESSIER DIVISIONS OF MOTHERING WORK

When taking the “middle path” of considering the care of a trans youth according to Ruddick’s categories of mothering, one aspect of Ruddick’s framework that requires revision is her clean distinctions among preservative love, nurturance for growth, and social training. The practice-based flexibility in Ruddick’s philosophy of mothering is helpful because a consideration of caring for trans youth requires several distinct additions and alterations to Ruddick’s categories of preservative love, nurturing growth, and training. The preservative love of a trans child, for instance, will usually require additional responsibilities to ensure the child’s continued survival, requiring a more complex awareness of potential threats. For example, the preservative love of a trans youth also requires a caregiver’s attentiveness to the possibility that a child will be harmed by sources that are usually assumed to play a beneficent role in a child’s life. Often parents and loved ones will perpetrate verbal and physical abuse against a child (Burgess 1999, 42), some thinking that punishment or physical violence will provide a cure for being trans (Mallon 1999, 57). One parent recalls spanking and punishing their seven-year old, gender-variant child for acting like a girl until realizing that their child could not stop their behavior (Brill and Pepper 2008, 78). Hence, caregivers may have to safeguard their child from other family members, or even cope with having been in such a dominating position themselves. Because Ruddick’s approach can be modified based on the demands of a particular child, these expansions initially seem compatible within her broader framework of mothering practices.

However, Ruddick also suggests that nurturance is supplementary to preservative love (Ruddick 1995, 19), and training for acceptability differently pertains to mothers helping their children find a healthy fit within their social group beyond concerns of a child’s immediate survival (21). This suggests that Ruddick considers each demand of mothering to be interactive but nonetheless distinct, preservative love forming the basis upon which a child lives or dies, nurturance building upon this basis to provide conditions in which a child can thrive, and training responding to the demands of living in a world with others.

When caring for trans youth, the distinction among the categories of care is less clear. Ruddick does not consider suicide, but in the context of trans youth this is necessary, especially considering a 2015 survey in which 40% of trans people in the US reported having attempted suicide at some point in their lives (James et al. 2016, 5). These statistics are also pertinent to trans youth

specifically, as suicide attempts in the preceding year from the 2015 study were more common among younger trans people than older trans people, effectively reversing the age patterns for suicide attempts among cis (non-trans) people (113). Though the earliest age in the graph charts people ages eighteen to twenty-five, respondents were also asked about the age of the first suicide attempt, with 34% reporting their first attempt occurred at age thirteen or younger, 39% first attempting suicide between the ages of fourteen and seventeen, 20% between age eighteen and twenty-four, and 8% first attempting at age twenty-five or older. Hence, abuse and punishment contributes to the frighteningly high chance that a trans youth will attempt suicide, as well as more common risks of self-harm among trans youth (Mallon 1999, 51). Because of this, a caregiver of a trans youth must consider the ways in which both nurturance may preserve the child and allow them to develop in ways conducive to their health, troubling Ruddick's description of nurturance as a supplementary practice to preservative love.

Additionally, violence against trans people is common, indicating the need for caregivers of trans youth to exercise caution when caring for their child.<sup>3</sup> For example, caregivers of trans children are often anxious when their child begins dating, especially in cases where their child is known to others primarily as cis (nontrans) rather than as trans (Brill and Pepper 2008, 68–69). As indicated by scholars of transphobia such as Talia Bettcher, violence against trans people is often driven by social attitudes about gender that may frame trans people (and especially trans women) as “stealthy deceivers,” indicating the danger in how trans people are read by others (Bettcher 2007, 50). Hence, the work of caring for trans youth in this context pertains to the complex work of training a child in relation to the gaze of others (Ruddick 1995, 111), requiring a simultaneous consideration of training and its impact upon basic preservation. In this context, nurturance is also a critical factor, further complicating the distinction among Ruddick's mothering categories. When the threat of violence against trans youth who are dating becomes a work of training for acceptability, it may also involve a complicated negotiation between a caregiver who maintains an awareness of violence against trans people and their particular child's own desires for self-definition, romance, and sexual intimacy. This practice is thus as much a matter of fostering growth as it is preservative love and training for acceptance, since it pertains to a child unfolding in their own complexity (86). This indicates that in the context of caring for trans youth, preservative love is not the foundation upon which nurturance or training for acceptance can happen, but instead may interact with the other demands of care in co-constitutive, messy ways.

Nonetheless, stressing the complex interactions among Ruddick's categories of mothering practice does not strike me as fundamentally incompatible with Ruddick's framework. Based on the description above, the categories remain helpful for describing the distinct caring practices required for trans youth even if they interact more intricately than Ruddick stressed in her initial description of mothering. Ruddick also does not seem opposed to presenting her categories as dynamic, since within her

section on training is already an interaction and tension between the practice of fostering a child's growth and training them for acceptability (114). Thus considering the care required by trans youth requires an increased awareness of the interactions and co-extensiveness among preservative growth, nurturance, and training that does not immediately challenge these categories as distinguished.

#### COMPLICATING GROWTH AND ITS RELATIONSHIP TO "NATURE" AS BENIGN

Interactions among Ruddick's divisions of mothering may call for specifications and alterations rather than an entire reframing, but her description of nurturance for growth requires significant revision when considering care for trans youth due to her association between nurturance and fostering the growth of nature. Ruddick emphasizes that the development of a child unfolds according to their nature (Ruddick 1995, 83) as a benign, healing force (84, 87). She writes, "Nature offers a promise of healing; natural processes move toward health and integrity, despite their moments of undeniable ugliness and fear" (84). This contrasts with moments of training when a mother succumbs to societal demands at the expense of their child's natural course, with the antagonistic control of nature both reducing the child's upsurge of life and swallowing their otherness (114–15). Hence, nature must be allowed to flourish in the context of the child.

This understanding of nature "from a maternal perspective" considers natural development as a material process of the child's unfolding (83) in addition to its spiritual and cognitive aspects. Nurturance thus involves the work of allowing a particular child to develop into their more complex bodily being according to the beneficence of nature (84). As sexual development can be seen as a part of this general natural development, one might imagine that a mother's task will also be to allow a child to develop according to the course of their "natural" sexual development.

Of course, many caregivers of trans youth are able to suspend gender expectations for their child and allow them freedom to play with gender expression. One caregiver initially allowed her two-year-old, male-assigned child to experiment with self-naming as Madeline and with a make-up kit, thinking that this would allow her child to express their artistic skills and contest "close-minded rigid messages about gender" (Lurkis 2003, 3). In this instance, the caregiver looked beyond societal gender demands and toward the natural growth of her particular child, with her later reconsideration and resistance eventually transforming back into acceptance (4–5). Other parents of trans youth, similarly, are willing to allow their children expression outside gender norms for boys' and girls' behavior (Dillon 2003, 28). In this way, people who care for trans children often suspend societal expectations in favor of their trans child's unique, natural path of enspirited growth.

However, for many trans children, their hormonal development, without intervention, can be contrary to any sort of aim for beneficence or feelings of coming into one's own even as they result in material growth. One caregiver explains that at age

eleven, their child was in denial about the impending arrival of puberty. They were very concerned about their child's well-being if this development was not postponed through intervention (Dillon 2003, 24), and at age fifteen the youth's spirited expression improved from hormonal interventions provided by an endocrinologist (29). Endocrine intervention for trans children often begins with the administration of *GnRH inhibitors*, colloquially referred to as "blockers," which delay puberty until further decisions can be made (Brill and Pepper 2008, 204). Later, a particular child may demand the additional intervention of "cross-hormones" (the administration of testosterone or estrogen), which will begin the development of secondary-sex characteristics through puberty (214), although children may also decide against this. The dependency of a trans child upon their mother for this development thus complicates their relationship in a way that seems to go beyond the material unfolding of the child through beneficial nature.

Furthermore, understandings of "nature" and "natural" development risk becoming a reason to dismiss a youth when they demand interventions for blockers, hormones, and surgery. Many people hold trans people and processes of medical transition to be problematically unnatural in comparison to, say, vaccinations and insulin therapy and access to the Internet (which is likely to change not only personality but also propensity to physical repetitive stress injuries). It is thus possible that Ruddick's version of nurturance could be deployed to argue that transition is an obstacle to proper nurturing rather than part of its practice. After all, the delays caused by blockers suspend a child's pubertal development and physical growth, which may also delay cognitive developments that arrive with puberty (207). Most trans people who choose hormonal intervention will begin receiving cross-hormones during or after puberty, effectively causing a second pubertal reaction (219), which could also be interpreted as turning against their material, "natural" development. Thus, in the context of particular trans youth who require these interventions, it seems that the material needs of these children's unfolding spirit cannot be reduced to an account of bodily development without intervention, especially when this "nature" is experienced as the opposite of healing by the child.

To respond to this, it is useful to reconsider Ruddick's emphasis on nature altogether. In the previous section, I argued for complex interactions among Ruddick's divisions of mothering practice. This makes it more possible to reconsider Ruddick's description of benign nature in the nurturance section according to her different approach in the preservative love section. Here, Ruddick writes of the natural that it can be identified with the given, in the sense that children inhabit given, varying bodies that are differently affected by the world (Ruddick 1995, 76). Specifically, Ruddick clarifies that nature and the natural amount to a child's physical and emotional givens. Ruddick writes of mothering work in the context of a child's emotions, "[t]o respect that [a child's] fury or those giddy high spirits or a body that seems perpetually mobile is respecting nature, much as one respects the strength of a hurricane, the rush of a waterfall, or the onset of age" (76). Ruddick's emphasis on nature as a given in the context of preservative love thus gestures toward nature emerging as a part of practicing care for a simultaneously material and emotional world (76, fn.).

In her section on preservative love, Ruddick also considers that the natural is not always benign, emphasizing that nature offers enough dangers to often serve as antagonist (76–77). Nature is thus not a simple, benign force in relation to preservative love, even though in this section Ruddick also occasionally associates nature with growth and thriving (77). Here Ruddick stresses that “[m]others might be said to negotiate with nature on behalf of love,” considering nature as “a respected opponent with whom [mothers] are watchfully and sometimes antagonistically engaged” (77). Though her later discussion of nature and growth does not return to the complex nature of preservative love, emphasizing a stronger connection between preservative love and nurturance for growth may provide a bridge through which some of nature’s nonbenign complexities can be imported into Ruddick’s consideration of growth.

Expanding the consideration of nature and nurture beyond a child’s beneficent growth may make better sense of the complexities navigated when caring for trans youth. Much as Ruddick calls for a more complex negotiation of the “given” represented by nature in the context of preservative growth, many trans youth experience certain kinds of physical growth and development without medical intervention as nonbenign or even maleficent to the extent that developments such as puberty may stifle a trans youth’s self-image or vision of who they can grow to become. The bodily developments provided by “nature” may very well lead to negative outcomes for a particular child’s overall well-being that require intervention for the child to achieve the kind of beneficial growth they require.

Importing Ruddick’s more complex discussion of nature in relation to preservative growth, nature can no longer be considered a passive, beneficent aura that assists a mother with her child’s growth, but rather another field of positive, neutral, and negative forces that a mother must intelligently negotiate in the context of their particular child. The particular dependencies of a trans youth might call a caregiver to turn against what they might otherwise interpret as a youth’s “natural” sexual development, especially when noticing the detrimental effects on the child’s overall growth and self-enfolding spirit. Otherwise, we risk resisting abstract demands of society for acceptability only to fall into the demands of some abstract, angelic force called “nature,” when what matters for care is the particular child and their particular, complex needs.

Though I have suggested that caring for trans youth requires a more complicated understanding of “nature” in relation to nurturing and growth than Ruddick provides, and pointed to Ruddick’s account of nature and preservative love as a potential source for more nuance, it is likely that additional scholarship on trans youth will be required to further complicate Ruddick’s emphasis on nature as derived from mothering practices (76, fn.). Ruddick is aware that “nature” is a complicated term in feminist theory, but trans studies also has a complex and rich scholarship developing and troubling “nature.” This ranges from Susan Stryker’s double move of claiming a position that is “unnatural” (Stryker 2006, 238) and an affinity with “mere material existence” (40) to the contemporary rich trans scholarship on new materialism, trans/queer ecology, and “tranimalities” (compare Chen 2012; Stryker and Aizura 2013; Hayward and Weinstein 2015).

I do not have space to provide a comprehensive account of trans “nature” within this essay, but I want to urge great caution with basing nurturance on “nature,” since it is a hyperdetermined concept that often accords normative value not to the emotional and material needs of a particular child but rather to the demands of society. Since I have heightened the interactivity among Ruddick’s three categories of practice, it is useful to consider that Ruddick is often quite suspicious of the practice of training in relation to society as a potential danger for a child’s growth (Ruddick 1995, 114). Appealing to “nature” and the “natural” in the general and abstract thus carries the considerable risk of resulting in a practice of training for what society considers natural rather than a focus on care in response to specific demands. In this context, beyond “nature,” I suggest that nurturance can be understood as a response to a youth’s initial, given, embodied situation, their particular needs for emotional or material growth (whether through hormones and surgeries or not), and a continued, active negotiation between their emotional and material development.

#### FROM MOTHERING TO COMMUNITY AND MUTUAL CAREGIVING

Keller’s “middle path” to internally revise Ruddick’s account grows thorny when considering contexts of caring that go beyond a household arranged according to white, middle-class norms to instead center community caring and mutual caregiving among trans youth. Although the subject on talk shows of trans and gender-nonconforming youth often provides inspirational examples of parental care, this is not the reality for many youth. As Janet Mock suggests, such stories can be seen as “best-case scenarios,” not attentive to differences across race and class (Mock 2014, 119). In a report by the National Center for Transgender Equality on trans discrimination based on a survey conducted in 2015, 50% of trans respondents in the US reported they had experienced family rejection (James et al. 2016, 75). Respondents who experienced family rejection were nearly twice as likely to have experienced homelessness (40%) as those who did not experience rejection (22%) (76). Eighteen percent of respondents reported they had families who were outright unsupportive rather than neutral or supportive. Compared to respondents with supportive families, respondents with unsupportive families were more likely to be unemployed, to have done sex work, to have experienced homelessness, to experience “serious psychological distress,” and to have attempted suicide (70). Because of family rejection, homelessness, and employment discrimination, there is hence a long history of trans people and especially trans youth turning to people other than birth or adoptive parents for care. Studies show that trans youth have better mental health outcomes when supported by family (Olson et al. 2016), but many are not so supported.

Because of widespread family rejection, the work of care for trans youth often comes from trans and queer communities, consisting of both elders and networks of mutual caregiving. One middle-gender-identified youth explains,

“Ok, then you have the gay family. Gay family, first you end up having a mother or a father sometimes all wrapped into one. Then with that you’ll get brothers and sisters and aunts and uncles and grandparents and you’ll have family all over the country before you know it . . . . Whatever you need, . . . they’re there for you to support you.” (Hawkins 2009, 170–71)

Ruddick’s emphasis on mothering, though important, does not address this crucial form of care for trans youth through a larger gay, queer, and/or trans family-community. Ruddick does suggest that mothering would ideally be divided among several people (Ruddick 1995, 50), but considers “kin work” to be a broader scope of care work that she must bracket when focusing on mothering (46). This focus on mothering as the work of a single individual is also embedded within Ruddick’s phrasing through an emphasis on “a mother.” Ruddick writes, “Many people other than mothers are interested in children’s growth—fathers, lovers, teachers, doctors, therapists, coaches. But typically *a mother* assumes the primary task of maintain conditions of growth” (20; emphasis mine). Ruddick also associates peers with the work of training, which typically pertains to outsiders distinct from mothers (111). Here the caregiving work undertaken by a youth’s friends is not given detailed consideration, as the focus is primarily on the friends of a mother, who may be an outside source of “gaze” and judgment (111). Though Ruddick’s centering of mothering in the singular makes sense for her project, her emphasis suggests to me that her account has a wide gap when accounting for care by queer and trans communities as well as mutual caregiving by trans youth. Additionally, though Keller has discussed adoption in the context of Ruddick’s work (Keller 2010, 848; Keller 2012), she still centers relationships between parents (both birthgivers and adoptive) and adopted youth. It is thus important to give attention to the practice of care by trans and queer communities, along with mutual caregiving, while centering people doing this important work. As Bailey emphasizes, Ruddick’s framework can be limited for groups of people that she does center, such as people who fit a white, middle-class practice of parenting, and consequently an emphasis on difference in mothering practices is often necessary. Rather than assimilate different contexts and understandings of caregiving into Ruddick’s framework, I thus find it useful to follow Bailey’s emphasis on different experiences of care, centering specific practices (Bailey 1994, 195).

There are many examples of mutual caregiving in trans communities among trans and gender-creative street youth and by older trans people throughout history. For example, in 1970, Sylvia Rivera and Marsha P. Johnson founded Street Transvestite Action Revolutionaries (STAR), and made efforts to house and care for young street queens and other trans youth, referred to as “STAR House kids” (Gan 2013, 296–97). Rivera and Johnson thus stood as important caregivers for many street queens and trans youth who did not have other caregivers. Stryker writes in *Transgender History*, “[t]heir primary goal was to help kids on the street find food, clothing, and a place to live” along with eventually “establishing a school for kids who’d never learned to read and write because their formal education was interrupted because of discrimination and bullying” (Stryker 2008, 86–87), striving for a caring practice that

sounds very similar to Ruddick's discussion of preservative love. This emphasis on education also relates to both nurturance and training by providing trans youth with a way to both grow and achieve literacy in the context of a society that demands it for acceptability. However, this practice of caregiving is also practiced by two trans activists in the context of broader trans and street queen communities, a network infused with a rich history of care and mutual care that is difficult to assimilate into Ruddick's account. Though these practices of care can be brought into conversation with Ruddick's categories in interesting ways, I find it more compelling to maintain an emphasis on difference.

More recently, Janet Mock discusses mutual caregiving among trans sex workers on Merchant Street in Honolulu, Hawaii, citing the community of sex workers as a source for caring nurturance and training. Mock recounts that other women working on Merchant Street served as important role models, teaching her "to take ownership of [her] life and [her] body" (Mock 2014, 172). In addition to growing as a person through her relationship with trans women sex workers and giving them the kinship titles "mothers and sisters" (172), they also shared information about safe-sex practices (204). Practices of care among trans people thus may also be mutual and undertaken by many, both youth and elders. To formulate a rich account of caring for trans youth it is important to acknowledge both community caregiving and mutual caregiving by peers and friends as part of the historical and contemporary fabric of trans lives and trans communities, as well as people who do not cleanly fit into the category of "trans" but nonetheless are brought into similar communities and conversations.

#### TRANS ETHICAL WISDOMS AND SOLIDARITY IN DEPENDENCY

One of Ruddick's insights about care is that it also forms a way of thinking, and paying attention to the differences between Ruddick's approach and care among trans communities can draw out a distinct trans ethical knowledge of practice. Specifically, in stressing the distinctness of caring for trans youth, and the importance of care by both trans communities and through mutual caregiving, I am also calling for an attentiveness to a distinct knowledge about care. Bailey is critical of Ruddick universalizing her categories of mothering, but one of the persisting upshots of Ruddick's practicalist approach is that mothering can be considered as a set of activities informing a discipline and a way of thinking. Ruddick writes, "Maternal work itself demands that mothers think," including "the intellectual capacities she develops, the judgments she makes, the metaphysical attitudes she assumes, [and] the values she affirms" (Ruddick 1995, 24). Ruddick's assertion that maternal practice involves a way of thinking, constituting "one kind of disciplined reflection among many" (24), is one of the key insights that continues to draw me to her work. In associating mothering practices with thinking and the formation of an important discipline, Ruddick is leveling the field between a dominant practice of philosophical Reason that she finds exclusively abstract and the more concrete practice of maternal thinking (8–9).

Though Ruddick stretches her contextual understanding of mothering practices too far, she is nonetheless correct that mothers have been great thinkers, and Ruddick correctly aims to center their knowledge.

Ruddick also stresses an affinity between her description of mothering as a discipline and a politics of peace. In contrast to the abstracting practice of war (198–99), Ruddick argues the practice of mothers is attentive to bodies in their particularity in the form of particular, complex, and needy children (206). Because of this, the practice of mothering can share a crucial affinity with peace and antiwar politics, even though mothers often support war (220). Maternal thinking is thus also a maternal praxis, extending to the realms of ethics in war and peace.

Following Ruddick, it strikes me that if we take caregiving by trans communities and mutual caregiving seriously, this would comprise wisdom about care ethics that also reflects a political vision.<sup>4</sup> As I mentioned above, Rivera and Johnson founded STAR House in an effort to care for trans youth and street queens. In 1973 Rivera stood before a gay pride rally in Washington Square Park, New York City, and asked that the Gay Liberation Front (GLF) and the Gay Activists Alliance (GAA) join her in solidarity to support her care for gender-nonconforming street youth at STAR, where she needed funding to house and nurture trans youth. Her call went unanswered, and Rivera, Johnson, and the youth they cared for were evicted because they could not pay their rent (Gan 2013, 297).

By acknowledging this failure of the GLF and the GAA to join in solidarity with Johnson and Rivera's efforts in caring for trans street youth, we can envision a relationship between dependency and care that bestows ethical force upon solidarity defined as coalitional and contextual action among trans people and other marginalized groups. Rivera and Johnson were involved in decades of coalitional work, including the civil rights movements and movements for women's liberation during the 1960s, in addition to their presence at Stonewall and their attempt to work with the GLF and GAA before they were pushed out (Gan 2013, 295–96). Speaking to Latino Gay Men of New York in 2001, Rivera voiced her disapproval of how affluent white gay men had progressed at the expense of marginalized trans people since Stonewall, saying, "You have acquired your liberation, your freedom, from that night. Myself, I've got shit, just like I had back then." Yet even after this, Rivera continued by referring to the members of the audience as her children: "I am tired of seeing my children—I call everybody including you in this room, you are all my children—I am tired of seeing homeless transgender children; young, gay, youth children" (Rivera 2007, 120). In this context, Rivera continued her lifelong commitment to solidarity as action across difference by recognizing the dependency of people in the community around her, offering her care in support.

Jessi Gan sees in Rivera's work "a strategic, contingent mobilization of identity categories" inclusive of who she sees as her community. Referring to Rivera's description of the Latino Gay Men of New York audience as her children, Gan stresses,

it becomes apparent that her visions of community are suffused with far more complexity and fluidity than a mere denunciation of certain people and a celebrating of others ... her visions of kinship, family, and

community are both inclusive and dynamic. Like her lifelong attempts at building “home,” they are unpredictable, impatient but generous, provisional yet welcoming . . . Even though Rivera “grew up without love,” attempts to circumscribe her personal and political positionings are challenged by her abiding ethic of love for all her children: young and old; gay, bisexual, and transgender; normatively gendered and gender variant; in the room and outside it. (Gan 2013, 299)

By referring to Rivera’s abiding ethic of love for a far-reaching and diverse group of people she called her children, Gan points out that Rivera’s persistent care for others over the course of her life had a crucial ethical dimension. The work of care that Rivera and Johnson provided to vulnerable members of their community was a call for solidarity left unanswered by gay rights organizations. Rivera and Johnson thus cared in a way that suggests a particular wisdom about the crucial link between dependency and solidarity.

Ruddick also discusses solidarity in relation to the feminist affinity with peace politics. Ruddick describes feminist solidarity as a means through which women join with others not due to shared oppression or shared experiences but instead based on a woman’s (or a group of women’s) particular suffering, abuse, or struggle. In this context, Ruddick stresses that feminist mothers are likely to encounter “the ideal of solidarity” as a way to extend mothering knowledge to “other” women. Ruddick also suggests that feminist solidarity shares an affinity with maternal peace politics by opposing military nationalism and “abstract labels of cause and party” (Ruddick 1995, 240–41). In this way, Ruddick suggests, feminist solidarity can be a site where maternal peace politics extends into a more global vision even as it serves particular women rather than women or nation-states in the abstract (241).

However, though Ruddick stresses an affinity between feminist solidarity and mothering, the moment when maternal peace politics meets solidarity seems mostly contingent upon entering a particular feminist discourse. Mothers might happen upon solidarity by breaking bread with other feminists and realizing that they should be invested in solidarity across differences, but mothering does not seem to have solidarity built into it as a necessary factor. In contrast, Rivera and Johnson’s work of care takes dependency and solidarity to be necessarily linked. The trans youth and street queens who needed the care that STAR offered could not be so easily divided into identity categories and separated from “other” communities in the city, and hence solidarity across differences was already built into the particular care-full thinking that Rivera and Johnson practiced.

It is also noteworthy that Eva Feder Kittay envisions a politics of dependency that relates to broader social movements. In *Love’s Labor*, Kittay stresses that revisibilizing the role of dependency in our lives highlights the fact that everybody depends on connections and relationships, especially because everyone is “some mother’s child” (Kittay 1999, 66). With this phrase Kittay is not tracing caregiving to a biological essentialism (xiii–xiv), but rather focusing on the necessity of dependency work for every human life. As everyone is “nested within relations of care,” and care is a necessary, value-laden

labor within every community, everyone is entitled to both receive care when needed and to be able to care for others without this labor becoming detrimental to their well-being (66). This not only entails that everyone, having depended on the work of care done by others, is due proper treatment to honor the people who put in the work of care to make their lives possible (68–69), but also that society is responsible for supporting caregivers in light of their vulnerable, often unsupported work (183).

I agree with Kittay that it is crucial for society to support caregivers and their work. In light of my suggestion that considering care for trans youth also necessitates considering care from larger community networks and mutual caregiving, I suggest that care-providing communities and mutual caregivers are owed resources. Though trans people are not children in the sense of behaving in a childlike way or playing make-believe, a harmful trope discussed by Bettcher (Bettcher 2007, 50), it strikes me that every trans person has been in a relationship of care and dependency at some point in their lives just like every cis person. Because many trans people have been rejected by family and left homeless, I do not suggest that trans people owe a debt to those who severed their connection and abjected their dependent. However, I do believe that care was owed to those whom Rivera and Johnson cared for and to Rivera and Johnson as well. The refusal of the GLF and the GAA to support STAR House was an ethical failure.

However, though I have pointed to important bridges that can be made between Kittay's emphasis on the politics of dependency and Rivera and Johnson's practices of care, and though Kittay's work is attentive to the particularity of care work (compare Kittay 1999, 147–50), she does not emphasize the on-the-ground solidarity of community-building, housing, and mentoring street youth, and engaging in direct community action practiced by Rivera and Johnson. Kittay does discuss social cooperation and social responsibility, but primarily in a Rawlsian sense pertaining to the structure of a society at large (104, 109). Additionally, Kittay is interested in the distribution of wealth and support within society, but primarily as it pertains to ideals of equality rather than the distribution of particular community resources (185). This is to say that I find a crucial affinity between Kittay's work and the work of Rivera and Johnson, but also that the scope of Kittay's argument is too broad to cover the particular solidarity across differences that Rivera and Johnson focused on, in which concrete dependency and solidarity is more firmly linked.

I thus suggest that the work of Rivera and Johnson took on a distinct, vibrant ethical dimension, stressing a necessary link between dependency and solidarity across differences in their particular communities. As Viviane Namaste emphasizes, violence and discrimination against trans people cannot be distilled to an issue of gender normativity, as trans youth also live under threats of violence and discrimination against sex workers, people of color, women, drug users, people who are HIV-positive, and criminalized populations (Namaste 2009, 14, 18–20). These factors will also often be navigated by caregivers of trans youth, including trans street youth who engage in mutual caregiving. Considering trans ethical wisdoms of care thus suggests that trans studies and activism must push in solidarity for the social, institutional, and economic changes that will foster better lives for both trans dependents and their caregivers,

including “traditional” parents, larger community networks, and mutually caring peers. This wisdom is also attentive to oppression based on race, class, gender, and homophobia. In a statement from STAR *circa* 1970, the final platform reads,

We want a revolutionary peoples’ government, where transvestites, street people, women, homosexuals, blacks, puerto ricans, indians, and all oppressed people are free, and not fucked over by this government who treat us like the scum of the earth and kills us off like flies, one by one, and throws us into jail to rot. This government who spends millions of dollars to go to the moon, and lets the poor Americans strave [sic] to death. (STAR, quoted in Lewis 2017, 76–77)

STAR House was thus interested in collective radical action across many communities in the face of shared (but different) oppression, and the role of the government in funding violence while causing marginalized people to be starved and subject to state violence and incarceration, including the dependents and caregivers at STAR House, and their differences from the white, middle-class gay people at the GLF and GAA who refused to fund them.

When tracing ethical wisdom from the concrete practice of STAR House, and Rivera and Johnson specifically, I am not aiming to position trans women of color as the mythical mother figures and caregivers to *all* trans people. Differences between the “middle-path” revised Ruddick’s account of raising trans and gender-creative youth and the different care work for street youth by STAR indicate that they may not share political insights resulting from their specific practices of care. An emphasis on connections between care and political coalition focused on the transformation of society may not be taken up by white, middle-class trans youth and their caregivers, since despite transphobia they can more easily find a home within systems of racist, classist violence without threat to their continued survival and flourishing. It is thus useful to note that the “trans” in trans ethical wisdom is situated and differential rather than monolithic, and Rivera’s work among primarily poor street queens of color, despite an emphasis on coalitionary action, cannot be removed from its context and equated to the practices of other more privileged trans people and their caregivers, who may never care enough to work against the conditions of poverty, racism, homophobia, misogyny, anti-sex-work stigma, incarceration, and transphobia that STAR House stood (and fell) against.

I also do not want to idealize care work and the wisdoms that may result from different practices of care. Trans and gender-nonconforming communities, like all communities, are frequently sources of bad feelings, disorganization, plans not working out, and people hurting each other through conflict or abuse, which are conditions that may be further intensified by structural oppression and neglect. Sarah Schulman, for example, points out that the rejection and abuse of gay and lesbian people through familial homophobia and a lack of social support for nonheterosexual arrangements can also be inflicted by gay and lesbian people against their partners (Schulman 2009, 35). This includes domestic violence among gay and lesbian people, which is often not acknowledged or given social and community processes

for accountability (92). People who do have some level of social family support, such as lesbians who have legal custody of their children, may also use this against their partners who do not, leveraging the law against the lack of support for non-heterosexual families by cutting their partners off from children their partner has cared for, often over a period of years (83). Schulman writes, “[b]eing on the receiving end of intense homophobia from family, which is supposed to be the central support structure in a person’s life, is a severely traumatizing experience, which creates a resulting vulnerability that in turn makes the victim again susceptible to these kinds of projections from other oppressed people” (96). Although Schulman is discussing abuse within gay and lesbian relationships, families of trans and gender-nonconforming people who do not fit socially supported, heterosexual models of relationships are also susceptible to internal abuse, including domestic violence and using the law against other family members, and thus this care should be acknowledged in its messy particularities and potential for great ethical failures rather than idealized and romanticized.

#### CONCLUSION: TRANS ETHICAL WISDOMS

To retrace my path, I began by taking the “middle path” to intervene in Ruddick’s philosophy of maternal thinking when considering care for trans youth. The first, smaller intervention was to suggest that Ruddick’s categories overlap and interact in dynamic ways as indicated by the messy relationship among preservative care, nurturance for growth, and training for acceptability that caregivers of trans youth experience. The second, larger intervention was to call for a more complex account of nature that does not cast interventions for trans youth as disruptive corruptions of their “natural,” healthy development. I then departed from Ruddick’s account to emphasize the difference of trans youth who receive care from larger communities and through mutual caregiving. Expanding these dynamics by turning to the specific work of Rivera and Johnson, I argued that they forged a political wisdom that links dependency with solidarity across differences in particular communities. Considering the complex practices and knowledges of care for trans youth suggests, *contra* an emphasis on self-standing authenticity and agency in the consolidation of trans studies, that dependency has been a crucial aspect of trans wisdoms all along.

Claiming that there are trans wisdoms about ethics, care, dependency, and solidarity seems immediately obvious, but more work is required to articulate the specific and different forms this wisdom takes in the lives and work of trans thinkers, writers, caregivers, and activists. I hope that this essay indicates the need for future work in trans care ethics, trans ethics, and trans wisdoms more broadly, given the extensive and developing history of wisdom from trans literature, action, and everyday life. Trans people have always been a part of the ethical fold, and now it is time to carefully do the work of drawing out different trans ethical visions.

## NOTES

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1. By using “gender-creative” I am following the terminology of many parents who prefer this phrase to emphasize positively that their children are creative with gender in a way that goes beyond societal norms of sex, gender, and gender expression.

2. By “dependency,” I am referring to the necessity of care work to all human life. Following Eva Feder Kittay, this includes people who need care work that is often one-sided (dependents), people who provide care and may or may not be biologically related (dependency workers), and the reality that most people (and, I would suggest, life of all sorts) are dependent and interdependent across their lifespans (Kittay 1999, ix, xi–xiii).

3. A study by the National Coalition of Anti-Violence Programs (NCAVP) found that in 2016 58% of reported anti-LGBTQ and HIV-affected homicide victims in the US were trans or gender-nonconforming, excluding the mass shooting at Pulse Nightclub, which was not factored into general data (National Coalition of Anti-Violence Programs 2017, 9). The NCAVP also reported that 21% of survivors of hate crimes were trans women (11). Among survivors, 1% were recorded as fourteen or under and 3% were recorded as fifteen to eighteen years old, with fifteen- to eighteen-year-olds increasing to 16% and thirty- to thirty-nine-year olds as the most common age group recorded among survivors at 30% (10). Hence, preservative love will require training one’s trans child to be aware of dangerous situations as they age and prepare for potential future violence. Survivors under the age of twenty-five were also 46% more likely than survivors over twenty-six to suffer hate violence from relatives and family members, indicating a unique challenge for navigating violence (14), and potential extra obstacles to reporting this violence.

4. My choice of the word “wisdom” here rather than “knowledge” or “thought” is not born out of semantic precision, but instead performative stubbornness. Specifically, I am claiming a word for trans people that has heretofore been given a pedestal by philosophy while trans voices were not granted a place in its esteemed conversation. What I mean by “wisdom” thus specifically pertains to knowledge that is both developed from and brought into practice as a contextual form of practical wisdom. I frequently pluralize this into “wisdoms” to stress that trans wisdoms cannot be lumped together, especially as they arise from and relate to differing situations of power and care according to race, gender, class, and their intersections.

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