

## TRUE STORIES OF REAL AND IMAGINED CARE:

## THE QUESTION OF INSTITUTIONAL RELATIONSHIPS

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Stewart-Ambo & Yang. (2021) "Beyond Land Acknowledgment in Settler Institutions." Social Text 39.1: 21–46. https://doi.org/10.1215/01642472-8750076

I'm an uninvited visitor on Tk'emlups te Secwepemc territory within the unceded traditional lands of Secwepemcúl'ecw (Secwepemc Nation), where learning has taken place since time immemorial.

I am shaped by time spent in Algonquin Anishinabeg, Wolastoq and Mi'kmaq, and Qayqat lands. Territorial Acknowledgment

### My Contexts

- I spent nine years as a full-time English instructor at a community college before transitioning to faculty support.
- I work at a regional university in a tenure-track faculty role, supporting a faculty complement of 600 with their digital teaching and learning needs.
- I had been working as an educational technologist for about seven months when March 2020 hit.
- I was the faculty lead on the project to move our F2F courses online; only about ½ the faculty complement had any familiarity with the LMS.
- I am very tired.

# HOW AUS

Please, share how you're feeling in the chat.

# AT THE BEGINNING OF THE PANDEMIC, I WAS SO HAPPY TO BE TALKING ABOUT CARE...

... but I was also burning out. Quickly.

# The Tricky Truth About Care

- Care is strategically useful to the institution to cultivate on the micro level, between individuals; consider how much institutional marketing in the pandemic hinged on celebrating the efforts of individual instructors and their efforts.
- If individuals are enacting care, the institution can remain relatively indifferent to necessary structural changes.
- But care ultimately fails on the macro level when it isn't supported by institutional structures (eg. an understaffed support unit).
- Care cannot be extracted in perpetuity.

# CARE IS NOT JUST A "NICE TO HAVE"

It's essential to the continued functioning of our institutions that we figure out how to implement care on a structural basis.





#### Moral Stress

- Moral injury is caused when we transgress our own personal morals or ethics in order to serve something/one else, and it emerges from the research on military and health care service.
- A less trauma-dependent analogue, moral stress, is useful for understanding burnout in times of crisis.
- When our care is repurposed to prop up the very systems the ethics behind it would seek to strike down – when our care enables institutional inaction – is moral stress, if not injury, almost inevitable?
- If pressed to "let it break," is the same outcome true?



### Moral Repair

- Suzanne Shale posits several steps to achieving "moral repair," but key among them is institutions taking responsibility for harm:
  - <u>Acknowledging responsibility</u>. Moral repair requires that those who are truly responsible for something acknowledge that responsibility. This is not the same as laying blame. In acknowledging responsibility, the person or institution recognises that others have placed reliance on them and have been let down. Acknowledging responsibility reinforces the view that the norms are valid, and it is reasonable to rely on them.
- I wonder, often, if our relationship to the institution as a structure can allow for this kind of repair to take place.
- What is the institution's duty of care to the caretakers?

# Care feels ephemeral, sometimes.



What does it mean to care? Is care always clear? And we know care can be co-opted.



But care can be rigorous and defined: consider ethic of care thinking.

#### What is an ethic of care?

Ethic of care emerges from feminist philosophy.

It argues that our relationships to each other matter, we are dependent and interdependent upon one another, the most vulnerable people impacted by a decision or choice should have the loudest voice.

An ethics of care is also always interested in the context: what situational details, what power dynamics, what pre-existing relationships might get in the way of making the most ethical possible choice?

## Five Key Elements of Care

Tronto, J. (1993). Moral boundaries: A political argument for an ethic of care. New York and London: Routledge.

Sevenhuijsen, S. 2003. "The relevance of the feminist ethic of care for social policy". Feminist Theory 4, no. 2: 179–97.

#### Attentiveness

- Recognizing a need.
- Considers position and power.

#### Responsibility

- Accepting responsibility for the need, beyond duty.
- Not obligation.

#### Competence

- Ensuring the care work is done well.
- Ensuring the need is met.

#### Responsiveness

- How does the carer react to feedback?
- Is the recipient allowed to say no?

#### Trust

- "Oil for the cogs."
- Complicated by systems of power and hierarchy.

## MADE AT SELKIRK: TRUE TALES OF CARE

## Student to Student Care (Micro)

- A student ambassador wrote 18 letters to each person on the team with words of kindness and encouragement.
- The Coordinator noticed one student hadn't picked theirs up yet and so went and found the student and handed it to them.
- The note read: "You're amazing. You will never know the impact you have already had in my life thank you for blessing me and the many others who have walked into your life in the past few months. YOU MATTER."
- Response: "I just really can't believe she wrote a letter for every person. That was just really sweet. I just got out of an exam and did not feel great about it so this really made my day. I'm going to send her a message."

# What elements of care are at play here?



Attentiveness, both on the part of the student ambassador and the coordinator.



Responsibility, because this was above-andbeyond for the student ambassador.



Competence, on the part of the coordinator to see the care work carried through.



Responsiveness, because the recipient has chosen to reach back.



Trust, because the care was effective and well-received.

- Are there ways that care is similarly enacted by those with power over the student ambassadors?
- Expectation creep: does this become obligatory, even if only in the perception of the student ambassador?
- How can the care shown here become the inspiration for systemic change?

Where might we have concerns?

# Caring Interventions (Macro)

At the onset of the pandemic there were concerns raised by instructors, students, parents, and administrators that "cheating" was on the rise. TLC staff read Cheating Lessons by James Lang and became committed to taking a caring institutional approach to this perceived issue. A workshop discussion on the topic was hosted by TLC and well attended - about 75 people from across the institution. An Educational Developer, Pablo Pastor, was hired to work in three areas: policy revision, institutional education campaign, and research on student motivation. Pablo has made great strides this past year, even collaborating with the MIR Centre for Peace to bring a restorative justice lens to the project. He and the groups have created "Discovery Interviews" guidelines and workshops related to dialogue between students and instructors on what academic integrity means to them.

#### What elements of care are at play here?

Attentiveness: recognizing there is a problem but challenging traditional solutions.

Responsibility: faculty and staff took it upon themselves to learn more about academic integrity.

Competence: hiring expertise to make sure the work it done well.

Responsiveness and trust will come as the new policy is rolled out to students.

- ... is that it recognizes academic integrity as a systems issue and an opportunity for care.
- Typical approaches to academic integrity place sole responsibility on students (even as we claim a "culture of academic integrity) and pursue a punitive model.
- Academic integrity is a relational and pedagogical problem, and it requires relational and pedagogical solutions.

What I appreciate about this example...



Selkirk is a caring place!



And also, burnout and moral stress happen even at caring places.



Keep looking for ways to celebrate care on the micro level, and to make it sustainable and systemic at the institutional level.



Notice who is shouldering the care load in your area and look for structural ways to alleviate it – not just more individuated care.

### My Takeaways

# THANK YOU FOR YOUR TIME TODAY

Please don't hesitate to reach out: bgray@tru.ca or @brennacgray on Twitter.