

Gospel Ethics

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Unavoidable ethical and moral decisions permeate our lives. From the personal (how we treat our family members and the people we interact with) to the political (what we do about the increasing number of mass shootings in our country and refugees at our borders or how we behave during a worldwide pandemic), our decisions have moral and ethical implications that reveal our priorities and values. Traditional approaches to ethics and economic policymaking emphasize isolated rational individuals and their direct interactions with other self-sufficient, rational individuals. Yet at different points in our lives, all of us are dependent on others—some we know and others we may not know. As such, traditional approaches to ethics are limited in many ways and often fail to consider both the common experiences of human life and the scriptural example of our Savior, Jesus Christ. However, one less-well-known ethical approach—the ethics of care—is based on the lived experience of all people and is more compatible with the gospel that Jesus taught and modeled than are the more traditional approaches to ethics in our personal and public decision-making.

In this article, I claim that a gospel ethics is an ethics of care, emphasizing the interrelational aspects of human nature and the simple fact that all of us have needs that must be met through the caretaking of others. As such, a gospel ethics inspires individuals and communities to facilitate and encourage the personal development of each of Heavenly Father's children by valuing and prioritizing our reciprocal caring responsibilities. Each of us, as members of The Church of Jesus Christ of Latter-day Saints, should ask ourselves, How do my personal and

political choices impact not only the people I know—my family and smaller communities—but also the people I do not know? Furthermore, what are the ethical and moral choices I could make to build the potential for nurturing others in all of my communities—family, friends, neighborhood, city, workplace, state, nation, and even the world community? We know how we should treat the people in our families and neighborhoods, although we often fail and must get back up and try again. What is even more difficult is to recognize that Christ asks us to treat the strangers we will never know with the same care and compassion with which we treat our families and neighbors. We will fail because we are human, but it is still what we are asked to do.

Background

C. S. Lewis uses the analogy of an armada to point out that there are three levels of morality.¹ His first level, what we most commonly think of as ethics, is found in the relationships between people. How do we treat others? Are the boats in the armada close enough, but not too close? The second level of morality is within ourselves. Who is the individual we are becoming, and is that individual right with God? Is your personal boat in good working order? The third level involves the general purpose of the communities in which we participate—including our families, neighborhoods, cities, nations, and even the worldwide community. Is the armada headed in the right direction? Are we, together with our multiple communities, moving toward God? Are we creating nurturing environments in our homes and communities? Are we becoming a more Zion-like community or society? Lewis's third level of morality is where public policy resides—in the political decisions we make as a community and in our individual choices that impact others in our various communities. Just like an armada, Lewis's three levels of morality rely on each other. Our relationship with God influences our relationships with other people, and both influence the multiple communities in which we participate. Similarly, the personal ethical choices that influence our various communities are opportunities to practice ethical choices that both reflect and impact our relationships with other people and with God and create the individuals we become over the course of our lives.

1. C. S. Lewis, *Mere Christianity* (New York: Macmillan, 1952), 70–73.

Lewis's analogy highlights an issue of semantics: the difference between morality and ethics. Both words have a similar etymology, originating from Latin and Greek words meaning "custom, manners, character, or proper behavior in society." Essentially, both morality and ethics ask, What is the right thing to do in a given situation? Over time, their meanings have become more nuanced, and now we often think of ethics as choices or actions and morality as fundamental beliefs. In other words, morality is the why, the explanation, underlying the ethical choices we make. One well-known textbook on ethical leadership acknowledges that some philosophers distinguish between ethics—"the systematic study of the principles of right and wrong behavior"—and morals—"specific standards of right and wrong." However, the author goes on to say that "just as many scholars appear to use these terms interchangeably."² In this paper, I have chosen to acknowledge the blurring between the terms in common usage, which makes distinguishing between them in discussions of practical application somewhat artificial. The focus of this paper is on ethical decision-making and how those personal choices impact the networks of relationships surrounding every human being. As Lewis's analogy illustrates, there are multiple levels of ethical and moral choices that are best illustrated through relationships: our personal relationship with God, our relationships with other people, and, finally, relationships within and between multiple communities. Conventionally, such choices are considered the foundation of the study of ethics.

Traditionally, there are three widely accepted approaches to morality and ethics—deontological, consequentialist, and teleological or virtue ethics. Deontological ethics focuses on intent and emphasizes adherence to specific rules that can be applied by everyone and that show respect for individual autonomy. Consequentialism, on the other hand, stresses outcomes, encouraging decisions leading to the greatest good for the greatest number. Finally, virtue ethics focuses on developing individual character strengths such as integrity, knowledge, and courage in a teleological sense of progressing toward an ideal self. These traditional approaches to ethics emphasize different aspects of moral and ethical choices—intent, consequences, and personal virtue—but like in the story of the blind men and the elephant, each approach provides a limited perspective in its attempts to answer the question, What is the right thing to do in a given situation? The missing or neglected or

2. Craig E. Johnson, *Meeting the Ethical Challenges of Leadership: Casting Light or Shadow* (New York: Sage, 2021), xxiii.

possibly assumed element in these traditional approaches to ethics is the network of relationships that nurture human beings and make our lives possible.

As human beings, all of us participate in multiple communities. The smallest community includes only two people—a marriage, for example. The largest community includes all of the people sharing the geographical space of our planet. In between are extended families, ward families, neighborhoods, cities, states, nations, professional networks, work communities, and even recreational communities such as running and biking groups and teams. In each of these communities, members are trying to share limited resources (money, time, clean water and air, services, and so forth) with diverse groups of people. How we allocate and share those limited resources is the essence of ethical decision-making and has been the focus of general social science—for example, philosophy, political science, economics, and sociology.

The classical philosophy that provides the core foundation for all the social sciences is written primarily by men who have had the luxury of devoting their lives to thinking and writing. They did not concern themselves with preparing meals, doing laundry, or raising children. Most philosophers—Aristotle and Adam Smith, for example—had networks of caretakers—generally slaves or women—supporting them and their intellectual pursuits.³ Few were married or had children to take care of, and many enjoyed lives of relative wealth, leaving significant solitary time for intellectual pursuits without having to worry about parenting or caretaking responsibilities.⁴ They were the beneficiaries of networks of relationships that took care of them, and because they either did not see the support networks that made their reflective lives possible or did not appreciate and value the significance of those networks, they created theories answering the ethical question—What is the right thing to do?—considering only rational, independent adults *in isolation*.

Most members of the The Church of Jesus Christ of Latter-day Saints do not study philosophy and may not be aware of these traditional approaches to ethics. An approach to ethics they may recognize, at least in principle, is Christian ethics. However, there are extensive

3. Ruth E. Groenhout, *Connected Lives: Human Nature and an Ethics of Care* (Lanham, Md.: Rowman and Littlefield, 2004), 25.

4. Katrine Marçal, *Who Cooked Adam Smith's Dinner? A Story of Women and Economics*, trans. Saskia Vogel (New York: Pegasus Books, 2016), 16; David Brooks, *The Second Mountain: The Quest for a Moral Life* (New York: Random House, 2019), 67.

writings on Christian ethics, and it is difficult to identify the “right thing to do” because of the many different approaches. One list of possible approaches to Christian ethics, for example, includes the best moral philosophy through the ages, the moral standards of Christendom, the ethics of the Christian church, the ethics of the Bible, the ethics of the New Testament, or the ethical insights of Jesus.⁵ While all of these approaches have been called Christian ethics, the ethical insights of Jesus seem to be the closest to the shared Christian goal of following his example. For example, even though the Old Testament was Jesus’s Bible that he studied and loved, he used it primarily as a foundation to which he added additional meaning. In the Sermon on the Mount, he referred six times to known teachings from the Old Testament and then expanded them. For example, “Ye have heard that it was said by them of old time. . . . But I say unto you . . .” (Matt. 5:21–22, 27–28, 31–32, 33–34, 38–39, 43–44). In a similar fashion, we emphasize his insights and apply them to the current human situations in which we find ourselves, focusing on the teachings of Christ as closely as possible. According to Georgia Harkness, Christian ethics is the “systematic study of the way of life exemplified and taught by Jesus, applied to the manifold problems and decisions of human existence.”⁶ This application is what members of the Church are trying to do, and it is a joy to be part of a congregation where, despite our different understandings and interpretations, there is a commonality in the desire to follow Christ’s example of doing good, as he cared for the people around him and taught them to care for each other. Members of the Church most likely practice this version of Christian ethics within their families, and some may extend it to their wards or even neighborhoods. Yet many of us find it difficult to extend that care to communities that are different from us, especially communities we can barely imagine in other parts of the world.

One of the difficulties with extending that care, especially in our larger political communities, is that the commonality we find in our wards and even with other Christians—the desire to follow Christ—is not universally shared. Expecting non-Christians to adhere to the norms of Christian ethics is not a possibility in our larger political communities. Fortunately, a philosophical approach to ethics with substantial parallels to Christ’s ethical insights is available.

5. Georgia Harkness, *Christian Ethics* (Nashville: Abingdon Press, 1957), chap. 1, Religion Online, <https://www.religion-online.org/book/christian-ethics/>.

6. Harkness, *Christian Ethics*, chap. 1, sec. 1.

Ethics of Care

In response to shortcomings in the traditional philosophical approaches, the ethics of care was developed in the 1980s and '90s. The ethics of care, in direct comparison to ethics created by isolated philosophers, emphasizes the essential relationships between people, the importance of devoting time and energy to nurturing those relationships, and the collective responsibility to create communities that prioritize relationships and cultivate an individual's personal ability to nurture others. While each of the more well-known philosophical approaches highlights important perspectives in answering the question, What is the right thing to do? their approaches are incomplete because they neglect the complexities of human existence by focusing on individuals and disregarding relationships. An approach to ethics focused on the isolated rational individual ignores the networks of relationships required to raise a child and ultimately to produce that celebrated isolated rational individual. These approaches ignore the reciprocity required to perpetuate the communities that nurture those networks. They assume away cultural and societal differences in the search for a normative universal standard, rather than encouraging the commonalities of caring that work to transcend those cultural and societal differences. Finally, they ignore the bodies created to house our spirits and the care that those physical bodies require throughout the life course, choosing instead to focus solely on the adult rational mind, creating ethical systems that assume all participants are fully rational, independent adults.

Beginning with the moral obligation to care for those who are dependent and vulnerable, such as infants and children, an ethics of care focuses on meeting the needs of individuals embedded in networks of relationships. No human life exists without receiving and, ideally, giving care. Care is inspired both by memories of being cared for as infants (as we are cared for, we learn to first care for others and then eventually to take care of them as responsible adults) and by a desire to see ourselves as caring individuals⁷—in other words, as being Christlike. As children mature, we hope they will progress teleologically through obedience to rules, considering the consequences of their choices, and eventually desiring to become more Christlike. As they develop, they will ideally learn and practice empathy for others, begin to recognize and appreciate

7. Virginia Held, *The Ethics of Care: Personal, Political, and Global* (New York: Oxford University Press, 2006), 44–46; Nel Noddings, *Starting at Home: Caring and Social Policy* (Berkeley: University of California Press, 2002), 30.

the relationships that support them and their communities, and ultimately demonstrate care and responsibility for others by contributing to those communities. Practice in caring for others is necessary to become a full adult—one who is aware of and can care for the needs of others.

An ethics of care is based on the theory that there is moral significance in relationships. As human beings, we are born into positions of dependency. As children, we rely on others—parents or caretakers—to “take care” of us, to teach us how to take care of ourselves as autonomous individuals, and to encourage us to take care of others in anticipation of a lifetime of relationships. As we are cared for and learn to care for others, we learn to interact with respect and compassion within our networks of relationships and eventually beyond those narrow networks to ever larger communities. The progression of gradually maturing and assuming caretaking responsibilities for other people is a teleological process in the Aristotelian sense, and there are some who suggest the ethics of care is a subcategory of virtue ethics.⁸ Regardless of the specific classification, the gospel focus on building caring relationships through ministering as Christ did is uniquely paralleled in the ethics of care argument that human caring, the memory of caring and being cared for, and the desire to become a caring person are the foundations of ethical behavior. It is in being cared for and in turn taking care of others that we learn and practice empathy and compassion and, by extension, how to treat the people in our communities with respect and charity. It is through experiencing caring relationships that we learn empathy and compassion—prerequisites for both deontological rules and consequentialist decision-making.

In comparison to Aristotle’s virtue ethics, which emphasizes logos—the masculine spirit of logic in the orthodox Greek sense—ethical choices, as in “What is the right, or caring, thing to do?” seem to be more naturally guided by the Greek feminine spirit of love and compassion. The ethics of care can be seen as “feminine in the deep classical sense—rooted in receptivity, relatedness, and responsiveness.”⁹ However, similar to Christ’s expanding on Old Testament teachings, the ethics of care surpasses traditional gender stereotypes. It is neither feminine

8. Margaret A. McLaren, “Feminist Ethics: Care as a Virtue,” in *Feminists Doing Ethics*, ed. Peggy DesAutels and Joanne Waugh (Lanham, Md.: Rowman and Littlefield, 2001), 116.

9. Nel Noddings, *Caring: A Relational Approach to Ethics and Moral Education* (Berkeley: University of California Press, 1984), 2.

nor masculine but extends beyond these stereotypical classifications to a shared human need for care. The core of ethical choices—the connection between wanting to protect oneself and recognizing the possibility of hurting others¹⁰—requires the ability to empathize and see others as human beings deserving respect rather than the ability to distance oneself from others and objectively reason through a moral dilemma. To begin an ethical decision with a longing for goodness and empathy does not preclude a role for moral reasoning but recognizes the foundation of such moral reasoning in caring relationships and thus the necessity to include receptivity, relatedness, and responsiveness in our ethical and moral decision-making.

Ethical systems based on abstract principles, such as the deontology as advocated by Kant and Rawls, are “ambiguous and unstable.”¹¹ Attempting to create an ethical structure and universal rules from behind a veil of ignorance of our own position, or based in an imaginary autonomous will, masks, if not completely ignores, the difficulty of escaping from our own implicit biases while in the role of universal rule-makers. Furthermore, rules based on false assumptions of the universality of rationalism—the idea that all rational people would agree on the same course of action—separate us from each other with self-righteous ideologies. After all, “equally informed, impartial, rational persons sometimes can disagree.”¹² Rather than focusing on the rationality and objectivity of decision-makers and resulting “objective” rules and decisions, an ethics of care advocates listening to and learning from those in our networks of care and negotiating the path to our shared goals together. From the perspective of an ethics of care, all ethical efforts must “be directed to maintenance of conditions that will permit caring to flourish.”¹³ While there may be some commonalities in those conditions, there may also be differences depending on the community of interest. The question to ask ourselves is, What are the ethical choices that will foster and build relationships and the potential for nurturing others in all of our communities—family, friends, neighborhoods, wards, cities, workplaces, states, nations, and world?

10. Deni Elliott, *Ethical Challenges: Building an Ethics Toolkit* (Lanham, Md.: Rowman and Littlefield, 2007), 1–3.

11. Noddings, *Caring*, 5.

12. Bernard Gert, *Common Morality: Deciding What to Do* (New York: Oxford University Press, 2004), 57.

13. Noddings, *Caring*, 5.

Popular books on ethics often describe a situation and then analyze it using multiple ethical approaches from various philosophical perspectives, asking, What is the right thing to do?¹⁴ The trolley example is one of the most common, and entire books have been written discussing variations on British philosopher Philippa Foot's 1967 thought experiment.¹⁵ The basic scenario is that a trolley is careening out of control, and you are standing by a switch that would allow you to divert the trolley to a side track where it would kill one person rather than continue on the current track and injure and possibly kill five people. Another variation has you watching from an overpass, and the only way to save the five people is to drop a heavy object on the track. Conveniently standing next to you is a large, obese person who would block the trolley if you pushed him onto the track. What is the "right" thing to do? After years of using examples such as this to promote class discussions, I have concluded that while they are excellent for engaging students and illustrating different theoretical approaches, they are less useful in prescribing a specific course of action. I could say that my interpretation of the trolley scenario would mandate taking action to kill or injure one individual and save the five (consequentialism). Or, I could say that my responsibility is to respect life, which would arguably mandate taking no action that would kill another human being (deontology). However, both of those decisions could be (and in my classes always are) strongly debated. After all, most of us want to make our own decisions, not be told what to do. As such, we are experts at rationalizing and justifying our behavior. It seems that more than recommending a specific course of action, such exercises allow us to look at ethical situations in different ways—to multiply the lenses through which we see the world and the ethical and moral choices around us. Interestingly, I have learned that a consensus on a course of action is often easier to reach than the rationale or justification for that course of action. Similarly, a consensus on a goal—or community mission—is almost always easier to achieve than a consensus on a course of action designed to achieve that goal. Skills such as conflict resolution, negotiation, and, above all, empathy and compassion for others are necessary for us to find the consensus required in order to live and thrive in our various communities.

14. Michael J. Sandel, *Justice: What's the Right Thing to Do?* (New York: Farrar, Straus and Giroux, 2009).

15. Philippa Foot, "The Problem of Abortion and the Doctrine of Double Effect," *Oxford Review* 5 (1967): 5–15.

While we cherish our autonomy and individual rights to make our own choices, each of us participates in multiple communities—families, wards, neighborhoods, professional organizations, nations, and global populations—and our individual choices influence and change those communities. The ethics of care requires us to consider our decisions and the resulting externalities¹⁶ in light of those many relationships. For example, my decision concerning where to send my child to school influences multiple communities within which my child and I both participate. What would happen to the neighborhood schools and the children in them if all the involved parents with time to volunteer in the classrooms moved their children to a charter or private school? Over twenty years ago, I was talking with an elementary school teacher from California who told me that the school where she taught had so few parent volunteers that they needed to strategically assign students to classrooms so each teacher would have the necessary parental support. Another friend told me about her experience in the heavily African American neighborhood of Hyde Park, Chicago, in the 1970s. The local public school suffered significantly from the flight of involved parents to the private University of Chicago Laboratory Schools, which gives priority to the children of faculty and employees. A few young faculty families who lacked the wherewithal to afford the Laboratory Schools banded together and enrolled their children in the neighborhood K–8 school. Their willingness to volunteer and use their expertise to augment the school’s curriculum and extracurricular activities helped the local public school become one of the most sought-after schools in the area. Those families recognized that their choices impacted multiple communities, and their commitment to their local school changed that community dramatically.

Our decisions about where we will live and raise our families and how involved we will be in our various communities all impact the other people in those communities and, as such, are ethical choices. Even my choice to spend my time reading and writing rather than building relationships with my neighbors is an ethical choice. The ethics of care seeks to recognize that the realm of ethics extends beyond justice and equity to include relationships and the tensions and complexities of human interactions. Ultimately, our choices with respect to our own personal growth, nurturing children and other people, developing communities, and protecting

16. An economic term meaning the impact of a choice or decision on other people who were not involved in making the decision. Externalities can be negative or positive. My beekeeping may have a positive externality on my neighbor who gardens but a negative externality on my other neighbor’s child, who may be stung.

the earth are all ethical choices and have implications that impact our lives and the many communities to which we belong.

Christianity, at its core, is about relationships. The primary relationship is with God, but our relationships with the people in our communities also reflect that primary relationship, as Mosiah pointed out when he said, “When ye are in the service of your fellow beings ye are only in the service of your God” (Mosiah 2:17). Both the Ten Commandments in the Old Testament and the two great commandments in the New Testament are primarily about these two relationships—our relationship with God and our relationships with other people. Our relationship with God is reflected in our relationships with others, and our relationships with others reflect our relationship with God.

Every activity of Jesus Christ can be seen as care. In his compassion and empathy for both the woman taken in adultery and her accusers, he found a middle ground of mercy for the one by protecting her life yet respecting the law by telling her to “go, and sin no more” (John 8:1–11). Ultimately, he is the example. He taught people how to become their best selves by caring for others. He cared for the sick—healing them and treating them with compassion. He held children and cared for them. He flogged the moneychangers—demonstrating care for his Father’s house and showing that caring is not necessarily always passive and gentle but often involves setting boundaries. He served his discouraged disciples breakfast and washed the feet of his Apostles. Jesus Christ is the example “who overcomes nationalistic and racist divisions, facilitating the availability of human persons to one another and to God.”¹⁷

All disciples of Christ are called to be nurturers, caretakers, and servants of others both within the community of Saints and within the larger communities of neighbors, fellow citizens, and citizens of the world who may be strangers to us but not to Christ. Our wards and communities “succeed when the Saints feel the love of Christ for each other above their self-interest. . . . And they succeed when the Holy Ghost guides the caregiver to know what the Lord knows is best for the person whom He is trying to help.”¹⁸ As Christians, we need an ethical approach that places relationships at the center of our decision-making, just as relationships and honoring God by caring for others are at the center of the gospel of Jesus Christ.

17. Marianne Sawicki, “Yes,” in *Philosophy, Feminism, and Faith*, ed. Ruth E. Groenhout and Marya Bower (Bloomington: Indiana University Press, 2003), 113.

18. Henry B. Eyring, “Inspired Ministering,” *Ensign* 48, no. 5 (May 2018): 62.

Caring, as mentioned above, is not always passive and gentle and often requires setting boundaries. One example of boundary setting is parenting. Children become adults as they learn to take care of themselves (self-care) and to care for and take care of others. The process of developing into an adult from a helpless infant is one of gradually expanding boundaries carefully created by nurturing parents. There are pathologies of care at both extremes. When adults do not nurture children and model appropriate caring behavior, the children have a much more difficult time becoming caring adults. On the other hand, excessive caring or the notorious “helicopter parenting” prevents children from becoming caring adults by not allowing them to practice and develop the ability to take care of themselves and the people around them.

At times, relationships between adults may also require setting boundaries as Christ did. For example, some people live in neighborhoods with homeowner associations that have rules and bylaws regulating fences and trees. In one such situation, an elderly gentleman cared a lot about three trees in his backyard that were preventing the construction of a neighborhood fence and were threatening to fall on his neighbors’ houses due to their proximity and large size. The association rules, created with the community good in mind and based on a history of legal cases between neighbors, clearly required the removal of the trees. But the man cared for these trees, and because some of his neighbors cared about him, they wanted him to have the trees. Yet other neighbors’ houses were in danger. The situation threatened the peace of the neighborhood, and attorneys were called in. What is the right thing to do in such a situation? Ultimately, two of the trees were removed, but the third stayed. Sometimes boundaries established through rules and laws are necessary to remind us how our personal choices may impact others in our communities, but as in this situation, the ability to modify such rules to show care for the individual is also an example of caring for others in our communities.

In another example, a caring individual, well-known in his community, had to shut down his business because his friends and neighbors were all trying to use a “friends and family” discount—trying to take advantage of an existing personal relationship to benefit monetarily from a business transaction.¹⁹ Such difficulties reflect a lack of

19. Lindon J. Robison, David R. Just, and Jeffrey R. Oliver, “Doing Business in the World without Becoming Worldly,” *BYU Studies Quarterly* 58, no. 1 (2019): 65–90.

awareness and caring on the part of the friends and neighbors who were so absorbed in their own needs and wants that they failed to recognize and respect the business owner's need to care for himself and his family. The authors who share this example, Robison, Just, and Oliver, distinguish between relational goods—such as goods created in caring communities—and commodities, in an effort to describe how to engage in business transactions without becoming worldly. They use the distinction between relational goods and commodities to argue that relational goods should not be involved in business transactions. However, distinguishing between relational goods and commodities is an artificial distinction, because from God's perspective all goods are relational. Somewhere a child of God with a family and friends to support created those goods, and the globalization of our economy should not be used to justify treating them differently than our neighbor or family member in a business transaction. Someone's father or mother or son or daughter, somewhere, picked that avocado in order to provide care for someone, and treating it as a commodity rather than a relational good treats that human being—even one we do not know—as less than a son or daughter of God. It is our inability to recognize the people in the global supply chain as sons and daughters of God that allows us to treat these relational goods as mere commodities. The difficulty in a global economy is that we do not know the people who grow our food and make the products that we purchase, and we care only about the people we know. In the example of the homeowners association, it was easier to see the impact of personal choices on the larger community. In a global market, it is more difficult to see the impact of our choices on unknown strangers.

Infants do not seem to see other people as real—as unique individuals. There is a developmental phase when most children begin to recognize that their moms are “real”—someone who is not just “mom,” but a unique individual with other relationships and activities and hopes and dreams.²⁰ As the child continues to develop and her awareness

20. James N. Butcher and Charles D. Spielberger, eds., *Advances in Personality Assessment: Volume 8* (New York: Routledge, 2013). Chapter 3 of Eugene C. Roehlkepartain and others, eds., *The Handbook of Spiritual Development in Childhood and Adolescence* (Thousand Oaks, Calif.: Sage Publications, 2006), “Stages of Faith From Infancy Through Adolescence: Reflections on Three Decades of Faith Development Theory,” summarizes child-development theory and talks about the naïve cognitive egocentrism of toddlerhood and early childhood that gives way to simple perspective taking and growing interiority awareness of first the self and then others. Generally during

expands beyond her parents and family, she may come to recognize that the neighbors are real too. Next, she may come to see strangers on the street as potentially real. Ultimately, as a young adult, perhaps after serving an LDS mission, she may come to recognize that people she will never have an opportunity to meet are just as real to God as she is, and that learning to see as God does means recognizing that all people are real and in need of care. Some people may never see other people as real. Most of us tend to care only about the people we know, the people we recognize as real—especially if those “other people” are different from us in any way. Yet that is one of the reasons we are here—to learn to care about others the way God does. We fail. We have poor imaginations and are incredibly self-centered. We are amazingly good at rationalizing our choices and justifying our focus on ourselves, our families, and the communities of people that are like us. But that is one reason why Christ atoned for our sins and why we have the opportunity to change and try again.

As the Church continues down the path of globalization, we will have more and more opportunities to care for people who are different, sometimes very different, from us. The goal is to recognize the often hidden similarities and appreciate the often obvious differences. As one woman writing about Relief Society members in Hong Kong said, “Decolonizing our minds as a global community of Latter-day Saints means being cognizant of both where we can find common cause with each other and where we are different and in need of highly individualized ministry that acknowledges and compensates for historical or structural asymmetry.”²¹ Somehow we need to see beyond our immediate communities to the people of the world that God loves and cares for and, like a good parent, is waiting for us to recognize as real.

One reason we do not recognize others as real is because they are so far away. For example, during the first months of the coronavirus pandemic in 2020,²² the response in the United States was “characterized

adolescence and beyond, we see interpersonal perspective taking and the emergence of mutual interpersonal perspective taking—or, in the language of care ethics, recognizing that other people are real. See pages 37–40.

21. Stacilee Ford, “Sister Acts: Relief Society and Flexible Citizenship in Hong Kong,” in *Decolonizing Mormonism: Approaching a Postcolonial Zion*, ed. Gina Colvin and Joanna Brooks (Salt Lake City: University of Utah Press, 2018), 224.

22. Although the novel coronavirus (officially named SARS-CoV-2) that causes COVID-19 was identified in 2019 (hence the identifier COVID-19), the World Health Organization did not declare a worldwide pandemic until March 11, 2020.

by antimask behavior, antivaccine beliefs, conspiracy theories about the origins of COVID-19, and vocal support by elected officials for unproven therapies.”²³ It did not impact many of the people in the United States directly, and few knew people who were sick. Thousands of people overseas were dying, but they were far away and reported by news sources that some Americans viewed as untrustworthy, and therefore those deaths were not recognized as real. Those deaths overseas to people in different countries were not as real as the immediate economic impact of shelter-in-place public policies. What was real were their shuttered small businesses and the impact on their finances from the economic shutdowns. When faced with the possible inability to buy groceries for their families, concern for strangers thousands of miles away was much less of a priority—not even a consideration. The issue is that while we have a difficult time caring about people who are different from us, who are not as real to us as our families and our neighbors, that is exactly what we are called to do as followers of Christ—care for the strangers we will never meet.

In the Book of Mormon, when Christ comes to the Nephites after his death, he tells them that he has other people to teach and visit (Jacob 5; 3 Ne. 15). The Nephites are not the only people who worship him and who want to sit at his feet and learn from him. In that time period, the small communities scattered across the world did not impact each other. Alma’s choices did not impact Cicero and Virgil, who lived during approximately the same time period on the other side of the planet. During the age of globalization, however, my choices in the United States impact the lives of people in China and India whom I will never meet. Unlike Alma’s choices, our public-policy decisions in the United States impact the lives of everyone across the globe. It is easy to rationalize our choices as market decisions regarding commodities and thus ignore their impact on others. However, that rationalizing denies the fact that those others are also our brothers and sisters.

Core Principles of an Ethics of Care

In addition to the focus on relationships, there are several core principles of an ethics of care that distinguish it in emphasis from the more traditional approaches to ethics. Primarily, *context matters*. The circumstances of our choices impact the morality of those choices because

23. Bruce L. Miller, “Science Denial and COVID Conspiracy Theories: Potential Neurological Mechanisms and Possible Responses,” *JAMA* 324, no. 22 (2020): 2255–56.

ethical choices do not occur in a vacuum. The ethics of care suggests that ethical choices may be influenced by the circumstances in which they are made. While this may lead to charges of ethical relativism, critiques of ethical relativism allow for moral objectivism, which recognizes similarities in human nature and that moral principles are functions of human needs and interests.²⁴ For example, while parenting styles may differ across cultures and even within cultures, the moral principle of nurturing those within our care crosses all cultural boundaries. Historian Jared Diamond told of an observer watching a small child play with a sharp knife. The observer watched in concern as the child swung the nine-inch kitchen knife around his body, only to watch the child drop the knife and the mother reach around, retrieve the knife, and hand it back to the child.²⁵ Such a permissive attitude toward sharp objects would be rare in U.S. culture but is normal among the Piraha Indians in the Amazon. Both cultures share the moral principle of nurturing those within our care but demonstrate that nurturing care differently—one protecting children from risk and the other encouraging children to learn to assess personal risk. Across all cultures, given the similarities in human nature and needs, we could expect to observe areas of widespread agreement yet often find specific areas of disagreement.

The need to include contextual difference in moral systems has led to several philosophers and ethicists developing alternative interpretations of deontology, or rule-based ethics. For example, one philosopher suggested that rules of moral salience learned during the development of moral agents in specific communities may “alter our idea of how an agent perceives situations that require moral judgment.”²⁶ In other words, cultural differences in child-rearing practices may lead to different rules of moral salience. Attitudes toward children playing with knives may have ethical connotations in some cultures that do not exist in others.

Another ethicist has identified a system of common morality that includes both moral rules—actions that are immoral unless justified (for example, killing or lying)—and moral ideals, or actions that are

24. Louis P. Pojman, *Ethics: Discovering Right and Wrong* (Boston: Wadsworth, 2001), 14–44.

25. Jared Diamond, *The World until Yesterday: What Can We Learn from Traditional Societies?* (New York: Viking Penguin, 2012), 198.

26. Barbara Herman, “The Practice of Moral Judgment,” *Journal of Philosophy* 82, no. 8 (1985): 422, <https://doi.org/10.2307/2026397>.

often morally good (for example, relieving suffering or promoting flourishing).²⁷ While the ethicist argues that moral rules are universal—unless the context is such that moral agents would agree otherwise—moral ideals do not have the same consensus. Similarly, the ethics of care position that context matters is not an appeal to moral relativity but an observation that the application within a community of shared beliefs (such as gun use) to common moral principles (for example, do not kill) may result in different ethical actions depending on the community—or context—in which they occur.

One example that illustrates how an ethics of care can transcend cultural differences is found in how different cultures and states approach gun ownership. A universal standard would recommend a single policy regardless of cultural differences. However, the development of gunpowder was followed by disparities between cultures and individuals with access to gunpowder and those without, as documented by historian Marshall Hodgson,²⁸ as well as later playing a key role in European dominance of the New World. States quickly began to regulate the availability and use of such powerful weapons. For example, most European and Middle Eastern countries do not allow citizens to own guns. Yet during the U.S. Revolutionary War, the revolutionaries established a decentralized locus of power through manufacturing and extensive access to weaponry, which was later solidified in the Second Amendment to the U.S. Constitution. As a consequence, in the United States, politicians regularly debate the merits of various gun regulations where the argument based on Second Amendment rights is often mediated by an ethics of care perspective. For example, gun-control arguments emphasizing the frequency with which improperly stored guns are used to commit suicide or to kill a family member suggest that a common concern of caring for others may be able to transcend the cultural differences toward gun ownership within the United States as well as between nations.

A second principle in the ethics of care is that as human beings, we all have multiple caring responsibilities—to ourselves, our families, our larger communities—and ethical decision-making requires us to consider those relationships and our responsibilities to others in our

27. Gert, *Common Morality*, 23.

28. Marshall G. S. Hodgson, *The Venture of Islam: Conscience and History in a World Civilization*, 3 vols. (Chicago: University of Chicago Press, 1974), 3:16.

choices and prioritizing. *Balancing those caring responsibilities* requires careful judgement, practice, and even failure. We cannot take care of everyone all the time the way we wish we could. So, we make decisions based on the best available information at the time. Sometimes, in hindsight, we wish we had made a different choice. Often, we wish we had known then what we know now. However, learning to make those moral choices with limited information and practicing them over time, failing and trying again or doing something different, is how we create ourselves over the course of our lives—a process of becoming closer to our ideal selves.

Another core principle of the ethics of care is the focus on a *human ideal*. There is a consensus across cultures and time with respect to ideal character and personal virtues, as documented by psychologists Christopher Peterson and Martin Seligman.²⁹ Among their primary sources were Aristotle and other Greek philosophers who regarded virtues as the character traits that make someone a good person. Aristotle argued that people of high moral character possessed both intellectual virtues such as prudence and wisdom and moral virtues such as courage, generosity, and justice. He also taught that persons of high moral character engage in virtuous activities that promote happiness.³⁰ While there may be nuanced differences in interpretation, most people have a desire to develop virtues such as courage, integrity, wisdom, and compassion—virtues that are demonstrated primarily in our relationships to others and the ethical choices we make that impact those relationships. The desire to develop those virtues reveals a core value—the desire to become your ideal self.

Evaluating any moral situation or individual character requires both the contextual facts and the values illustrated by a human ideal, and neither is independent of the other. True objectivity is not value neutral. It assumes a value orientation as a base of reference.³¹ For example, a physician's assessment of health is made in the context of a healthy ideal and with the desire to promote that ideal. Without the knowledge of the characteristics of a healthy individual or healthy ideal, a physician would not be able to diagnose an unhealthy individual because there would be

29. Christopher Peterson and Martin E. P. Seligman, *Character Strengths and Virtues: A Handbook and Classification* (Washington, D.C.: American Psychological Association; New York: Oxford University Press, 2004), 33–89.

30. Aristotle, *Nicomachean Ethics* II.1.1103b(1), II.3.1105a(10).

31. Groenhout, *Connected Lives*, 122–24.

no basis for comparison. Similarly, without a sense of an ideal character, or the ideal person we would like to become or would like our children to become, we have no means of assessing the gap between our current state of being and the ideal self we are moving toward.

A related principle is that of *simultaneity*. It is crucial that as parents, teachers, and nurturers, we simultaneously hold both the future ideal and the present reality of the one cared for in our minds as we nurture and teach. In other words, we simultaneously acknowledge where the child is currently in her development and recognize the adult she could become. The nurturing task is to aid her movement from her current place toward that ideal. In some situations, we recognize that the child may never become that “ideal” adult due to physical or mental limitations or other circumstances. However, we still acknowledge the human ideal she could have become without those inherent constraints. In order to care for and nurture her, the carer needs to be able to hold both the current reality of the child and the human ideal simultaneously.³²

Recognizing that many of the members of our communities are not fully developed adults capable of making rational moral decisions is a fundamental principle of the ethics of care. Communities—whether small families or large nations—have a responsibility to *protect the vulnerable* among us. Because of the responsibility to protect the vulnerable, the ethics of care is *critical of violence* and its potentially adverse effects both on individuals and the relationships required for those individuals to flourish. The use of violence diminishes us ethically³³ because rather than nurturing individuals and relationships, violence destroys them.

A final core principle of an ethics of care is the desire to *create systems and institutions that prioritize nurturing individuals* rather than the strategic pursuit of money and power and their attendant use.³⁴ Many people and institutions justify their pursuit of power by their intent to use that power to help the vulnerable or provide for their family. For some, that may be true. However, for many the pursuit of power for the sake of power is clearly the goal. In his book *The Second Mountain*, David Brooks describes the difference between what he calls the first mountain and the second mountain with respect to personal development. The first mountain is

32. Groenhout, *Connected Lives*, 43–48.

33. Sara Ruddick, *Maternal Thinking: Toward a Politics of Peace* (Boston: Beacon Press, 1989), 137–39.

34. Joan C. Tronto, *Caring Democracy: Markets, Equality, and Justice* (New York: New York University Press, 2013), 170.

about building up the ego and defining the self—ambitious, strategic, independent. The second mountain, on the other hand, is about shedding the ego and losing the self—relational, intimate, and transformative.³⁵ Second-mountain people and institutions nurture and transform others.

Examples of Moral Issues

One of the most popular examples used to illustrate ethical and moral decision-making is the decision a woman may make to either bear a child or have an abortion. Frequently, when circumstances necessitating this decision arise, we turn to religion for guidance, but the issue of whether or not a fetus is created life is a nonmoral belief, and for members of the Church it is not settled doctrine.³⁶ One could characterize an abortion dilemma as caring for either the woman or the fetus, but clearly caring for both is important. Acknowledging competing responsibilities is a fundamental part of an ethics of care, as well as the context of the moral decision. “The rightness or wrongness of abortion decisions is not a matter of conformity to independently existing human/political rights or moral rules, but derives instead from the character or motivation that lies behind such decisions.”³⁷ Motivation matters to morality, and therefore context matters. An abortion in the case of rape or incest is morally different from an abortion for convenience. This abortion example illustrates that balancing multiple responsibilities, considering context, moving toward a human ideal, protecting the vulnerable, respecting agency, and limiting violence are all factors to be considered in making ethical choices—illustrating that the process of making an ethical decision is as important as the final choice. Because the process of making a specific choice is as important as the resulting law or rule, it is difficult to make a law that takes into account the immense variety of possible contexts. The obstacles to establishing a process of public decision-making that acknowledges the myriad of conflating factors in

35. David Brooks, *The Second Mountain: The Quest for a Moral Life* (New York: Random House, 2019), xvi.

36. Donna L. Bowen, “Respect for Life: Abortion in Islam and The Church of Jesus Christ of Latter-day Saints,” *BYU Studies* 40, no. 4 (2001): 188–89; Dallin H. Oaks, “Weightier Matters,” *Ensign* 31, no. 1 (January 2001): 13–15. For the Church’s official position on abortion, see *General Handbook: Serving in The Church of Jesus Christ of Latter-day Saints*, 38.6.1, <https://www.churchofjesuschrist.org/study/manual/general-handbook/38-church-policies-and-guidelines?lang=eng#title98>.

37. Michael Slote, *The Ethics of Care and Empathy* (New York: Routledge, 2007), 17.

such a complex issue could be why the United States has difficulty establishing and maintaining a consistent abortion policy.

Other examples of different understandings of moral issues are illustrated in a recent study of members of the Church published in *The Next Mormons*.³⁸ Jana Riess reports on differences among members with respect to their positions on moral issues and provides an excellent opportunity for considering moral choices with respect to age cohorts and life experiences. While the study is descriptive, and therefore causal relationships cannot be concluded, the findings may shed some light on what different age groups consider in their moral reasoning with respect to issues regarding both family relationships and larger societal responsibilities.

Family Relationships

Interestingly, according to Riess, more millennials (ages 18–36 when surveyed in 2016) reported that getting a divorce was morally wrong than older cohorts. Yet simultaneously, those same millennials were less likely than the older cohorts to report that having an abortion, an affair, a baby outside of marriage, more than one wife, or a “sex change” was morally wrong.³⁹ While the data do not support causal relationships and are merely descriptive, Riess suggests that the millennials’ views on divorce could be influenced by the dramatic increase in the United States’ divorce rate during their parents’ generation.⁴⁰ Or it could merely be the idealism of youth, since many haven’t experienced the realities that many divorcing couples face. Regardless, while the descriptive generational differences may be a result of being in different phases of the life course, one possibility is that the generational differences could also follow from changes in how millennials think about morality—less focus on absolutes and more emphasis on nurturing others.

Each of the generational differences mentioned above—even the anomalous difference where more millennials felt that getting a divorce was morally wrong than older generations—suggests that millennials feel taking care of other people is a priority over absolute rules. Marriage is a commitment to take care of another person and any children

38. Jana Riess, *The Next Mormons: How Millennials Are Changing the LDS Church* (New York: Oxford University Press, 2019).

39. Riess, *Next Mormons*, 179–81.

40. Riess, *Next Mormons*, 180.

brought into that family, and divorce ruptures that commitment to care. The generational differences in moral judgement with respect to having an affair, a baby outside of marriage, more than one wife, and even a “sex change” can all be understood in terms of a greater emphasis on caring for and taking care of individuals rather than showing respect for societal norms and institutions. While this interpretation is not definitive given the limited data provided, it is an illustration that a discussion of caring responsibilities may provide a bridge for generations at odds with each other with respect to their different perspectives on ethical and moral choices. Perhaps the language of caring and responsibility promoted by the ethics of care may facilitate dialogue and understanding among people from different generations.

After all, what are the moral issues here? Where is the morality in a marriage and extended family relationships? Across all societies, religions, and cultures, marriage is at its core a social commitment to take care of another person and any offspring resulting from the union. Given that many people marry before they even know themselves very well, much less are capable of truly knowing the person they marry, that is a significant commitment. Yet it is in the commitment to care and the ensuing opportunities to practice caretaking that we are stretched and grow to become closer to our ideal selves. Somehow, in the balancing between care of others and care of self, we make choices and decisions that create ourselves and ideally move toward increasing goodness—toward the human ideal.

It is the ethics of care that encourages us to look beyond the hyper-individualism of the twenty-first century to consider the others in our communities of care and identity and our responsibilities to them. The individual rights emphasized by our social traditions contribute to the hyperindividualism, leaving us fighting for personal rights rather than fulfilling responsibilities to the communities we have committed to, such as family, friends, colleagues, clients, patients, students, ward families, nations, and states. On the other hand, caring in terms of fulfilling responsibilities to our larger communities requires broader thinking than just personal responsibility for one’s own actions. It requires that people know “where they come from, to whom and to what they are related, and how.”⁴¹ Without that broader thinking and awareness, we become myopic and focus just on ourselves and our immediate

41. Tronto, *Caring Democracy*, 120.

communities, ignoring “the ways in which this ‘we’ . . . is the result of a confluence of circumstances as well as individual (or familial) initiative.”⁴² The ethics of care encourages us to see beyond our small communities to the larger communities that we are part of and that our personal choices impact.

One of the core failures of any market economy is the creation of externalities—or an outcome created by a person or institution that makes others better or worse off without their permission. Pollution is probably the most common example of a negative externality, and pollination by bees is an example of a positive externality. The role of government and public policy is often seen as stepping in to control or account for externalities, yet we are finding those institutions insufficient with respect to many externalities, such as climate change and pollution. However, when we care about the other people in our communities, we effectively internalize their well-being and modify the externalities our personal and public choices create. Most of the important social issues of our day are externalities created by people who are unaware and uncaring of the impact of their choices on others. However, since the financial crisis of 2008, there is a growing sense that “markets have become detached from morals”⁴³ and that the logic and morals illustrated by our practices of buying and selling goods and services have sidelined the pursuit of the public good as described in the U.S. Constitution. There is a growing sense that the language of caring for others may be a bridge to bring diverse groups of people together to discuss how our collective choices impact the strangers in our world. The ethics of care requires that we consider the impact of our choices on not only our family and close communities but also on the strangers in the world whom we will never know.

Societal Responsibilities

In addition to what might be considered individual moral choices, Riess asks specifically about societal responsibilities, or community issues that we address politically at the state or national level, by asking respondents

42. Tronto, *Caring Democracy*, 120.

43. Michael Sandel, *What Money Can't Buy: The Moral Limits of Markets* (New York: Farrar, Straus and Giroux, 2012), 8.

to rank their views on some top issues facing America. Again, there are interesting differences between millennials and their older cohorts.⁴⁴

For example, more than 30 percent of the millennials surveyed, both current and former Church members, responded that the top issue facing the United States today is poverty, hunger, and homelessness. Among older Latter-day Saints, the top issues were moral or religious decline and terrorism. One of the core principles of an ethics of care is that all systems and institutions should be focused on nurturing individuals rather than pursuing and using power. In other words, in prioritizing the core governmental responsibilities of military and police protection compared to social services, or nurturing citizens, millennials seem to see social services as a higher priority. Economic inequality, police brutality, inadequate health care, and racism were all reported as more important concerns by millennials than by earlier generations among current members of the Church. Among former Church members, health care was a higher priority for earlier generations than for millennials (possibly because older people generally have more health concerns), but otherwise we see the same trends in governmental priorities as expressed by current Church members. In other words, when asked about a list of issues we are facing as a nation, millennials reported that issues related to nurturing individuals (such as poverty, hunger, homelessness, economic inequality, racism, police brutality, and lack of health care) were more important to them than these same issues were to older respondents, who prioritized general issues such as terrorism, moral/religious decline, high taxes, and an ineffective political system.

The ethics of care makes it more difficult to avoid personal responsibilities, which is a growing problem in the United States, where the political environment is focused on individual rights rather than responsibilities to specific others and the common good.⁴⁵ One political scientist suggests that a core function of democracies is to allocate caring responsibilities and to ensure that all citizens are capable of providing care.⁴⁶ After all, who are we responsible to care for in our smaller communities of care? Primarily, our families and those we have committed to care for, but what about our larger communities that are filled with strangers to us but not to God?

44. Riess, *Next Mormons*, 177.

45. Mary Ann Glendon, *Rights Talk: The Impoverishment of Political Discourse* (Chicago: University of Chicago Press, 1991), 76, 110–13.

46. Tronto, *Caring Democracy*, x–xii.

Applied Gospel Ethics: What Are We Trying to Accomplish?

One of the key questions we ask ourselves is, Why am I here? What is it that I am trying to accomplish—both as an individual and as a member of a community of Saints? One of the core tenets of the gospel of Jesus Christ is that we believe in personal development and growth. We believe that as a loving father, God’s purpose is “to bring to pass the immortality and eternal life of [all people]” (Moses 1:39). In other words, God desires the personal development of each individual. In our attempts to become like Christ, not only are we personally trying to become like him, but, because human beings cannot develop and grow without the care provided by communities, we are also trying to create nurturing communities. As followers of Christ, we seek to develop communities—families, wards, neighborhoods, cities, nations, and even the world—that encourage and enable personal growth by building caring relationships and facilitating the development of children to move beyond the self-absorption of childhood into first caring about, then caring for, and finally taking care of others in their communities.

The core purpose of the gospel of Jesus Christ is to facilitate this process of personal development—both in ourselves and in others. Hugh Nibley describes the process in *Approaching Zion*: “As an unceasing stream of children enter the scene, they must learn it all from the beginning, and for them it is as fresh and new as the world in the creation, and nothing is more delightful to their elders than to teach them and watch them learn and grow while the teachers themselves discover wonder upon wonder, more than a lifetime can contain, both in the world around them and in the contemplative depths of their own minds.”⁴⁷ As we cultivate communities and environments that facilitate personal development, we recognize that it is the networks of caring relationships in our families, wards, and neighborhoods that “enable people of different states and cultures to live in peace, to respect each other’s rights, to care together for their environments, and to improve the lives of their children.”⁴⁸ Expanding those networks of caring relationships to include people we may never meet is what we are asked to do as Christians and followers of Christ.

47. Hugh Nibley, *Approaching Zion*, ed. Don E. Norton, The Collected Works of Hugh Nibley, vol. 9 (Salt Lake City: Deseret Book; Provo, Utah: Foundation for Ancient Research and Mormon Studies, 1989), 452.

48. Held, *Ethics of Care*, 168.

While Christian ethics may guide our personal choices, virtue ethics, deontology, and consequentialism are more likely to guide our public choices, and they assume the existence of networks of caring relationships. When we do not prioritize caring relationships, each of us is inclined to maximize our own personal interests—which often translates into doing whatever is necessary to accumulate money and its popular attendants, power and prestige—an outcome neither anticipated nor encouraged by traditional approaches to ethics but nonetheless observable in the public culture of American hyperindividualism. Many of us justify, or rationalize, accumulating money, power, and prestige to provide for our families and benefit society. But both the Old and the New Testament teach the fundamental principle of responsibility to care for the stranger, pushing us as individuals away from our limited circles of care into an extended care for all of God’s children and all of God’s creation. The gospel admonition to care for others is not limited to our family and those we choose to care about and take care of. Balancing those caring responsibilities is a core part of the ethics of care. One of the key questions we ask ourselves is how to balance the priorities of caring for ourselves, the people in our closest communities such as our families and friends, slightly larger communities such as wards and neighborhoods, and the many larger communities of strangers—strangers to us, but not to Christ.

The coronavirus pandemic of 2020 has given us an opportunity to model care for strangers in our communities. Dr. Emily Landon, chief infectious disease epidemiologist at the University of Chicago Medicine, spoke at a press conference with Illinois governor J. B. Pritzker on March 21, 2020, where the governor announced a stay-at-home order. As Dr. Landon talked about the need for everyone to stay home and self-quarantine, she said, “The numbers you see today in the news are the people who got sick a week ago. And there are so many people who got sick today who haven’t even noticed that they got sick yet. They picked up the virus and it’ll take a week to see that show in our numbers. Waiting for hospitals to be overwhelmed will leave the following week’s patients with nowhere to go. In short, without taking drastic measures, the healthy and optimistic among us will doom the vulnerable.”⁴⁹ Because of the

49. Quoted in Molly Walsh, “Chicago Doctor’s Blunt Speech about COVID-19 Hits Home across the Country; Read Her Full Speech,” 5Chicago, March 21, 2020, <https://www.nbcchicago.com/news/local/chicago-doctors-blunt-speech-about-covid-19-hit-home-across-the-country-read-her-full-speech/2241815/>.

fast-spreading virus, our medical system did not have the ability to take care of the number of people needing medical assistance. The only way to slow the rate of infection was for people to stay home and not interact with each other. Yet even with the universal consensus among infectious disease experts, beaches and other public places were crowded with people ignoring their ability to carry the virus to their elderly and immunocompromised friends and family members, as well as the strangers who were not yet “real” to them. Blind to their own condition—exposed or not—others took action and complied with stay-at-home orders and social distancing requests. As Dr. David Kessler, professor of epidemiology, said, we need “a new clause in our social contract. . . . Just as we obey the most basic laws in order to protect all of us, everyone needs to accept responsibility for not only their circle of friends, family and colleagues, but for the wider community. Our collective behavior will be the primary determinant of whether we can keep this virus in check. We each hold the health of our neighbors in our hands.”⁵⁰ The coronavirus pandemic that began in 2020 is an opportunity to take care of the strangers in our communities, yet because we often do not consider the consequences of our choices on strangers, many have refused to do the things necessary to take care of those at risk. On the other hand, medical personnel, scientists, and some manufacturers exercised a generosity of spirit, or virtue, by deploying unique and irreplaceable assets in working to save others, thus winning the love and respect of their larger communities.⁵¹

When rationalizing our personal and political choices, it is possible to use almost any ethical approach—after all, we are smart people, and we can justify almost any desired course of action—even to the distortion of those ethical approaches. Yet, without caring relationships as the foundation for our ethical choices, the other ethical approaches seem nonsensical and can be more easily twisted to support rationalizing our self-absorbed behaviors. What is the point of promoting the greatest good for the greatest number if we care only about ourselves and our immediate family? What is the point of following ethical rules if not to support a network of caring relationships? Is it possible that the other ethical approaches simply assume the network of relationships

50. David A. Kessler, “We Need a New Social Contract for the Coronavirus,” *New York Times*, April 20, 2020, <https://www.nytimes.com/2020/04/20/opinion/coronavirus-social-contract.html>.

51. Rebecca Goldstein, “What Would Aristotle Do in a Pandemic?” *Wall Street Journal*, April 16, 2020, <https://www.wsj.com/articles/what-would-aristotle-do-in-a-pandemic-11587048934>.

and caring that the ethics of care makes explicit—an earlier version of what we call implicit biases today?

Adam Smith, in his book *The Theory of Moral Sentiments*, suggests that morals and ethics are taught through the medium of relationships by instilling a sense of propriety in each of us by means of developing an impartial spectator to remind us of community norms.⁵² After all, according to American philosopher Marilyn Friedman, people “are fundamentally social beings who develop the competency of autonomy . . . in a context of values, meanings, and modes of self-reflection that cannot exist except as constituted by social practices. . . . It is now well recognized that our reflective capacities and our very identities are always at least partly constituted by communal traditions and norms.”⁵³ Smith suggests we naturally use these norms as an internal voice—asking how our neighbors would view a certain choice—to determine what is moral and ethical.⁵⁴ Children learn appropriate behavior in their communities by watching others. While some may argue that this example illustrates the cultural relativity of ethics and morals, it is the ethics of care that recognizes that the commonality of caring has the potential to transcend our cultural and societal differences. It is our shared goal of taking care of others that allows us to see beyond cultural and societal differences—such as the tradition of stoning women caught in adultery during the time of Christ. We may disagree on how to care for others, but we can agree that as followers of Christ we are all called to serve, minister to, and care for others in our communities. A shared commitment to the goal of caring for and nurturing others will change the conversation, help us recognize our responsibility to others in our various communities, and possibly even allow us to acknowledge cultural and societal variations in our different approaches to caring.

Conclusion

When I see the social problems of society, I find that many of them stem from selfishness and a lack of consideration for others. As Parker J. Palmer said, “When we forget that politics is about weaving a fabric of compassion and justice on which everyone can depend, the first to suffer are the most vulnerable among us—our children, the elderly, the

52. Adam Smith, *The Theory of Moral Sentiments*, ed. D. D. Raphael and A. L. Macfie (London: Oxford University Press, 1976), 19–26, I.i.4(1)–I.i.5(10).

53. Quoted in Held, *Ethics of Care*, 47.

54. Smith, *Theory of Moral Sentiments*, 19–26, I.i.4(1)–I.i.5(10).

mentally ill, the poor, and the homeless. As they suffer, so does the integrity of our democracy.”⁵⁵ In our desire to be ethical Christians, our first obligation is to care for the people around us, to actively contribute to a community of caring, and to create as best we can a society where the care of others is a clear priority; recognizing, of course, that self-care is equally essential. “Our lonely eternal selves can only flower into full selfhood in relationship with other eternal selves. . . . Those relationships require that we curb our radical egotism in obedience and self-sacrifice, even at the cost of what seems our precious integrity. They require that we enter into genuine dialogue with other selves, appreciate their sometimes contradictory integrity, [and] learn to speak the truth, but in love.”⁵⁶ Individuals grow and develop within networks of relationships, and as adults our primary responsibility is to create communities where all children can thrive. Making ethical choices that facilitate and build networks of care in all of our communities is the path that Christ modeled for us. In today’s world, what can we do as individuals to move along the path of caring not just for our own families and neighborhoods but also through our public policy choices that impact the strangers that are not yet real to us but have always been real to Christ?

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55. Parker J. Palmer, *Healing the Heart of Democracy: The Courage to Create a Politics Worthy of the Human Spirit* (San Francisco: Jossey-Bass, 2011), dedication page.

56. Eugene England, *Dialogues with Myself: Personal Essays on Mormon Experience* (Midvale, Utah: Orion Books, 1984), x–xi.