In my experience teaching, researching and practicing dance, I have seen how partnering is often idealized in a way that unquestioningly ascribes care to the act of dancing together itself. I believe dance, as a mode of physical interaction, offers opportunities to care and be cared for, but this does not mean that dancers will, in fact, care. There may be no moral motivation underlying a lift, dip or intricate sequence of coordinated action. Choreographic scores may (knowingly or not) encourage merely perfunctory movements that are a poor simulacrum to care. Moreover, the caring that is expressed through dance need not transfer to other walks of life. I am not alone in knowing spectacularly talented dancers whose behaviour off the dance floor is far from ethical – from the arrogant and petty to the flagrant abuse that plagues institutions of art and culture.

My writing here considers how dance can illuminate both the acts and sentiments of care, conveying particular ethical orientations that trouble straightforward, absolute moral reasoning. At the core of care is an attention to satisfying needs (Koehn 1998; Noddings 2013; Tronto 2013), some of which are basic to survival, such as shelter and sustenance. I draw on Maurice Hamington’s characterization of care, in which he states:

[Care denotes an approach to personal and social morality that shifts ethical considerations to context, relationships, and affective knowledge in a manner that can be fully understood only if care’s embodied dimension is recognized. Care is committed to the flourishing and growth of individuals yet acknowledges our interconnectedness and interdependence. (Hamington 2004: 3)

Taking a generic approach to partnering, I extend Hamington’s theoretical framing to consider what it means for the aesthetic ends of partnering to be morally motivated from a position of care. Before moving forward into the dancing situation, there are several tensions in understanding care that are worth mentioning here. One is a slippage in temporality, which distinguishes reactive care, in tending to injury after inciting incidents, from proactive care, in tending to possible futures prior to inciting incidents. Another tension arises in characterization, which distinguishes descriptive care, an action (or series of actions) that attend to the needs of others, from normative care, which delineates the quality of action (for example, insensitive and inattentive to sensitive and attentive). Normative care further distinguishes between that which ought to be (necessary) and that which can be (aspirational). A third tension occurs when considering originating motivations of care, which distinguishes altruism, care driven by one’s (selfish) individual desires, from relationality, care that is driven by, in and through relationships (Stone 2008). This third tension rests on an idea that adequate accounts of care should orient us to relationships between entities, rather than portraying care as a discrete, independent trait. Taken together, these tensions illuminate how care resists fixed definitions.

The article that follows frames an enquiry into the relation between ethics and aesthetics of care, drawn from my performance research on partnering. I will ground into dance technique, demonstrating that care requires skills at a threshold of ability and attitude. I will frame a zone between technique and competence, foregrounding care in dance as both a technical and ethical issue. I will consider the necessary conditions by which dancing together can manifest care, rather than suggest blanketly that it always does or even that it should. To make this argument, I will describe and analyse Considered Care, a duet I created in the autumn of 2021. This performance research project provided the material from which to consider the concept of need, a condition of care in a dancing situation. I will conclude by considering the relationship...
between needs and trust in conceptualizing care within partnering.

**CONSIDERED CARE**

In the autumn of 2021, amidst the global COVID-19 pandemic, I was awarded a seed grant from my university in collaboration with Professor of Law Dr Ari Waldman, to engage in creative practice research on care. Waldman's work on trust, privacy, power and disclosure in the law (2018, 2021) was particularly compelling as a point of entry into considering the physical components of ethical relation. Our conversations circled around how dance can illuminate facets of care that are otherwise difficult to materialize, and further, embody.

The choreographic research was physically rooted in a partnering study I developed called 'levering' (fig. 1). As a study on physical interaction, levering encompasses a need to negotiate tension and physical resistance with sensitive, focused attention on self-in-relation. The study presents a technical problem in which partners must maintain an interdependent pull with one or both arms to negotiate complex balances and coordinated initiation points between peripheral systems (hands, arms), secondary systems (lats, serratus) and core (abdomen, pelvis). The precariousness introduced by the technical problem of levering opens an ethical issue of attending responsibly to the needs of the other. Thus, levering creates the space for continuous, ongoing enquiry on care.

In an effort to move into a more poetic space, I applied my partnering research into the creation of *Considered Care*, a duet for myself and Boston Ballet artist My’kal Stromile. I was drawn to the labour of manifesting care through the seemingly violent action of resisting one another. Rehearsals focused on collaborative enquiry and play, creating situations in which the effortful physical exertion of sustaining an eccentric pull necessitated attention to maintain interdependent balance and coordination. Actively attending to this need became a key choreographic constraint, fusing the moral motivation of caring for the other into the dyadic action. I crafted two maxims to guide our action: 1) *resist to support*, and 2) *depend to be free*. The first maxim encourages awareness of technical competence, orienting to how the labour of physical resistance and tension materializes a foundation from which to support each other bidirectionally. The second maxim draws attention to the ethical dimensions, reinforcing how dependence allows for a greater range of motion. Done well, levering provides an aesthetic freedom that liberates each agent to move in ways that are impossible independently. Throughout the piece, each of us fluidly alternates between offering and receiving physical resistance, enabling movement from a relatively stable point of contact in order to exercise freedom through a wide range of motion in the spine, pelvis, arms and legs. Too much tension will be unsustainable, just as too little will not produce enough support for the counterbalance.

*Considered Care* features a sequenced choreographic score with elements of improvisation in temporality, spatiality and effort. The timing of balances and coordinated actions is negotiated in real time by the dancers, playing a key role in the manifestation of care. Some actions need to take longer to ensure that partners return from an extreme position into a stable one. The labour of manifesting care in and through physical resistance draws attention to effort, which may manifest in the form of physical exertion as well as mental endurance. To care may be to linger for an extra moment to ensure that a partner is on balance before moving into a more extreme position. By responding only to the physical demands of, for example, balance and resistance, dancers exhibit some care. It is thus effectively impossible to just 'go through the motions'. Tensions in care quickly become salient here – the normative dimensions in how action is performed matters, as well as whether one is
acting proactively to maintain the relationship. Importantly, care may easily be conflated with individual concerns. This distinction appears often throughout the literature on care ethics in the difference between ‘care for x’ and ‘care about x’. That one partner should be concerned about how they look or move in ways that pursue individual pleasure is not, in and of itself, a bad thing. Concern about self is already ethically charged territory. But when that concern translates to neglecting one’s partner, then we run into morally problematic terrain.

One important thread that came up often was the distinction between the needs of our partnership and the individual needs of each partner. Conflicting situations emerged, in which what was right for the individual was not what was right for the partnership. For example, there were moments in which one of us felt we needed more physical support than was being offered, in order to exercise freedom within the interdependence. Sometimes the tension one partner felt was necessary resulted in impeding the movement of the anchoring partner, such that the affordances of the partnership weakened. A key discovery was that by offering more physical support to the other, one faces the risk of becoming so precarious that both fall over. We discussed the necessity of adjusting expectations of support in order not to sacrifice the possibilities of the partnership, opening up subtle attention to how we were able to express care for each other rather than merely one for the other. This points back to the significance of competence. As political philosopher Joan Tronto argues, ‘to be competent to care, given one’s caring responsibilities, is not simply a technical issue, but a moral one’ (2013: 35).

The interdependence in levering is what gives dancers the freedom to do things they otherwise could not do. This is a result of the physics of the interactions. It has a peculiar consequence – dancers cannot perform the dance without exhibiting care, whatever their moral attitudes. They could even hate each other off-stage but recognize that the dance depends on their caring about and attentiveness to the relation of the two bodies to each other in the physical interaction. This makes the care embodied, but the moral dimension seems to evaporate. It does not follow that the dancers can do the dance automatically. But what does follow is that the attentiveness to the partner could be grounded entirely in the pair’s kinematics and dynamics. *Considered Care* seeks to trouble the idea that partners can maintain their interaction merely by executing the right steps at the right time, where quality of action and reason for action remain unspecified. The choreographic score made it difficult for us, as partners, to fail to attend to the relevant normative features of quality or simply not care about how the movement itself was executed – moving beyond simply executing the right movement at the right time. Levering makes salient every moment of inattention or insensitivity, providing a compelling framework by which to explore embodied care. For care to be exercised in its fullest sense in this work, each of us needed to understand the potential for risk and willingly trust in understanding of that risk. Otherwise, the feelings of care that arose were merely phenomenological and/or driven by luck. *Considered Care* troubles this aspect of luck through levering as a choreographic constraint that requires competence in negotiating time, space and effort in real time. If nothing went wrong, we weren’t just lucky – we had the actual experience of negotiating an unexpected situation. Competence challenges partners to act accordingly – one can care but lack the skills to do so. Thus, the interplay of technical capacities and attentive attitudes plays a crucial role for determining whether care emerges in dancing together.

There is a deeper point here about individual orientation, which draws attention to the third tension in distinguishing the motivation of care. Rather than each partner individually asking, ‘Why should I care about you?’, they can jointly ask, ‘Why should we care about each other?’ Part of the response may be a standard moral answer about the reasons for caring for other persons or other sentient organisms. That presumably can be done individualistically. Mykal could be the only caring person in the world, and could care about all those he encounters even though they were indifferent to him. But a big part of my research here is that if we care about one another, we can do things together that we could not do separately, and could not do if we did not trust one another.
This suggests that the aesthetic opportunities are grounded in moral concern.

NEEDS, TRUST AND CARE

Part of partnering entails establishing voluntary dependence and intimacy. Care plays a role in dancing insofar as each partner needs something from the other(s) that the other can successfully offer. This is a normative consideration of care – where success is determined by how well partners actively attend to the needs of the other(s), exemplifying (at least) positive attentiveness, responsibility, competence and responsiveness.

But not all instances of dancing together, nor do all dance forms, prioritize care in a way that would make it a necessary component of dancing together. The basic need for safety seems to situate dancing together in the context of a social contract. But dancers can be doing more than satisfying the duty of a limited social contract. As it is conceived by care ethicists, responsibility in care is an open willingness to offer care for others rather than a duty or principle (Noddings 2013). This rests on an assumption that a social contract is limited.

When dancing together, there are a slew of needs that each partner may aspire to satisfy. There is a moral logic in need that claims necessity. But what kind of necessity is it? There are at least two (potentially overlapping) types of needs – physical well-being and psychological well-being. Ordinary needs may be contingent on some desires being satisfied. In dancing together, there is a desire to exemplify a certain aesthetic – to achieve the desired aesthetic, certain conditions are necessary. Basic needs within dancing are those concerning safety. Safety within the dance situation covers a range of factors. This may translate to using only enough physical force (neither more nor less) necessary to achieve a desired action (such as change of direction, lift, dip or oppositional counterbalance).

In teaching levering and other partnering studies to professional dancers, I have seen how partners may form false beliefs that they are safe, only to realize they are not when things do not go as planned. It is for this reason that trust itself is not enough for maintaining a partnership. Elsewhere, I have argued about the distinction between presumptive trust and tempered trust (LaViers and Vidrin 2021), where presumptive trust essentially entails adopting an unquestioning attitude, such that one forms expectations of the other to be there for them whether they actually are or not. While trust is a necessary precursor to establish interdependence, it should not be confused with care. Focusing exclusively on trust may occlude a more subtle negotiation of expectations required for care, especially when it concerns safety.

Feeling safe and being safe, however, are two different phenomena. One can feel safe in a risky situation and one can feel unsafe in a situation where risk is minimal. As a psychological phenomenon, the feeling of safety concerns one’s individual background experience and personal history (Van der Kolk 2015). Those who have experienced pain may have more reason to feel unsafe in situations that are marked by risk. Those with traumatic experiences (or even with active imaginations) may feel unsafe because of the perceived risk that may play out in hypothetical scenarios. It may be the case, however, that partners trust each other and feel safe independently, without any evidence that the other is trustworthy or caring. Individuals may have trusting dispositions on their own – perhaps they never had cause to experience a lack of trust or perhaps they do not know what is potentially at stake if something goes wrong.

It is worth noting a fourth tension in care here, which conflates care as concern for others with care as attending to the needs of others. Concern for other(s) is not necessarily a good thing. For the concern may lead to paternalistic care – doing what one thinks is right for the other(s). At best, one is right. At worst, however, one’s care for the other turns into neglect for the others’ agency. One of the basic ethical questions we can pose about partnering is whether and how partners are responsible to and for each other. Moral epistemologist Mark Timmons suggests that ‘the moral evaluation of actions concerns their deontic status – their rightness or wrongness’ (2022: 11). This can be confused with normative status – the goodness or badness of action according to certain criteria (aesthetic, cultural, moral, epistemic). It is in reasoning where this distinction becomes clear. When a dancer feels responsible – is their sense

2 Certain choreographies may call for excessive force as part of an aesthetic criteria – even (or especially) here, dancers need to be safe within the parameters of the choreographer’s vision. There are ostensibly choreographies where the score explicitly calls for the dancers to engage in extra-risky behavior. If the dancers are not concerned for their lives, then perhaps the notion of care plays less of a role here.
of responsibility born of a desire to be a certain (for example, better) kind of dancer? Is it born of recognizing and deliberating on potentially negative consequences? Is it born of a social contract that features some (implicit) promise of care? Then, further, should dancers be held responsible for each other?

Feeling responsible for someone else’s experience (for example, comfort, pleasure, joy) may be different than actually being responsible for their experience. That dancers feel responsible for their partners may be a self-ascribed willingness, reflective of a range of ethical lenses. Why they feel responsible has little then to do with why or whether they are responsible. Dancers, knowingly or not, adopt a particular moral stance when dancing together. They can diverge in what moral phenomenology they adopt (for example, consequentialism, Kantianism or relativism). Given the interdependence and situatedness of dance practices, the critical issue here is in care, which may be occluded or obscured by adopting one stance over another.

That being said, I do believe in laying down pluralistic requirements for what good character should look like in advance of any specific practice. This sets the stage before practice, in order to be more attentive during and after. In my experience, partnering practice can be framed in such a way that poses questions rather than seeks answers. But the kinds of questions posed matter. Partners can ask, ‘How can our partnership uphold and satisfy obligations to one another?’ or partners can ask, ‘How can I best care for you in our physical interaction?’ Each framing entails relevant requirements and affordances of the partnership, the understanding of which supports different means of relating. A part of understanding the relevant requirements entails naming what matters. Elsewhere, I have argued that what matters in negotiating embodied ethics is (at least) proximity, physical orientation and point(s) of contact (Vidrin 2020). Responsible practitioners in dance ought to spell out their joint commitments together, not only how they intend to give care but how they wish to receive it as well.

According to Maurice Hamington, ‘to effectively care, one must paradoxically be both respectful and truly hear the other (thus humble) and simultaneously vigorously involve oneself with the other (thus proactive)’ (2020: 34). Whether or not partnered situations are choreographed or improvised, the aesthetic and moral dimensions of safety will play a key role in partners’ willingness to establish voluntary dependence and intimacy. This willingness reflects partners’ perceived risk, which may be physical, emotional, spiritual or otherwise. While certain forms of dance feature actions that are quite physically risky (for example, overhead lifts), other forms of dance may feature more emotional risks (for example, moving in close proximity while maintaining eye contact). In order to maintain their interaction, partners will need to feel minimally safe to let others in. In this way, each partner may act as both care-giver and care-receiver for the other.

Caring Practice

Dancing together is rooted in facts that are morally saturated. For example, one ought to know where their partner’s centre of mass is in order to negotiate their interaction with care. Failure to pay attention to relevant details, and to what is important in those details, is not just a cognitive failure – it is a moral failure, as well. A failure to perceive may be founded on a number of different errors – an error of knowing what matters, an error of competence, an error of getting caught up in one’s own world. To persist in missing the details is a failure in respecting the agency of the other(s), which may turn on a failure of character. This is so even for failures of competence. One can fail to respect the other’s agency because they are an incompetent dancer. It is important to note, however, that failure to perceive relevant moral facts presupposes that the other is sharing relevant information through their action. For example, one cannot know where their partner’s centre of mass is if that partner is withholding information by obscuring their weight. This, too, can constitute a moral failure to communicate.

While an aleatoric spirit can make matters more interesting, it also makes interaction more dangerous. Granted, if partners agree in advance that ‘anything goes’, then they form a capacious social contract that makes otherwise transgressive acts morally permissible. That is the beauty and curse of ethics on a small scale. I suspect,
however, that many are unlikely to want to live in a world where such chance-based interactions become a norm. While there is epistemic value in not knowing (see Elgin 1988), making one-time commitments is different from writing aleatoric practice into policy. Anything goes could be the default against which restrictions in each case need to be negotiated. The fact that we do not know is a reason why caring is so important. If I cannot foresee all the dangers that our partnership brings, I am in a perilous position if I can’t count on your caring for and about me.

Whether partnered situations are choreographed or improvised, partners can never know exactly what will manifest from the close proximity to others. They cannot prepare themselves to be caring for every expressed need that arises from engaging with others. However, they can prepare an array of caring skills, including physical, emotional and intellectual habits that not only help them navigate the performance of care but also influence who they are and how they subsequently address others. This was the motivating factor for designing leveraging as a partnering study, and choreographing Considered Care. Rehearsing and performing the work was more than merely repeating the sequence – it was a practice of familiarizing ourselves with the dynamics of interdependent coordination and developing competence in adapting to the circumstances.

The attitude and ability in expressing and achieving interdependence I discuss here reveals aesthetic possibilities (the possibilities open to the dancers in Considered Care, for example) that are invisible if one sticks to an individualistic perspective. These aesthetic possibilities influence whether and how care is expressed. Once partners have seen the opportunities that the partnering perspective offers, they may very well decide to pursue more individualistic choices. But at least they know what the other alternatives are. They have expanded their epistemic range.

Choreographic expressions of care that involve multiple bodies negotiating interdependence can illuminate details that may be hidden in a theoretical characterization of care, thereby challenging and troubling the ideological image of a singular, virtuous performer. The shared movement in partnering may be one of the clearest ways in which care (or lack thereof) is rendered salient. The physical constraints of a partnering study like leveraging are so formal, yet the relational expression paves the way for embodied research on affective, ethical responses such as trust, respect and care. There is practical value here in demonstrating that what we take to be obvious insights about sensitivity and attention are in fact materially complex, technically and ethically. Philosophical investigations of this kind aren’t merely precursors to practice. They critically inform practice. The conversion required to manifest abstract ideas of the ethical, to actively participate in what we believe matters, is a condition that potentiates possibility. Understanding the space between ability and attitude can actualize this potential into embodied care that can be honed through practice.

REFERENCES
Hamington, Maurice (2004) Embodied Care: Jane Addams, Maurice Merleau-Ponty, and feminist ethics, Champaign, IL: University of Illinois Press.