

CARE IN CRISIS: THE ETHICAL, AFFECTIVE, AND SUBJECTIVE WORLDS OF
HOMELESS SERVICE PROVIDERS IN A US CITY

by

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ABSTRACT

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This dissertation explores the ethical, affective, and subjective worlds of homeless service providers in a US city. While ample studies have been conducted that focus on homeless populations in the United States, very little ethnographic research has been undertaken that focuses on those who interact most with homeless populations—workers in the homeless service sector. Drawing on fifteen months of ethnographic research and forty interviews with staff conducted in 2017 and 2018, I examine the work of care and the complex experiences that workers faced in their attempts to provide care for homeless clients at a nonprofit homeless shelter for men in an American Midwestern city.

My study produced three key findings. First, an ethics of optimism informs the work of care at the shelter. Shelter staff wanted to be effective workers in this institution and hoped their work contributed, in small ways, to making the world a better place. By providing a variety of services for homeless men and doing their part to fulfill the duties of their institutional roles, workers took part in ethical relations guided by optimism. Second, because their optimistic work

unfolded amid circumstances often shaped by crisis, front-line workers regularly found themselves profoundly affected by impasses of care in which they could do nothing more to care for clients. Their optimism often became cruel as their routine work wore them down affectively and emotionally. Third, front-line staff persisted despite such cruel optimism by attempting to negotiate fraught and unclear boundaries between themselves and their clients. Given the conditions of crisis of their work and their precarious position at the front-line, workers were constituted as vulnerable and crisis-shaped subjects that negotiated boundaries as a last resort to cope with the often-costly consequences of providing care to marginalized homeless men. Taken together, these three findings contribute to an anthropology of care by illuminating the difficult moral work of attempting to care amid contexts of crisis.

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To Jeriah,
in gratitude.

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CHAPTER ONE. CARE IN CRISIS

Crisis on the Street

Like most emergency shelters in most US cities, Greener Pastures Shelter for Homeless Men sat at the border of one of the poorest neighborhoods of the city, where the supply of emergency shelter best met the demand for it.¹ As I took the bus and walked a few blocks to and from the shelter month after month, what had initially appeared as stark evidence of the deterioration left in the wake of Rust Belt corrosion—vacant lots, abandoned homes and buildings, streets and sidewalks long in disrepair—faded into unremarkable coordinates marking the path of my coming and going. Yet, there were a few features that most frequently drew my attention: the sandy red duplex with boarded-up windows and sporadically missing shingles; the intersection with dozens of temporary patches of black tar interlaced with eight large throw-and-roll filled potholes and several that remained unfilled; the russet building with crumbling bricks, deeply sagging roof, and a propped-up plywood door sporting a “no trespassing” sign; and the stained, pale residence with a commanding, steel-bar front entrance.

The most striking feature was an uninhabited building between the shelter and my bus stop. It was a wide two-story where the upper half had at some point in time caught fire and scorched everything including the roof. The ground-level windows were boarded-up and surrounded by a ragged, blue tarp vertically outlining an entrance that was enclosed outside by street barricades. I had no idea how long this building had been in that kind of shape. But it remains there, as I write this, completely unchanged three years after I first had seen it, charred remains exposed above and blue tarp still occasionally flapping in the wind below. The building

¹ Names of places and people have been changed throughout this dissertation to ensure anonymity.

is not for sale, and there have been no visible signs of any attempt to repair or demolish it. If the homeless are considered people without a place to live, then this building could be considered a place to live without people: it is yet another worn down, neglected, ex-residence in the blocks surrounding Greener Pastures Shelter for Homeless Men, an area several workers referred to simply as “the ghetto” of this American midwestern city I call “Rustville.”

It was a Thursday when I had just left the shelter after a scheduled interview with a case manager and stopped at the sidewalk crossing to check the bus schedule for my ride home.

Across the street, a man was shouting nearly at the top of his lungs. Facing his direction, I looked up from the city bus timetable on my phone. Twenty feet away from the shouting man on the other side of the street, several shelter clients were sitting at an outdoor picnic table on their break, smoking cigarettes and joking with each other. His voice got louder and clearer, but was directed toward no one, or perhaps, toward everyone: *“I’ll tear it down!”*

The screaming man was not a part of their group, and I did not recognize him as one of the men staying at the shelter. From the look of it, he seemed to have no association with anyone there. He kept shouting incoherently, but none of the guys outside seemed too phased by it, as if this were nothing out of the ordinary. Pacing frantically back and forth on the sidewalk, the stranger then stopped, turned, and looked around to see if anyone was listening to his rant. His neck cocked swiftly, and he looked me dead in the face. As loud and clear as could be: *“I’ll tear down the fuckin’ Berlin wall!!!”*

It seemed he was yelling at me directly. Locking on my eyes, he sneered, and proceeded to spit in my direction. Alarmed, I immediately looked back at my phone to avoid any further engagement. It was early summer in Rustville, and as was typical, the sun was bright in the cloudless, azure sky and the temperature was in the high seventies. Yet, from what I noticed

during that brief glimpse, this stranger was wearing a rather dirty, ripped and ripping, goose-down jacket with several thick layers beneath. I also observed that, like numerous men at the shelter, he was in his late-fifties or sixties. He continued to yell incoherently, peppering profanity with a rhythmic staccato and his voice got even louder. With my head facing down to appear nonconfrontational, my eyes darted up in concerned curiosity. As I feared, he was now yelling right at me specifically. I heard the shelter door close behind me and turned my head around to see two younger clients I did recognize, Troy and Jesse, exit the building and light up cigarettes by the entrance.

When I turned back around, the shouting man had already advanced halfway across the street toward me. He was still yelling and still staring at me. Again, he spit at me, and this time, it landed right next to my feet, and I quickly diverted my attention there. I was trying to stay calm and doing my best to keep anything from escalating. Judging from the many stories of mental breakdowns of clients that shelter workers shared with me during my research thus far, tense moments such as these should be approached with deliberate caution. Still screaming, the man approached me, got close, and pushed his chest out, almost to mine. He was breathing heavily—and I could feel it—and did not know what to do. Should I say something to try to calm him? Should I ask him what was wrong? Or would that make things worse? I had been in the presence of potentially violent mental illness several times before but never had felt myself threatened by it in this immediate sort of way. I kept my head down and slowly slid my phone into my pocket.

Continuing their smokes, Troy and Jesse started hurriedly walking down the sidewalk behind me to my left to avoid the situation that was unfolding. As I gingerly took a few steps backward and slowly turned to follow them to what I imagined would be a calmer place, I

glanced at him once more over my shoulder. I could not understand what he was screaming about, but his eyes displayed a profound intensity and rage. I felt the hair on my neck stand up, and I kept hoping he would not follow me as I slipped behind the two men to get away to nowhere particular. The three of us walked half a block together silently, and I looked over my shoulder again to see that the man was still standing in the same place but had gotten quieter and looked exasperated. I felt deeply relieved that at least he was not following us. We continued to walk and saw three unsupervised young children playing with some empty glass bottles in one of several vacant lots on this block. To break the silence and the already-mounted tension, Jesse said quite frankly, “Those kids should play somewhere else.” Troy responded defiantly, “It’s their neighborhood. You played in your ‘hood.” At the end of the block, we separated without mention of the shouting man we had avoided, and I walked to my bus stop where I took a few deep breaths and waited. When the bus arrived, I hopped on, opened my bag, pulled out a pen, and in much haste and confusion, recorded this event in one of my several “field notes” journals. Perhaps I could make some sense of it later.

* * *

Care in Crisis

This dissertation is not about the experiences of homeless men nor is it about the structural violence (Farmer 2003) that often creates and sustains conditions of homelessness that shape the realities so many men without permanent housing often face. It is not about the experiences of mental illness of some homeless men nor is it about the social abandonment (Biehl 2005) that often contributes to the neglect and exclusion facing many men who lack mental health care in the United States. Rather, this dissertation is about how people attempt to

care for homeless men amid conditions of crisis. More specifically, it is about workers in a nonprofit emergency shelter for homeless men who attempted in manifold ways to provide hopeful forms of care for clients amid circumstances of crisis that render such care an exceedingly fraught endeavor. While anthropologists have done important and detailed work with homeless populations (Desjarlias 1997, Bridgman and Glasser 1999, Hopper 2003, Liebow 1993, Passaro 1996), little ethnographic attention has been focused exclusively on workers who spend more face-to-face time with homeless populations than any other group. In this dissertation, I explore the ethical, affective, and subjective worlds of such workers in Greener Pastures Shelter for Homeless Men that attempted to provide services and care to homeless men in Rustville.

Much like the front-line community psychiatry workers of Paul Brodwin's study, front-line workers in the homeless sector face an "impossible mission" (2013:203). They viewed their work as necessary, important, and usually hopeful, but faced so many circumstances in which there was no clear way forward and which routinely wore them down emotionally and affectively. The brief vignette detailed above describes an encounter during my time doing research at Greener Pastures with one man who was confined to living life on the street. Though he was not a client at the shelter, he was experiencing what all shelter staff would consider a "crisis" not uncommon among homeless men who temporarily resided at the shelter, specifically those experiencing symptoms of severe and persistent mental illness. While I was not a worker at Greener Pastures and did not have training in the proper methods to defuse such a crisis, this experience reveals one fundamental question confronting hundreds of front-line workers in the homeless sector every day in the United States: given the troublesome persistence of homelessness and the many crises that men experiencing homelessness must struggle to manage

every day, what can be done here and now to help some of society's most marginalized individuals?

Dozens of interviews with shelter staff have shown me that workers viewed their front-line positions as a kind of last line of defense against the seemingly intractable issue of homelessness in the United States more broadly and in Rustville more specifically. In countless terms, they explained their disappointment that broader society seems to be fine with either overlooking or simply ignoring homeless men. From their point of view, most people “don’t wanna talk about” the homeless population and “don’t like to look at homelessness because it’s hard to see.” They explained the population of homeless clients they worked with as a largely “underserved” group of men that “don’t get the resources they need,” don’t “get the help that other people can get,” and are a “never ending population with not enough resources.” Workers described them as a population that are so “traumatized,” “victimized,” and “stigmatized” by wider society’s “prejudice and ignorance,” they must regularly “scrape themselves off someone’s shoe” before they are able to get ahead in life. And they shared that so often homeless men receive the “blame” and “guilt” thrust on them by normative society for not being able to “help themselves.” One case manager put it most bluntly and perhaps, most powerfully: “Our society looks at the homeless as if they are a different species instead of just homeless.”

But despite the perceived lack of concern for the humanity of men experiencing homelessness or the downright neglect that workers felt was commonplace among mainstream society, they did the most they could to help in their routine, institutional labors. This is not to say that workers’ efforts were always heroic or respectable. Like any other form of work, there were failures, shortcomings, oversights, bad decisions, and other negative actions that could yield costly consequences in both the lives of homeless men and the personal and professional

lives of workers. Rather, this is to say that workers in the homeless sector generally felt a pressure, urgency, and deep purpose to their work because as I mentioned, they viewed themselves rightly as the only lifeline available for many of the clients who stayed at the shelter. Some clients had been estranged from their families for decades; some were outcast from their social groups long ago; some had lost their jobs for a wide variety of unfortunate reasons and had difficulty rejoining the workforce; some had jobs that simply did not pay a living wage; and some had lost nearly everything after serving time in prison, diving too deeply into drugs and alcohol for too long, or suffering severe mental breaks that made home life simply unbearable. The list of reasons contributing to men ending up in the emergency shelter would, indeed, be hundreds of pages long and painstakingly complex. But from the perspective of most workers, the matter was simple: the fact that men ended up in the shelter was the foremost indicator that “they have nobody else in their lives” to “encourage them,” “help them,” or even “cheer them on.” And workers viewed themselves as a kind of last resort of care for such socially excluded and forgotten men. Therefore, the question—what can be done here and now to help some of society’s most marginalized individuals?—gained exceptional significance in the lives of front-line workers who typically faced their work with an earnestness that to me, seemed rare.

But as the vignette above also shows, crises could unfold during encounters with homeless men, on the street and in the shelter. Much like my own experience of feeling powerless to do anything in the face of one man’s crisis, and despite workers’ training to be able to intervene much more adeptly, front-line workers often experienced the limits of their power to care for their homeless clients amid crises. Yet, as later chapters suggest, events of crisis always unfolded amid a broader context of crisis where time and resources were scarce, social and institutional shortcomings were prevalent, and the “heaviness” of trying to care as the sole

resource for homeless men bore heavily on the shoulders of the relatively few individuals who actually did care for homeless men. As I explain in greater detail below, such “crisis ordinariness” (Berlant 2011) characterizes the exceedingly difficult structural predicament of front-line workers in the homeless sector and is woven through many organizations of homeless care across the United States. Conditions of crisis ordinariness also tended to produce impasses of care where workers were affectively worn down in their struggles to find any way to help clients make their lives better. The best courses of action amid such impasses were blurry at best, and often exhausted workers.

But before I get to the content of my research and look more deeply into the ethical, affective, and subjective worlds of workers who cared for homeless men amid circumstances of crisis, it is important that I provide a clearer picture of the site of my field work, Greener Pastures Shelter for Homeless Men. The next section offers some background as I elaborate the recent historical context in which Greener Pastures established itself and account for some of the most significant shifts over the last few decades that shaped this shelter into the accomplished organization I came to know during my field work.

Greener Pastures

Like so many cities across the midwestern and northeastern United States, the economic boom of late-nineteenth and early-twentieth century manufacturing had come to a somewhat sustained halt in Rustville, and the few blocks surrounding Greener Pastures had not experienced the more recent benefits of economic development other neighborhoods in the city had. Within a handful of decades, the confidence of American industry seemed to be corroding, and it was as obvious in this “ghetto” part of Rustville as it was in any other city throughout the Midwest and

Great Lakes regions. The effects of economic change unfolded most harshly for people living life on the margins as what were previously reliable patterns of work and living shifted dramatically by the 1970s and 1980s, and subsequently, the national homeless population increased significantly as many of the poorest and most vulnerable were left in the unfortunate wake of the deindustrialization (Hopper et al. 1985, Levinson 2004), deinstitutionalization (Brodwin 2013, Lamb 1984), and gentrification (Smith 1996) of that era.²

Responding to this rapidly growing homeless population, several of Rustville's inner city churches collaborated and devised a plan.³ One essential component of their plan was to open an overnight emergency shelter in one of the poorest neighborhoods in town, and by the early 1980s, Greener Pastures was established and opened its doors to local homeless men in need. Relative to the highly bureaucratized and performance-focused shelter I came to know during my research, the early days of Greener Pastures resembled a more grassroots and, in some ways, ragtag kind of effort. Originally, the shelter could only offer the temporary respite of a warm building with bunk beds to a few dozen men each night. As it was first come, first served, and as the shelter was not yet connected to a larger network of homeless service-providing organizations in Rustville, Greener Pastures used to have to regularly turn men away at the door

² For more on all of this, Levinson (2004) edited an authoritative, two-volume "Encyclopedia of Homelessness."

³ The United States has a long history of Christian intervention with poor and homeless populations. By the 1880s, London's "Salvation Army" made it to North America and, in continuing with the project of its street-preacher founder, sought to provide physical and spiritual assistance to the poorest. Salvation Army continues today to have homeless shelters, assisted housing, and rehab centers across the continent. In 1902, a Methodist minister founded Goodwill as a part of his ministry to redistribute household items and clothing to the poor. Today, Goodwill has job training programs and employment placement programs in every major US city. In 1913, the Association of Gospel Rescue Missions was established to provide emergency shelter, food, and services to the poor. They have spread across the US as well. I have provided only a few examples here, but there are many.

every night—a fact which long-abiding workers remembered with some chagrin. Also, during the early days, nearly every aspect of running the shelter relied on the charitable efforts of a largely churchgoing group of volunteers and many small donations of time, money, and basic living items from the local community.

But a significant shift occurred in the late 1980s as homeless shelters across the country were given a new opportunity for growth. The McKinney Act was passed by US Congress in 1987 as the first federal law that prioritized homelessness as a public concern (see Gabbard et al. 2013). Recognizing a growing homeless population nationally, the act aimed to provide urgently needed assistance in the form of funds directed toward homeless shelter programs in cities across the country. It outlined some key components of government intervention with the homeless population: housing assistance, health care, education and training, and food assistance. The act also established an “Interagency Council on the Homeless” to review and evaluate programs, distribute information, and provide technical assistance. With the emergent backing of federal funding, Greener Pastures was no longer a standalone shelter providing what minimal resources they could muster on behalf of the kindness of strangers. Rather, by the late 1980’s, the shelter started to envision new possibilities for organizational development and growth.

As housing programs and services expanded for many shelters across the country, national policy language shifted to include a specific, altruistic dimension. During the Clinton administration, nearly every major city across the country adopted the “continuum of care” model which gained national traction after the Department of Housing and Urban Development’s “Interagency Council on the Homeless” published *Priority Home! The Federal Plan to Break the Cycle of Homelessness* (HUD 1994). Rustville was no exception. The “continuum of care” (CoC) model proposed a community-wide system of supportive services that were intended to

work together to assist people in avoiding situations that would render them homeless and to provide the already-homeless with the support needed to find and maintain housing. The language in the simple phrase “continuum of care” made explicit the benevolent relationship between government and homeless populations while it linked diverse forms of work under the uniform heading “care.” Today, there are over four hundred continuums of care across the country (HUD 2019) that are made up of a diverse set of overlapping institutions including nonprofit service providers, faith-based organizations, county and city governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, and even law enforcement. Federal funding and accountability measures rapidly developed because of this new model, and Greener Pastures adjusted well to these changes. In the years after the national “continuum of care” shift, the shelter expanded their organizational structure and precipitously grew the programs of “care” it could offer homeless men.

Government oversight of continuums of care intensified in a few ways during the past few decades and homeless shelters across the country either learned to adapt or found alternate ways to survive. Specifically, in 1996, HUD pushed organizations to have tighter structure and a more refined strategic vision for their programming as they required a single application from broadly construed “communities” that made up the CoCs. The hope was that the increased structure and rationality would ultimately improve the situation for the homeless individuals receiving services (Burt 2004). But it also left many organizations comprising many CoCs across the United States scrambling to unify disparate projects on paper to accommodate the changes. Greener Pastures successfully navigated this environment, but some shelters in Rustville struggled to prove their adaptability. Organizations receiving federal funding for housing

programs had to come to grips with an emerging environment in which services for people experiencing homelessness were becoming rapidly rationalized, bureaucratized, and even competitive. By 2004, HUD included a requirement that recipients of McKinney Act funding for homeless services had to keep data through an electronic software application system, the Homeless Management Information System (HMIS). This disciplinary technology was meant to track and monitor the homeless population as they navigated through a vast assortment of specialized service providers over months or even years. Emerging from these CoC networks of homeless care was a growing shared set of data about homeless individuals, again, in expectation that their unique needs could be more accurately and efficiently assessed and met by every participating organization. Several of Rustville's CoC organizations modified programming and data collection accordingly, and this proved to be a time of steady growth for a few shelters in the city. By the mid-2000s, Greener Pastures added several programs because of the increase in funding, including an on-site addiction and behavioral health counseling clinic, and job counseling and education/training programs, hired additional staff, and made modest improvements to what was previously a very run-down building.

In 2008, a novel problem emerged as a massive-scale housing crisis ripped across the US. With the major purpose of keeping families and individuals from losing their homes, The Act to Prevent Mortgage Foreclosures and Enhance Mortgage Credit Availability was signed into law in May 2009. Part of this law, the HEARTH Act (Homeless Emergency Assistance and Rapid Transition to Housing), revised the Emergency Shelter Grants program of the McKinney Act to broaden the scope of activities of homeless shelters nationwide while it further organized the planning process and data collection requirements. The HMIS had been around for several years, and it could chart the number of homeless people using a specific service, the number of

homeless people who had achieved temporary or permanent housing after a shelter visit, and other factors. But the HEARTH Act emphasized the importance of “performance” for homeless service providers and mandated that CoC organizations in every continuum of care across the country had to maintain consistency in how homeless client data was collected using the HMIS. Their “performance” could thus be measured against other organizations according to their relative merits while entire continuums could be measured against other continuums given the numbers generated. This resulted in countless statistical studies that could take a temporary pulse of the successes or failures at federal or community levels, e.g. HUD’s “Annual Homeless Assessment Reports” or cities’ HIC (Homeless Inventory Count) and PIT (Point-In-Time) reports.

In the decade following the housing crisis, Greener Pastures proved that it was a high-performing organization in terms of its statistical success in providing the right kinds of care for homeless men. Because of this, Greener Pastures received more extensive government funding. But, witnessing the ever-changing and somewhat precarious funding environment created by regular shifts in federal policy under different administrations, the shelter also wisely sought to diversify funding sources including businesses, foundations, philanthropic organizations, and private individual donors. Due to the financial security the shelter had accumulated, by the time of my study in the mid 2010’s, Greener Pastures renovated their building impressively, enhanced the living and sleeping spaces for the over fifty homeless clients they served, and augmented the various services they were already providing to offer a one-stop-shop of “holistic” supportive services for homeless men. Recent expansions included disability accommodations, increased office capacities, improved safety measures, and even fitness, hobby, and life skills workshops.

From its humble beginnings as one church group's response to the community's growing homeless population in the early 1980's through its adaptations to shifts in federal policies and adoption of the language of care in the 1990's to its growth and development as a high-performing organization in the 2000's and 2010's, Greener Pastures underwent a significant decades-long transformation in which it proved its status as an effective institution in providing care for Rustville's homeless men. Today, it stands out as a visibly differentiated landmark against the drab and barren looking blocks surrounding it—a beacon of care for the “never ending population” of Rustville's homeless men.

The Power of Care

While Greener Pastures emerged as an organization relatively recently, it shares a deep genealogical connection to what philosopher Michel Foucault called “pastoral power.” Given anthropologists widespread interest in issues of power and the “veritable explosion on the work of care” (Buch 2015:279) recently generated in the field of cultural anthropology, it is surprising that little explicit attention has been given to what Foucault plainly described as a “*power of care*” (2007:127). Further, the few anthropological treatments that do engage pastoral power rely on a confined reading of Foucault's work that recognizes only a few historical elements as fundamentally integral to the concept of pastoral power (Fassin 2010, Garcia 2010, Langford 1998, O'Neill 2018, Pandian 2008, Ramsay 2017). They do not, however, consider Foucault's broader genealogy as a kind of open-ended project or work in progress. One reason for this oversight could be that Foucault did not dedicate significant portions of any of his published books (excluding posthumously published lectures) to this technology of power as he did with disciplinary power (1995) or biopower (1990). Rather, pastoral power is only mentioned between

1977 and 1982 in brief essay format (1982) or a bit more thoroughly in lectures in France (2007 [1977-1978]) or the US (1979). In the next chapter, I provide a close reading of several of Foucault's works on pastoral power to offer a more complete picture of his project which other researchers may find useful. Yet, for my purposes here, I focus only on what pastoral power is, what it produces, and how it contributes to this study.

In a few essays and lectures (1979, 1982, 2007), Foucault uncovered the deep history of a power he called "pastoral." According to him, this pastoral power originated in the Hebrew and Egyptian cultures of the ancient Mediterranean East wherein a metaphor of pastoralism became a model for the care for and guidance of people. Similar to how a shepherd tends to their flock of animals was the approach to leadership in which powerful figures, e.g. Moses and the Pharaohs, tended to their people (1979). By the early Christian era, this model was adopted and institutionalized. Christian "pastors" came to care for and guide their church membership toward redemption and eternal salvation through institutionalized practices requiring confession and obedience to spiritual guidance (1979, 2007). Under the direction of pastoral leadership, church membership participated in such practices, and pastoral power began to constitute an emergent form of subjectivity. This is to say, in the era of its institutionalization, pastoral power produced confessing and obedient subjects of care.

However, it was not until the seventeenth and eighteenth centuries that pastoral power transformed from its influence in a somewhat peripheral religious context into a ubiquitous form of the practical government of people (Foucault 2007:165).⁴ Rather than lead a flock toward

⁴ Of this genealogical connection, Foucault writes: "the pastorate gave rise to an art of conducting, directing, leading, guiding, taking in hand, and manipulating men, an art of monitoring them and urging them on step by step, an art with the function of taking charge of men collectively and individually throughout their life and at every moment of their existence" (2007:165).

religious salvation in the next life, modern states became concerned with this-worldly affairs as they developed and expanded rationalized techniques for the care of people: healthcare, welfare, medicine, security, insurance, etc. (Foucault 1982:215). At the same time, there was a proliferation of both the “officials” who cared and the “aims” of care as pastoral power had far-reaching effects in diverse institutions including the state but also beyond it: private ventures, welfare societies, philanthropy, benefactors, families, etc. (ibid). A minor inconsistency is worth noting here that in Foucault’s 1977-1978 lectures “Security, Territory, Population,” he focuses on the unambiguous connections between pastoral power and the practices of the state, however, by his 1982 essay “The Subject and Power,” he admits of a broader influence of pastoral power beyond just the state. While this coincides with his topical shift from studies of biopolitics to those of governmentality, I do not draw this point out to make any substantive conclusion, just to mention it.

What is important here is that pastoral power, this “power of care,” became highly sedimented and pervasive throughout society during the last few centuries and pivotally, its history continues. According to Foucault, pastoral power “is doubtless something from which we have still not freed ourselves,” (2007:148) and its practices have never “been obliterated” in the West (2007:166). Today, pastoral power persists in multifarious ways, and it produces effects across a vast and complex assemblage of institutions and organizations that provide care and services to people considered to be in need of such care and services. Whereas disciplinary power produces economically useful and politically docile subjects (1995), and biopower produces optimized bodies and regulated populations (1990), pastoral power produces confessing individuals and obedient flocks. Remnants of the Christian technologies of “individualization” that emerged during pastoral power’s era of institutionalization have carried

over into many of today's pastoral institutions in which those who are cared for must be known in their individuality and must be submissive to the proper guidance of a given set of experts and authorities. They are the subjects *of care*, and they continue to be constituted as obedient and confessing through such institutional practices. Most notably, many practices of the "psy" disciplines have proliferated which require individual attention, dependence, obedience, and the knowledge of souls and minds, as contemporary subject formation entails the confession and revelation of the truth about one's innermost self and demands a compliant self-examination and self-mastery (Rose 1998).

But my central concern here is not with the production of subjects of care who are subjected to either institutional practices of care or neoliberal technologies of the care of the self, but with the production of *subjects who care for others*. If populations in need are contemporary analogs of Foucault's "flocks" whose subjectivity is constituted as confessing and obedient, it would follow that the subjects who care for others are contemporary analogs of Foucault's historical "shepherds." And as there has been an increase in these "officials" who care for others in the past few centuries (Foucault 1982:215), it seems that there is much more to be considered. For example, how is a shepherding subjectivity constituted? In obvious ways, these shepherds are the ideal counterpart to those who are cared for and governed (for more, see chapter 2). Rather than follow, they attend to and lead. Rather than obey, they instruct and direct. Rather than receive care, they offer and provide it. Rather than be known, they pay attention and know. Rather than confess, they listen and absolve. Rather than be saved, they protect and guide toward salvation in this life. But as we will see later, pastoral power is more complicated than just this straightforward bipolarity.

Such shepherds are abundant in contemporary institutions of care. They can be trained professionals who specialize in precisely demarcated fields of human care and services. In medicine, they can be doctors, physicians' assistants, nurse practitioners, nurses' aides and assistants, clinicians, psychologists, psychiatrists, therapists, counselors, hospice workers and many others in the fields and subfields of health care. In human services, they can be social workers, case managers, residential counselors, substance abuse counselors, outreach managers, family service advocates, child welfare specialists, employment specialists, youth counselors, mental health workers, and so on. They can also be spiritual leaders, clerics, priests, pastors, and religious laypeople or untrained, informal workers like volunteers, charity enthusiasts, community activists, and others. They can work for the government, private business, faith-based organizations, nonprofit and philanthropic organizations, or some combination (e.g. corporate philanthropy or public private partnerships). Insofar as workers in these institutions care in specific ways about and/or for specific groups of humans in need, and insofar as practices of care involve a diverse cadre of specialist experts and authorities engaged in institutionally sanctioned techniques of caring, contemporary organizations can be considered institutions of pastoral power.

In this study, I focus on the workers who cared for homeless men in diverse ways at Greener Pastures Shelter for Homeless Men. From the organizational top to the bottom, there were a couple upper management workers who oversaw and supervised workers at the shelter. There were a few resource development workers who worked with volunteers, wrote grants, liaised between funders and workers, and communicated the organization's strengths and weakness to donors and government agencies. But most of the staff worked in front-line, hands-on ways with clients at the shelter. Among them were social workers who managed the cases of

the homeless men to which they were assigned, regularly visited, and encouraged these clients, intervened when necessary, and kept track of cases via the HMIS. There were clinical therapists who, often in intimate ways, worked with men who either wanted or were required to meet more-or-less weekly, individually or in groups. There were also several front-desk workers who interacted with most shelter clients nearly every day and assisted with handing out daily meals, medications, toiletries, and in a variety of other ways as they were needed.

Despite the diversity of practices of labor, workers generally viewed their institutional work as a form of care. And as I noted above, their work has been framed as such at the level of national policy in the now pervasive “continuum of care” model adopted by most shelters in most US cities. This is precisely why I find Foucault’s concept so useful to my own study. It connects contemporary institutions and practices of care to a productive and effective genealogy of power. As I show in the chapters that follow, beyond merely producing confessing and obedient subjects of care, pastoral power also produces *optimistic* and *vulnerable* subjects who care for others. Yet, before fleshing out these arguments, there remains one issue that dovetailed with this “power of care” and significantly shaped the worlds of homeless service providers: crisis.

Crisis

Workers used the term “crisis” to explain a wide range of unfolding events at the shelter and at the subsidized housing complexes where several case managers and social workers employed by the shelter worked. Clients with undiagnosed or diagnosed mental conditions occasionally went through severe “crisis” episodes in which front-line workers attempted as they could to intervene. Examples of this included clients labelled “paranoid schizophrenics” who

destroyed shelter furniture and equipment or property in subsidized apartments because of violent mental breaks; clients going through “command” hallucinations which could induce violent behaviors directed toward staff or other clients; clients who experienced uncontrollable outbursts due to “borderline personality disorders” that often negatively affected relationships at the shelter; clients living with severe depression, manic depression, or bipolar disorder who could spiral into behaviors of self-harm or suicidal ideation; and so forth. As I recounted in the dissertation introduction, mental health crises such as these can be considerably difficult to address. Even for those with training, they can present enormous challenges to intervention in the moment, let alone resolution in the long run.

“Crises” could also involve physical illness or physical violence not attributed to mental illness. Clients with histories of AODA (alcohol and other drug abuse) or undiagnosed or diagnosed physical conditions occasionally required emergency intervention, ambulance transportation, and/or hospitalization. Some of the most typical crises of this sort were commonly discussed in interviews and involved complications due to heart, lung, liver, or kidney disease; HIV/AIDS; tuberculosis, hepatitis, diabetes, asthma, or aging. Also, AODA could cause complications involving sickness related to the withdraw from or overuse of heroin or alcohol, or overdose of a variety of drugs including crack, synthetics, pills, or others. And occasionally, threats of harm or real violence could break out among shelter clients or between clients and shelter staff which could result in clients being “exited” from the shelter prematurely or occasionally even police intervention in such crises.

Navigating these numerous and complex crisis events was “just a part of the job,” as several front-line workers put it. Doing so required skills of intervention that were acquired through social work and clinical training. Yet it is important to note that it also required

improvisational measures to address the contingent specifics in which each crisis unfolded. What may work in one situation may be inadequate or ineffective in others. Moreover, as one front-line worker shared, “there are gray areas to every rule,” which often made crisis intervention a matter of exercising practical knowledge in lieu of following strict guidelines. Experienced workers had developed and modified their approaches to intervention over their years of employment to meet more effectively the in situ needs of clients experiencing crises. On the other hand, despite workers’ training and experience, some crises simply could not be contained or resolved in an immediate way or could persist for longer durations or occur in chronic and reoccurring ways. How workers concretely attempted to navigate these crises is investigated in later chapters of this dissertation.

Central to my study is the claim that the many events considered “crises” by front-line workers at the shelter unfolded amid broader conditions of crisis which bore consequences on the lives of homeless men and the attempts of workers to care. Workers frequently criticized these conditions but had little recourse to change anything about them. From an outsider’s analytic standpoint, workers’ criticisms highlighted the structural context of crisis which had become ordinary for workers. As workers expressed, there were broader problems of funding and a lack of resources for the shelter, insufficient physical and mental healthcare for homeless men more generally, inadequate employment opportunities for clients, meager affordable housing options in Rustville, and struggles of day-to-day survival that ultimately shaped the context of homeless care in which singular events of crisis unfolded.

Workers commented that wider society’s lack of concern for homeless men was most evident in the lack of federal and state funding available to homeless service providers. Even as the shelter proved that it was an effective institution in providing the right kinds of care for

homeless men in recent years, staff regularly criticized the minimal funding and resources that were available. And they felt that this greatly constrained the care and services Greener Pastures could ultimately provide to clients. Many workers commented that homeless men rarely got the healthcare they needed, and even when they received medical care for mental and physical illnesses, they often faced frustration with failed attempts to navigate the complex health care system or faced discrimination by medical professionals who labelled them “problematic,” “attention-seeking” or “drug-seeking.” While many workers viewed the Affordable Care Act as a step in the right direction for homeless clients’ health care, they were deeply concerned by the prospect, at the time of my research, of its repeal, in which case clients would be “severely impacted.” Frequently, case workers and clinical therapists alike expressed how so many clients who suffered from severe and persistent mental illness rarely got the treatment they needed. And so often during therapy sessions in Greener Pastures’ in-house clinic, therapists had to focus on meeting clients’ day-to-day needs rather than focus on long-term emotional and behavioral change that was supposed to be their essential purpose (see chapter 4).

Some workers observed that there were limited employment options for men experiencing homelessness in Rustville, but also in the US more broadly. While Greener Pastures offered job trainings and employment counseling services, clients continued to struggle to find work that would pay enough to live “healthy,” “fulfilling,” and “productive” lives, and workers found the government subsidies offered to many clients to be paltry relative to client need. Further, several clients had gone to prison for a variety of crimes, yet in the aftermath of serving time, found employment opportunities scarce. To that point, workers denounced how they viewed the legal system as working “against” rather than “for” homeless men as records of crimes and evictions (see also Desmond 2016) could bear sticky consequences throughout

clients' lifetimes. A few workers described that a lack of affordable housing was a major cause contributing to homelessness, and the few low-paying and temporary jobs shelter men were able to attain did not afford them a sustainable housing situation. Most frequently though, workers described how clients' lives were largely shaped by the crisis management of day-to-day survival. Shelter, food, and safety were often preoccupying factors that made planning for a "future" in the "long-term" a "difficult," or perhaps nearly incomprehensible task for clients at the shelter.

All this to say, workers often reflected on the many ways they felt contemporary institutions were failing to resolve the issue of homelessness and recognized, from experience, the countless challenges that confronted their clients in day-to-day life. While navigating singular crisis events with homeless clients was a routine part of front-line work, such work took place amid a broader structural situation that workers identified as problematic and complex but could do little to change. I consider such a structural situation as conceptually related to what cultural theorist Lauren Berlant (2011) defines as the "crisis ordinariness" permeating contemporary life. Berlant argues that, given the abundant exigencies and precarities generated so frequently under today's regimes of capitalism and liberal democracy, it is no longer useful to think of crisis as a rupture from ordinary life. Rather, crisis has come to be a defining feature of living, as so many people in the United States must struggle just to get by and survive the mounting stresses of ordinary life. As Berlant claims, the conditions of crisis ordinariness wear down contemporary subjects as optimistic attachments to ideas about a better life and a better future are arrested by the practical management of the crisis-induced contingencies of the present. The potency of Berlant's argument is reflected in this rhetorical question: When the

conditions of ordinary life entail the activity of being worn down by it, how is one to thrive and make a better life for oneself and others?

As I discuss later in this dissertation, such crisis ordinariness was a fundamental component that significantly shaped the affective and subjective worlds of front-line workers at Greener Pastures Shelter for Homeless Men. While they were constituted by pastoral power as optimistic and vulnerable subjects who cared, their work of care was articulated at a threshold of crisis ordinariness in which optimism could become cruel and vulnerability could yield costly consequences. This will become clear in the chapters that follow. But before I provide, in the last section of this chapter, a summary of each content chapter as a guidepost, I explain the methods I used to research the work of care at Greener Pastures.

Methods

As with many ethnographic accounts, the final form of this dissertation looks very different from what was imagined at the beginning (see Hammersley and Atkinson 2007, Emerson et al. 2011). I had intended on studying humanitarian organizations in international contexts, but for reasons that are not important here, my first couple research plans fell through. Eventually, I settled on studying nonprofit organizations in the context of the urban US, and Rustville's average-sized population and average socioeconomic makeup coupled with my few connections to nonprofits in that city made it a suitable place for research. My shift in context was accompanied by a shift in topic as I came to realize that the nonprofit world in the United States more broadly is riddled with the language of "care." A cursory internet search of some of the "mission," "vision," or "impact" statements of some of the largest nonprofits in the United States shows how this language has proliferated among faith-based and secular charities alike.

Also, it is worth mentioning that when I started the present research project, there was serendipitously an emergent interest growing among cultural anthropologists in the topic of care (Buch 2015). As this project unfolded over the year of its original incarnation, my primary interest became studying the work of “care” at a nonprofit organization in Rustville: what it was, what it did, what it meant to workers, and what challenges it presented. After months of trying, and failing, to obtain research access at five other organizations in Rustville, Greener Pastures Shelter for Homeless Men responded positively.

I was also granted access at another nonprofit organization in Rustville and conducted an equal amount of research there. This was a philanthropic organization and the content of the interviews I conducted with staff there was simply too distant from the content of the interviews at the shelter. While the workers there viewed themselves also as caring people, they did not routinely face crises, nor did they feel worn down by the heaviness of their work. On one hand, the ethnographic data I collected there was valuable and has contributed much to my thinking about the work of care. But on the other hand, I have decided that this data is better suited for an altogether different project than the one undertaken here.

To understand better the work of care at Greener Pastures, I conducted ethnographic research between July 2017 and September 2018. But I was limited as the shelter granted me access with a couple caveats. Upper management was willing to grant me access to the site given that I would not interview clients as that could be an “interruption” to clients’ “progress” or “success” and given that I would present my research proposal to workers at an “all-staff meeting” providing individuals an opportunity to opt in or out. Of the forty-four responses I received, eighteen were negative. So, I ended up focusing my research on twenty-six staff members at Greener Pastures. Their work represented diverse forms of caring about and for

homeless men, and I was hopeful that such diversity would make for a richer ethnography concerned with the work of care.

During my research, I observed and participated in a few ways at the shelter and always kept ample jottings and notes in several field notes journals. I observed ordinary shelter activities from the offices and front-desk area. I observed several meetings among staff, took three tours of the shelter given to visitors, and attended and observed five volunteer events. I also participated, on several occasions, in doing volunteer work for the organization. I worked in the community garden, collecting vegetables, and delivering them to a food pantry up the street. I made sandwiches that the front-desk staff handed out to both shelter clients and anyone who approached the shelter from the street who needed food. I also helped to prepare and package donated items into small kits that would be handed out in Greener Pastures “dispensary”: underwear, t-shirts, basic need items, toothbrushes, and hygiene supplies. I also observed and took rigorous notes during and immediately after any events of crisis occurred—e.g. emergency workers assisting a very ill man at the front desk; fire fighters helping a client who called emergency services at a housing complex; and police intervention at a volunteer event—once I identified incidents like these as “diagnostic events” integral to my study (Moore 1987). The data recorded during all the observations and participation mentioned above afforded me a sense of the day-to-day activities and ordinary rhythms of what went on at the shelter, which was valuable to a degree.

However, most of the data I focus on in this dissertation is based on interviews with staff at Greener Pastures which yielded abundant information regarding the work of institutional care. I conducted a total of forty interviews with twenty-six staff members in which fourteen workers were interviewed twice and twelve were interviewed only once. Follow-up interviews were

determined due to outstanding questions I wanted to pursue with specific interlocutors based on prior interviews. Interviews mostly took place at the shelter, but three took place at different subsidized housing complexes where a few shelter staff employed by Greener Pastures worked; a couple took place at local coffee shops at the request of workers; and one took place at an offsite office I used in another part of town due to a worker's unforeseen scheduling conflict.

Interviews, including follow-up interviews, took between forty-five minutes and two hours but most often concluded between one hour and one hour, fifteen minutes. As I viewed interviews as also a form of participant observation (Hammersley and Atkinson 2007:108-117), I kept notes in an interview journal of any noteworthy contextual features of space and place, time, and external conditions (e.g. noise and other chaotic distractions); recorded interviewees changes in mood, tone of voice, affect, or bodily gestures during interviews; and wrote potential follow-up questions in the margins so as not to distract workers from the points they were making in the moment.

I provide a short list of the most pertinent and frequently used first interview questions below.

Semi-structured Interview Questions for First Interviews

How long have you been working at Greener Pastures?

What do you do here?

What originally got you interested in doing this kind of work?

Could you describe what a typical day looks like for you?

What do you aim to accomplish in your work? Could you provide any examples or stories that show this?

What are your clients like and how do you interact with them on a day-to-day basis? Could you provide examples or stories that show this?

How would you describe your relationships with the clients here?

What are some of your personal beliefs and values that inform the work you do here?

Has doing this kind of work affected you in any way? How?

What are some of the most important things you've learned since you started working here?

What do you find most rewarding about what you do? Could you provide examples or stories that show this?

What do you find most challenging about what you do? Could you provide examples or stories to show this?

What are the biggest challenges that your clients face?

What is important about your job that I haven't asked you about?

It is important to note that nearly every question involved spontaneous follow-up questions as all first interviews were “semi”-structured. Further, my aim was “to facilitate a conversation” regarding the work of care, “giving the interviewee a good deal more leeway to talk on their own terms than is the case in standardized interviews” (Hammersley and Atkinson 2007:110). Second interviews were even more loosely structured around follow-up questions that were discerned after first interviews were transcribed and read. This typically entailed that my questions followed workers' lines of thought as they expounded on responses to my original prompts. Second interview questions most frequently involved the following types of follow-ups: “In our last interview, you mentioned X, what else can you tell me about X?” “What did you mean when you said Y?” Or, “could you explain Z a bit more?”

All interviews were recorded on an audio recording device and transcribed by me on computer software typically within two to four weeks of the interview date. Both audio recordings and transcriptions were kept as digital files on a security encrypted external hard drive which I kept locked in a drawer in my office in Rustville. After audio recordings were saved on the external device, they were deleted from the audio recorder, which I always kept with me at the shelter.

Data organization and analysis went through several iterations. As I mentioned above, the initial intention of my research was to study the work of care: what it was, what it did, what it meant to workers, and what challenges it presented. However, as I learned more about the work of care at Greener Pastures, it became apparent that I would need to situate the work of care along three axes that fundamentally shaped the worlds of workers: ethics, affect, and subjectivity. In terms of ethics, I found that an ethics of optimism motivates and informs the work of care at Greener Pastures. Shelter staff wanted to be effective workers in an effective institution and hoped their work contributed, in small ways, to making the world a better place. By providing a variety of services for homeless men and doing their part to fulfill the duties of their institutional roles, workers took part in ethical relations guided by optimism. In terms of affect, I found that specifically for front-line shelter staff, such optimism often became cruel as their routine work wore them down affectively and emotionally. Because their optimistic work unfolded amid circumstances primarily shaped by crisis, front-line workers often found themselves profoundly affected by impasses of care in which they could do nothing more to care for clients. Third, in terms of subjectivity, I found that front-line staff persisted despite such cruel optimism by attempting to negotiate fraught and unclear boundaries between themselves and their clients. Given the conditions of crisis of their work and their precarious position at the

front-line, such workers were constituted as both vulnerable and crisis-shaped subjects that negotiated boundaries as a last resort to cope with the often-costly consequences of providing care to marginalized homeless men.

In short, the workers of this study shared aspirations that their work of care would add up to a good life for others and for themselves. But, for those who cared in intimate, hands-on ways, these “good life fantasies” (Berlant 2011) were often frayed by the crisis ordinariness that their everyday work entailed. Rather than give up entirely on their attachments to this fantasy, front-line workers preserved themselves and the good life they imagined through the negotiation of boundaries with those for whom they care. Below I summarize the chapters that make these points clear.

Chapter Summary

Rather than relying on ethnographic data as the other chapters do, the second chapter, “Pastoral Power: A Work in Progress,” is a theoretical intervention. In it, I explore Foucault’s work on “pastoral power” in detail. This idea was less like the highly developed concepts of sovereign power, biopower (1990), and disciplinary power (1995), and Foucault’s divergent articulations (1979, 1982, 2007 [1977-1978]) suggest that it was still a work in progress. I investigate each account to see how his genealogy developed along thematic lines and provide a twenty-two-point chart to offer a more comprehensive picture of pastoral power. I also discuss how the concept of pastoral power has been used in particular ways that draw on several of these themes and explore several other themes that have been overlooked. I claim that some of these overlooked themes point toward how subjects who care for others may be produced rather than just toward the production of confessing and obedient subjects who are cared for. I draw on these

themes to make claims central to chapters three and five: namely, that subjects who care for others are constituted by a pastoral optimism about effective institutions of care (chapter three) and by a pastoral vulnerability fundamental to front-line relationships of care (chapter five).

The third chapter, “An Ethics of Optimism,” explores the ethical worlds of workers at Greener Pastures. As I mentioned above, Foucault’s work on pastoral power (1979, 1982, 2007) offers insight into how the subjects who care for others are constituted. As I elaborate, pastoral power has historically produced and continues to produce optimistic subjects who care for others. It is precisely through the care of the shepherd that the flock will be guided to salvation, whether in the next life or this one. By doing the work of care in their institutional settings, contemporary workers engage an ethics of optimism directed toward a better future. Drawing on interviews with workers at Greener Pastures, I explore how workers viewed their work of care with homeless men as an ultimately hopeful endeavor. Workers had a sense that, through their institutional labors of providing services and care for their clients, they were doing their part to make the world a better place. Such a “good life fantasy” (Berlant 2011:2) of effective institutional care was the basis of what I call an “ethics of optimism” which motivated and drove the work of homeless care at Greener Pastures.

In the fourth chapter, “Cruel Optimism at the Impasses of Care,” I explore how crisis merges with pastoral power as front-line workers found themselves affected by doing the work of care. Despite their best efforts to be effective workers, the optimism of the work of care turned out to be cruel as front-line workers were so often confronted by crises in which they could do little to care, and which wore them down affectively and emotionally. As I found, they routinely faced feelings of disappointment, burnout, and futility as crisis-induced impasses of care revealed the ineffectiveness of their attempts to care. It seems that today the conditions of the

front-line work of institutional care for homeless men are also the conditions that wear down front-line workers. Drawing on critical theorist Lauren Berlant's diagnosis of the precarity of our current age (2011), I argue that such impasses of care are crucial sites of cruel optimism in contemporary institutions. They reveal the limits of both pastoral power and the optimism of the subjects who care amid the crisis ordinariness so characteristic of our historical present.

In the fifth chapter, "Where I End and You Start," I explore worker subjectivity amid these front-line contexts of cruel optimism. Drawing again on Foucault's work on pastoral power (1979, 1982, 2007), and Berlant's ideas in "Cruel Optimism," (2011), I show front-line worker subjectivity was constituted both historically and amid present circumstances of crisis. As Foucault's genealogy suggests, pastoral power produces vulnerable subjects and I claim that this persists today. But vulnerability primarily bears costly consequences amid a crisis-induced present that also shapes worker subjectivity. Responding to the consequences of being constituted as vulnerable subjects and the situation of crisis ordinariness in which their work unfolded, workers exercised a form of "lateral agency" that offered a relief and reprieve from work without making their structural situation any better.

CHAPTER 2. PASTORAL POWER: A WORK IN PROGRESS

Introduction

In this chapter, I explore pastoral power beyond previous conceptual investigations by focusing on its deep genealogy, thematic elements, and presence in the contemporary world. Pastoral power is “a work in progress” in two senses. First, as I claim, pastoral power was not a wholly realized concept for Foucault as was disciplinary power (1995) or biopower and sovereign power (1990). While there is significant consistency in his different accounts about pastoral power (1979, 1982, 2007), there are also some points of departure that suggest his own thinking was a kind of “work in progress.” Rather than attribute a canonical quality to any singular account, I attempt to look at each genealogical theme in each era he explores as this affords a more comprehensive picture of pastoral power’s contours. Second, insofar as Foucault claimed that pastoral power is still with us today, it continues to be “a work in progress” in the contemporary world. It persists through its productive effects across innumerable institutions of care in some ways that have been identified and in others that have not. The first two sections deal with the first conceptual sense of “a work in progress” while the last section is concerned with the second practical, contemporary sense.

In the first section, I briefly discuss Foucault’s approach to power to contextualize the specific form that “pastoral power” has taken. In the second section, I offer a detailed reading of several of his works that specifically deal with pastoral power (1979, 1982, 2007) to trace the significant themes in the historical eras of pastoral power’s origins, institutionalization, and development and provide a twenty-two-point chart that other researchers may find useful for further explorations of pastoral power. If we consider pastoral power in all the eras and

dimensions described by Foucault, then we gain a fuller picture of how it may continue to persist in our own time. Finally, in the third section, I trace several lines of thought via a brief literature review of the linkage between pastoral power and the contemporary world. I conclude by positing a vital but missing trajectory of study into pastoral power: that is, what is to be made of the shepherds, these “officials” that have proliferated since the eighteenth century (Foucault 1982:215)? Does pastoral power not also shape, affect, and constitute them? In what ways? These questions are further explored in the subsequent content chapters of this dissertation, but without the context offered here, they will remain unclear.

Power

One of Michel Foucault’s most seminal contributions to contemporary thinking has been his insight into the variable and complex ways in which power has shaped and continues to shape the modern world. His thoughts about power have influenced, to mention only a few oft-cited scholars among an extensive list, philosophers Agamben (1998), Butler (1990), and Deleuze (1988); sociologists Rose (1998), Miller (with Rose 1992), and Gordon (with Miller and Burchell 1991); as well as a plethora of cultural anthropologists (Asad 1993, Fassin 2012, Faubion 2011, Ferguson and Gupta 2002, Hirschkind 2006, Laidlaw 2014, Mahmood 2005, Nguyen 2010, Rabinow 1996, Robbins 2003). And, though his career included historical excursions into topics as diverse as madness (2003), illness (2012a), the human sciences (2005, 2013), punishment (1995), sexuality (1988, 1990, 1990b), and a few others, a major fulcrum on

which nearly all his work pivoted, at times explicitly and at others implicitly, was a concern with relations of power vis-à-vis the historical eras that have shaped our present world.⁵

Power, for Foucault, is not only the potential for or actual expression of violence, threat, and coercion. Nor is it just a political structure of top-down rule that perpetuates itself in any unified way, as several European political thinkers (he occasionally mentions Hobbes) had conceptualized it for centuries before his time (1990:135, 2003). Nor is it simply the negative force of repression that is enforced by authoritarian regimes (1990, see also Dreyfus and Rabinow 1983). In his own words, our thinking should not be confined to a concept of power as “a unitary system organized around a center that is at the same time its source, and that is driven to continual expansion by its internal dynamic” (2017:294). In short, power is not merely the singularly identifiable, writ large “domination” of force exerted by some over others (1997:290-293).

Rather, in Foucault’s works, power is often much subtler, more diffuse, and even more ubiquitous than previous analyses accounted for. It can be observed at both the macroscopic scale of rationalities and technologies within a society or at the microscopic scale of the everyday practices and reflections of individuals. Described most succinctly, power is “a domain of strategic relations between individuals or groups—relations in which what is at stake is the conduct of the other or others, and which, according to the case, institutional frameworks in which they develop, social groups and epochs, resort to various procedures and techniques” (2017:294). And, if strategic relations between individuals or groups exist everywhere in a

⁵ Even as it can be argued that several major discontinuities categorize Foucault’s oeuvre, I take his works together as he seemed to, even if in hindsight. For more see the 1984 interview “Ethics of the Concern for the Self”(1997).

society, as Foucault assumes, then power must be everywhere as it “comes from everywhere” (1997:63).

Just because power was omnipresent in Foucault’s analytics does not somehow imply that it is unidentifiable, or worse, “nowhere” (cf. Schuller 2012:182). And just because his version of power is “strategic” does not imply nefarious intentions or actions (but also see Foucault 1982:224-225). To the second point and what has occasionally been overlooked is that in some of Foucault’s accounts, power can be both *useful* and *positive*. It produces subjects while it produces the “games of truth” in which subjects may be constituted by relating to and transforming themselves (2017). It also produces the conditions of “the freedom of the subject and its relationship to others” (1997:300). In those ways (and others), power is *productive* (see Rose 1998).

Here, I just want to point out that Foucault should not be attributed with a view that holds power to be exclusively repressive, wicked, or ill-intentioned, or inevitably masking over its own repression, wickedness, or ill-intentions. On the contrary and in an interview in 1984, the year of his death, he exclaimed bluntly to avoid the frequent confusion attributed to his view: “Power is not evil. Power is games of strategy. We all know that power is not evil!” (1997:298). And to the first point (that power is “nowhere” because it is everywhere), Foucault actually went to great lengths to provide a clear way to identify power by offering an analytic delineation (not a theory, to be sure) at several different registers that have distinct histories but persist and coalesce in novel ways in our time.

First, “sovereign power” is the power which demands that subjects follow the law or risk punishment for their disobedience (Foucault 1990). This form of power is perhaps most simply typified as the relationship between royalty who have authority to sentence to death anyone who

proves disloyal and the subjects of their kingdoms who unequivocally are expected to be loyal. But, as I mentioned above, there is more to power than just its repressive aspects. Thus, second, unlike the sovereign's power over life and death (1990:135), "biopower" is the power that exerts a positive influence on life, that endeavors to administer, optimize, and multiply it, subjecting it to precise controls and comprehensive regulations" (Foucault 1990: 137). This form of power is exemplified in the relationship between nation-states that control populations through numerous and diverse techniques (e.g. public health, risk management, statistics, life expectancy, housing) and the groups of people that are thereby regulated by them (see Rose 2007). And third, "disciplinary power" is the power which standardizes the behavior of individuals of training and ensures their political docility and economic utility through complex mechanisms of surveillance (Foucault 1995). This form of power can be recognized most simply in the relationship between regimented institutions (e.g. prisons, schools, army barracks, hospitals) and the individual bodies that are normalized and kept on track by them.

However, there is another form of power that Foucault called "pastoral power." Pastoral power has not received the attention that the other types of power have, perhaps because Foucault never systematically addressed it in any comprehensive publication during his lifetime. But, he did specify a few things about this longstanding and unique power that deserve review here to clarify this much less-discussed and lesser-known technology of power. I describe them in detail in the next section to offer a clearer sense about the genealogy he explored and the novel conceptual tool he provided. Ultimately, pastoral power has changed throughout the course of its history—from its pre-Christian, non-Greek origins, to its hybridized Greco-Christian institutionalization, and on to its Enlightenment era development. Nonetheless, it continues today as a power of care in institutions and organizations devoted to helping human life in need,

shepherding those society deems marginalized and in need of guidance and care. As I show in chapters three and five, there is more to be gained from the concept of pastoral power than has been assumed. The next section provides an in-depth reading of the thematic elements of pastoral power that Foucault detailed in several account (1979, 1982, 2007). However, a summary chart is provided at the end of the section to offer a shorthand version that may be useful.

Genealogy of Pastoral Power

Pastoral Origins

Foucault traced the origins of pastoral power to the ancient Mediterranean East. He branded it as “pastoral” in that it was founded on a model of the domestication of animals, i.e., pastoralism, which was a common practice of the pre-Christian inhabitants of Egypt, Assyria, and Judea (1979:227-228, 2007:123). Analogous to how shepherds watched over, protected, and guided their flocks of animals were the ways in which gods and religious leaders cared for their flocks of people, and Foucault attempted to show the theological grounding to this deeply historical power (ibid, 1982).

In his lecture, “Omnes et Singulatim” (1979), Foucault began with references to ancient Egyptian texts and continued with peppered-in reference to early Hebraic literature where he specified several themes which made this earliest form of pastoral power distinct from ancient Greek religious and political thought (1979:227). First, whereas the Greek gods owned the land, and this principally determined their relationship with men, the relationship between the “Shepherd-God” and the flock was fundamental for ancient Hebrews, and the land was only secondarily given to, or promised to the flock (1979:228). So pastoral power was originally exercised over a wandering flock and not over a given territory of land.

Second, whereas a strong Greek city could endure without the continual presence of a leading lawgiver, the shepherd's "immediate presence and direct action cause the flock to exist" (1979:229). In other words, the simple presence of the shepherd brought otherwise individual animals together to make up a "flock," and this flock relied solely on the shepherd's leadership. Upon hearing the voice of the shepherd calling, the dispersed individuals of the flock gathered together. And, once the shepherd disappeared beyond view, the gathered flock scattered. Fundamentally, the earliest forms of pastoral power required that the shepherd "gathers together, guides, and leads his flock" (ibid).

Third, whereas the Greek deity required a competent leader or "helmsman" to save the city by directing the ship away from the rocks (a somewhat common Greek metaphor about political leadership), the shepherd's role itself was "to ensure the salvation of the flock" (ibid). This required of the shepherd a "constant" kindness to foster the flock day by day and provide for their hunger and thirst, an "individualized" kindness which was directed toward each and every member of the flock, not leaving even one behind, and a "final" kindness to provide enduring protection and lead to good grazing land (ibid). In its original form, pastoral power required the kindness of the shepherd directed always toward the salvation of the flock.

Fourth, Foucault finds a difference between the shepherd and the Greek leader in their ideas about wielding power as a duty. A Greek leader had a duty to make decisions in the interests of all, and even if he had to give up his life in battle, his "sacrifice was offset by something extremely precious: immortality." As Foucault put it: "He never lost" (1979:230). On the other hand, the shepherd was entirely devoted to his flock. They were his constant concern and everything he did was geared toward their good (ibid). He watches over them, pays attention to all of them, and scans each one. He has "got to know his flock as a whole, and in detail" and

his power “implies individual attention paid to each member of the flock” (ibid). This to say, the power of the shepherd involved his dedicated duty and devotion to each individual in the flock.

In its origins, pastoral power emerged in the societies of the ancient Mediterranean East where, as Foucault thematized in “*Omnes et Singulatim*”: 1) it was a power that shepherds wielded over flocks rather than a power over any specific land, 2) it required the shepherd to gather together, guide, and lead his flock, 3) the shepherd’s role was to ensure in kindness the salvation of his flock, and 4) the shepherd’s power implied individual attention paid to each member of the flock.⁶

Elsewhere, Foucault provides a different picture. In the 1977-1978 lectures at the Collège de France, Foucault covers four features that do not perfectly align with the points he makes about the origins of pastoral power in the 1979 Tanner Lectures discussed above. The first point remains the same: pastoral power was exercised over a flock in movement from one pasture to another rather than over a region of land (2007:125). To reiterate, whereas the Greek god “is a territorial god,” the Hebrew God “is the God moving from place to place, the God who wanders” (2007:125). So, the first point in both accounts (1979, 2007) is consistent.

Foucault’s second point is a divergent but vitally important one. In the “Security, Territory, Population” lectures, pastoral power was entirely defined by its beneficence and care for the individuals in the flock (2007:126). Whereas the Greeks characterized power through many features (e.g. omnipotence, wealth, conquest, triumph), pastoral power is fundamentally

⁶ Foucault was careful neither to claim that ancient Hebrew society wielded political power according to the four points he mentioned nor that those four points make up a coherent conception of political power in the first place. Rather, they are “just themes that Hebraic texts associate with the metaphors of the Shepherd-God and his flock of people” and are “paradoxical, even contradictory” themes (1979:230). Nonetheless, they are points of distinction that Foucault thought worth making between the thinking of the ancient worlds of the Greeks and Egyptians/Hebrews.

beneficent as “it’s only *raison d’être* is doing good” and it’s essential objective is “the salvation of the flock” (2007:126). The shepherd looks after each member of the flock, makes sure the sheep do not suffer, searches after those that get lost, and must treat any that have been injured (ibid). The second point in this account is straightforward enough: “Pastoral power is a *power of care*” (2007:127 [italics added]).

Like the second point, the third point varies in the two lectures. In the 1977-78 lectures, the third feature of pastoral power is that the shepherd must be vigilant to keep watch over the flock and must serve them for their own well-being (2007:128). Unlike the Greek gods or sovereigns who display their power through their strength, superiority, or splendor, the shepherd’s power “manifests itself in its zeal, devotion, and endless application” (2007:127). His office is not defined as an honor but as a “burden and effort” (ibid). Through much work, the pastor had to keep watch over the flock and had to be selfless in the service of the flock.

And the fourth point diverges a bit also: pastoral power is paradoxically totalizing and individualizing. Even though this is where the title “*Omnes et Singulatim*” originates, Foucault elaborates this point succinctly in “Security, Territory, Population” as well. Pastoral power, in its original formation, entailed the oversight of each sheep and the whole flock and the central challenge of a sacrifice of one for all and of all for one. On one hand, the shepherd must sacrifice himself for the whole flock. On the other hand, there emerged a problem where the shepherd must neglect or abandon the whole flock for each one of the sheep. He calls this a “moral and religious paradox that was to become “at the absolute heart of the Christian problematic of the pastorate” (2007:129) during its institutionalization (see below). That pastoral power is both totalizing and individualizing is the reason Foucault named this fourth element such a “paradox of the shepherd” (ibid).

I summarize the four themes of the origins of pastoral power as Foucault elaborated in “Security, Territory, Population” as follows: 1) it is power that is exercised over a flock in movement rather than over an area of land, 2) it is a power of beneficence and care for a flock that guides toward an end, 3) it is a power of vigilance and selfless service, 4) it is a power that is both totalizing and individualizing.

Such is Foucault’s rendering of the *origins* of pastoral power in both the 1979 lecture, “Omnes et Singulatim” and in a lecture from 1978’s “Security, Territory, Population.”

Pastoral Institutionalization

It was not until the second and third centuries that pastoral power took root in the institution of the church and began to spread with the expansion of Christianity into Europe in the Middle Ages. Foucault traces the next phase of pastoral power via the ancient Christian literature of Chrysostom, Ambrose, Cassian, and others. During this nascent phase of the Christian era, the Hebrew themes of the Shepherd-God were considerably altered in four ways that Foucault elaborates and draws several distinctions, yet they do not align evenly with the original Hebrew/Greek themes. Again, I begin with focus on the Tanner lecture “Omnes et Singulatim.” (1979).

First, even as the Hebrew shepherd had to assume responsibility for the destiny of every individual sheep and the entire flock, the Christian shepherd had to account for all the good and evil actions of every individual sheep (1979:236). Between the shepherd and each sheep, “Christianity conceives a complex exchange and circulation of sins and merits” (ibid) wherein the shepherd shares in the sin of each sheep and likewise, the shepherd will find his own

salvation by helping the flock find theirs. Through the Christian institution, pastoral power shifted to involve a relationship where the shepherd shared in the risk of the flock.

Second, the flock followed the Hebrew Shepherd-God by complying with his will and law. But in Christianity, there was to be a relationship of “individual and complete dependence” between flock and shepherd (1979:237). This is also a point of distinction between early Greek and Christian thought. A Greek obeyed because it was either the will of the city or the law or because of a rational persuasion of someone else, but obedience was always a provisional means to an end. Whereas a Christian obeyed because obedience is a virtue, an end-in-itself. In the hybridized Greek Christianity, however, particularly in the writings of the monastics, if the pathos was a “willpower exerted over oneself, for oneself,” (ibid) then apathy (a-patheia), as Foucault notes, became that prescribed, permanent state of obedience that submits one’s own willpower to the command of the shepherd. Thus, pastoral power through the institution of Christianity came to require the submission of each member of the flock’s own willpower as well as their ultimate obedience to the shepherd.

Third, that the shepherd must have knowledge about the sheep becomes amplified. Early Christianity adopted and altered two Hellenistic instruments to know a flock—to know their material needs, their public sins, and “what goes on in the soul of each one, that is, his secret sins, his progress on the road to sainthood” (1979:238). Christian pastorship drew on the widespread practices of self-examination and the guidance of conscience among the Pythagoreans, Stoics, and Epicureans and associated them as a single and crucial component of pastoral power—confession. Even though he does not dwell on this point (as he does in later lecture courses, i.e. 2005), Foucault calls this particular course of time “the emergence of a very strange phenomenon in Greco-Roman civilization, that is, the organization of a link between

total obedience, knowledge of oneself, and confession to someone else” (1979:241). Through the Christian institution then, pastoral power linked and amplified the previously separated components of the Greek hermeneutics of the self (see also 2014:148).

The fourth transformation of pastoral power was that those changed Christian techniques (of obedience, confession, etc.) came to aim at the “mortification” of individuals. Mortification, in this sense, was a kind of death whereby one renounced this world and oneself to achieve life in another world. This is distinct from the Greek idea of political power as there is no sacrifice of the self for the city. Rather, Christian mortification is a kind of relation with oneself. This fourth transformation, which Foucault notes, may be the most important transformation, “introduced a game that neither the Greeks nor the Hebrews imagined. A strange game whose elements are life, death, truth, obedience, individuals, self-identity” (1979:241).

Due to the institutionalization of Christianity, pastoral power transformed in the following ways during the first few centuries and up to the European middle ages, where according to Foucault’s 1979 lecture: 1) it involved a relationship of shared risk between shepherd and flock, 2) it required the individual and complete dependence and obedience of the flock, 3) the shepherd needed to know everything about the soul and secret sins of the flock rather than just their needs, and 4) pastoral power required the mortification of individuals and introduced a “strange” new game of strategic relations.

In the lectures at the Collège de France, Foucault looks at three other features of the Christian pastorate in church writings from the third to the sixth century. The first is that pastoral power is a power that guides individuals and the community to salvation. In fact, this is its “fundamental objective” (2007:166). This involved a principle of “analytic responsibility” in which the shepherd had to account for “every act of his sheep, for everything that may have

happened between them, and everything good and evil they may have done at any time” (2007:170). It involved a principle of “exhaustive and instantaneous transfer” in which the pastor considers “every merit and fault” of the flock to be “his own act” (ibid). And it involved a principle of “sacrificial reversal” in which the pastor himself is saved by “accepting the danger of dying in order to save the souls of others” (2007:171). Lastly, it involved a principle of “alternate correspondence” in which the pastor’s own faults and weaknesses “contribute to the edification of the sheep and are part of the movement, the process, of guiding them towards salvation” (2007:172). These four principles related to the “aim” of pastoral power which was the salvation of individuals and the community.

Second, pastoral power was a power that institutionalized the pure obedience of a flock to a shepherd. First this involved “complete servitude” insofar as the Christian is entirely subjected to the will of the pastor (2007:177). It involved obedience not to get to a specific result, but to arrive at a “state of obedience” (ibid). And finally, it involved a “mode of individualization” that entailed “the destruction of the self” (2007:180), much like the “mortification” discussed in “*Omnes et Singulatim*” (1979). So, pastoral power entailed the absolute submission of the will of the flock to the will of the pastor.

Third, because of its Christian institutionalization, pastoral power became a power to extract hidden truths. It required spiritual direction in which one examined one’s own conscience not as an instrument of self-mastery, but as an instrument of self-subordination to the pastor (2007:182). Through spiritual guidance, individuals were required to tell the pastor what they had done, thought, been tempted by, and had experienced “to mark and fix more firmly the relationship of subordination to the other” (ibid). Thus, pastoral power produced the secret truths of the individuals of the flock.

According to the “Security, Territory, Population” lectures, the Christian institutionalization of pastoral power fundamentally changed it in the following ways: 1) it became a power that guides individuals and the community to salvation, 2) it became a power of pure obedience, and 3) it became a power to extract hidden truths.

Another instance, in the essay “Why Study Power: The Question of the Subject” which I refer to in its extended format as “The Subject and Power” (1982), Foucault covers four features that do not perfectly align with the points he makes about the institutionalization of pastoral power in the other lectures discussed above. In “The Subject and Power,” Foucault is much briefer in explaining the elements of pastoral power that the institution of Christianity brought into being. First, and directly opposed to “political power,” pastoral power was salvation-oriented toward an afterlife. It became “a form of power whose ultimate aim is to assure individual salvation in the next world” (1982:214). Rather than merely provide for the immediate needs of the flock, the shepherd had to ensure that the flock found salvation beyond daily sustenance. The institutionalization of Christianity changed pastoral power to include this other-worldly dimension.

Second, “royal power” was based on the “principle of sovereignty” which demanded a sacrifice from the subjects of the sovereign to save the throne” (1982:214). On the other hand, pastoral power was itself oblation. It was distinct from sovereign power in that it did not merely command but was “prepared to sacrifice itself for the life and salvation of the flock” (ibid). Through the institutionalization of Christianity, pastoral power thus required a willing sacrifice of the shepherd’s self for the sake of the flock.

Third, pastoral power became even more individualizing. Rather than looking after “just the whole community” which, according to Foucault, is akin to a legal type of power, it became a

form of power to look after each and every individual in their particularities and throughout their entire life (1982:214). The early Christian church developed techniques of individualization in which each member of a flock could be known, accounted for, provided for, and directed.

And fourth, for pastoral power to be exercised, it required knowledge of the inside of people's minds, the exploration of their souls, and the revelation about their innermost secrets (ibid). In his words, it "implies a knowledge of the conscience and an ability to direct it" (ibid) that became known through participation in confession. Shepherds needed to inquire about the souls of the flock in order to prescribe the correct actions and conduct according to each individual's needs.

Through Christianity's institutionalization according to "The Subject and Power" (1982), pastoral power shifted to become a power: 1) aiming for individual salvation, 2) willingly self-sacrificial for the salvation of the flock, 3) looking after the individual and community, 4) requiring knowledge about the inside of people's souls and minds.

Such is Foucault's rendering of the *institutionalization* of pastoral power in the 1979 lecture "Omnes et Singulatim," the "Security, Territory, Population" lectures, and the 1982 essay "The Subject and Power."

Pastoral Developments

As I have described thus far, according to several of Foucault's accounts, pastoral power originated in the ancient Near East and became institutionalized during the early Christian era and over the next millennium or so throughout Europe. But, in the eighteenth century, it went through three dramatic developments briefly outlined in "The Subject and Power."

First, the objective of pastoral power changed. Rather than the shepherd leading the flock to salvation in the next life, the focus became salvation in this world. He writes: “A series of “worldly” aims took the place of the religious aims of the traditional pastorate” (1982:215). To this point, Foucault mentions the state’s new pastoral role through its involvement in ensuring a population’s this-worldly problems are met: health, sufficient wealth, standard of living, security, protection against accidents, as well as medicine and the relative “welfare function” of medicine (ibid).

Second, there was a general increase in the “officials” of pastoral power. This could take the form of power exerted by a “state apparatus” or a “public institution such as the police” yet also could take the form of power exerted by “private ventures, welfare societies, benefactors and generally by philanthropists,” by families, and also by “complex structures such as medicine” which were linked in the private sector through the sale of services on a market economy and in the public sector to institutions such as state hospitals (1982:215). In other words, a significant development since the Enlightenment period was the proliferation of those institutions, structures, and individuals exercising pastoral power in novel ways—those official shepherds holding long-standing or emergent state or non-state pastoral offices.

Third, there was also an increase in the “aims and agents” of pastoral power which focused on one hand, on the population with a “globalizing and quantitative” knowledge, and, on the other, on the individual with an “analytical” knowledge (1982:215). During and after the eighteenth century, pastoral power transformed from its purely religious roots to a far-reaching phenomenon. It “suddenly spread out into the whole social body; it found support in a multitude of institutions” (ibid) like the family, medicine, psychiatry, education, and employers that shared the tactics of “individualization.” Importantly, pastoral power was no longer distinct from or a

rival of political power. Rather, the state took on many of the pastoral functions previously undertaken by the church while pastoral power diffused throughout an array of social institutions beyond the state.

As Foucault conceptualized it in “The Subject and Power,” pastoral power developed during the Enlightenment period in three fundamental ways: 1) it became a power concerned with salvation in this life rather than the next, 2) it became more complex through an increase in official pastors spread throughout both the public and private sectors, and 3) it became more pervasive as a plethora of social institutions adopted and utilized individualizing tactics.

To summarize clearly the origins, institutionalization, and development of pastoral power in Foucault’s accounts (1979, 1982, 2007), I provide a chart on the following page that covers the major elements of his genealogical dissections. The elements are not entirely in agreement nor are they entirely coherent. But, because these different accounts were given in brief essay or lecture format, it is perhaps better to view them as provisional sketches rather than more definitive works like “Discipline and Punish” or the first volume of “The History of Sexuality.” So, rather than describe and analyze each point of divergence as an inconsistency, I use the points as amalgamated pieces describing broadly the significant features of pastoral power through time as Foucault elaborated.

HISTORICAL ERA	LECTURE / ESSAY	THEMATIC ELEMENTS
Pastoral Origins	<i>Omnes et Singulatim</i>	1) Power over flocks rather than over land	2) Power to gather together, guide, and lead	3) Power to ensure in kindness salvation	4) Power requiring individual attention
	<i>Security, Territory, Population</i>	5) Power over flocks rather than over land	6) Power of care that guides toward an end	7) Power of vigilance and selfless service	8) Power both totalizing and individualizing
Pastoral Institution- alization	<i>Omnes et Singulatim</i>	9) Power involving relationship of shared risk	10) Power requiring dependence and obedience	11) Power to know everything about souls of the flock	12) Power requiring individual mortification
	<i>Security, Territory, Population</i>	13) Power that guides individuals and the community to salvation	14) Power of pure obedience	15) Power to extract hidden truths	X
	<i>The Subject and Power</i>	16) Power aiming for individual salvation	17) Power to be self-sacrificial for flock's salvation	18) Power looking after community and individual	19) Power requiring knowledge of souls and minds
Pastoral Develop- ments	<i>The Subject and Power</i>	20) Power concerned with this life	21) Power highly complex	22) Power pervasive in society	X

As the chart on the last page shows, Foucault identified and associated a variety of thematic elements of pastoral power in the specific historical eras of its origins, institutionalization, and developments. No single essay or lecture should be taken as an authoritative or definitive account. Rather, I view the twenty-two points above as complementary, though not always overlapping, because this allows us to see the threads weaved together throughout a lengthy history covering some continuity but also the slow movement of pastoral power since its beginning. What follows explains that much scholarship concerned with pastoral power traces historical continuity with Foucault's work along specific lines. Below, I show some notes of resonance between recent research and Foucault's genealogy. In making these points explicit, I aim to contextualize and frame my own research. Researchers who find these points useful may continue to build on such an extended genealogy.

Contemporary Pastoral Power

Pastoral power persists in the contemporary world in multiple ways. First, pastoral power persists today as a power requiring individual attention (#4)⁷, a power both totalizing and individualizing (#8), a power requiring dependence and obedience (#10), a power to know everything about the souls of the flock (#11), a power of pure obedience (#14), a power to extract hidden truths (#15), and a power requiring the knowledge of souls and minds (#19). Perhaps the clearest and farthest-reaching illustration of this history's presence in contemporary practices has been elucidated by Nikolas Rose (1998). According to Rose, pastoral power is no longer exemplified only in relationships between priests and their parishioners, but also in relationships between therapists and their patients and social workers and their clients, among

⁷ Parenthetical numbers refer to the chart on p. 50.

others, where a relation of guidance between a seeming authority or experts and individual members of a group exists. In “Inventing Our Selves,” Rose provides a critical genealogy of the world of “psy”—psychology, psychiatry, and related disciplines—to reframe the constitution of the contemporary subject. The practice of these disciplines requires individual attention and is individualizing (1998: Ch.5). It requires dependence, obedience, knowledge of souls and minds, and the extraction of hidden truths as contemporary subjection entails the confession and revelation of the truth about one’s innermost self and demands a compliant self-examination and self-mastery (1998: Ch. 4). Thus, numerous themes that Foucault identified have been used to investigate pastoral power in the “psy” world (see also Langford 1998).

Second, the traces of pastoral power have also been discovered in diverse places as well. That it is exercised over a flock rather than over land (#1, #5), is fundamentally beneficent (#6), and is individualizing (#8) has been identified in the sacrificial moral language used by French humanitarian actors (Fassin 2010:38). That it requires a knowledge of souls and minds and an extraction of hidden truths (#14, #15, #19) has been found in the interiorized forms of clinical care in heroin detoxification clinics and beyond in the American Southwest (Garcia 2010:30-31). And that it a power of care (#6) exercised by the state over a flock rather than a territory (#1, #5) has been linked to the “benevolent cruelty” of child welfare systems working with resettled African refugees in Australia (Ramsay 2017). And third, pastoral power has also been conceptually addressed in a couple ways. Pandian (2008) has adeptly rethought Foucault’s sole preoccupation with the government of humanity to consider the role of pastoralism also in relation to the government of animals. And, in a provocative article recently published, O’Neill (2018) has mentioned pastoral power to show “the importance of wolves,” but did not engage Foucault’s idea in any substantial way.

Foucault insisted that pastoral power is still with us in the contemporary world (2007:148). And he was clear that it was particularly the Christian pastorate that became the “prelude to governmentality through the constitution of a specific subject, of a subject whose merits are analytically identified, who is subjected in continuous networks of obedience, and who is subjectified through the compulsory extraction of truth” (2007:184-185). It seems that much scholarship has already considered this subject in the contemporary world. But because pastoral power has grown immensely and has become highly complex since the eighteenth century, and because its “officials,” “aims,” and “agents” have proliferated (1982:215), I think it is necessary to think beyond Foucault to grasp the production of an altogether different subject who nonetheless is constituted in pastoral power. I am concerned in this dissertation not with how pastoral power produces confessing and obedient subjects who are cared for and guided in contemporary institutions, but with how pastoral power produces subjects who care for others. As I mentioned in the last chapter, these subjects are in many ways, the ideal counterpart to those who are cared for and governed. And while there were far fewer pastors than flocks, these shepherds have always been produced by the same strategic relations of pastoral power that constituted their flocks.

But more specifically, drawing on some of Foucault’s less addressed thematic elements that I briefly outlined above, I claim that pastoral power produces subjects who care for others along two lines. First pastoral power produces optimistic subjects who care for others. In the era of its origins, pastoral power was a power to gather together, guide, and lead (#2), a power to ensure in kindness salvation (#3), and a power of care that guides toward an end (#6). In the era of its institutionalization, pastoral power was a power that guides individuals and the community to salvation (#13), and a power aiming for individual salvation (#16). In the era of its

development, pastoral power became a power concerned with salvation in this life (#20). Taken together, these points suggest that, throughout its long history, pastoral power has produced shepherds who aimed toward salvation, though the meaning of salvation has shifted significantly in each era. And aiming toward salvation entails an optimism that salvation may be achieved. I explore this optimism in the next chapter.

Second, pastoral power produces vulnerable subjects who care for others. In the era of its origins, pastoral power was a power of vigilance and selfless service (#7). In the era of its institutionalization, pastoral power was a power involving a relationship of shared risk (#9) and a power to be self-sacrificial for the flock's salvation (#17). Taken together, these points suggest that, also throughout its history, pastoral power has produced shepherds who may bear consequences in their attempts to care for their flocks. I explore this "pastoral vulnerability" in chapter five.

I claim that pastoral optimism and pastoral vulnerability are persistent features of pastoral power in the contemporary world, albeit they constitute the subjects who care for and guide others rather than the subjects who are cared for and guided by others. At Greener Pastures Shelter for Homeless Men, workers engaged in all kinds of practices to care about and/or for the homeless residents. And this care always involved an optimism in the effectiveness of their institution and work and for front-line workers, involved a vulnerability in which their care could bear costly consequences.

This chapter has thrown light on a largely overlooked conceptual tool among anthropologists, and most importantly, anthropologists concerned with issues related to power and care. I briefly discussed Foucault's ideas about power to give context and explored several of his accounts of its specifically pastoral variant. I presented an in-depth reading of the thematic

elements of pastoral power over its distinct eras to offer a useful tool for future researchers. As pastoral power persists in the contemporary world in novel modes and forms, the wide variety of elements discussed afford anthropologists an array of comparative possibilities within an inherited and shared history. I gave but a few cases in point as I discussed some anthropological and sociological work that has dealt with pastoral power, but I also offered one novel way forward, i.e., what about the shepherds that pastoral power also produces? As we will see in the chapters that follow, all of this forms the conceptual backdrop of this study.

CHAPTER 3. AN ETHICS OF OPTIMISM

Introduction

In describing her work during an interview, Melissa, a clinical therapist at Greener Pastures Shelter for Homeless Men, clearly captured the relational aspect of her optimism. She said:

I think about my job as like, borrowing hope to people. Loaning hope. Sometimes clients come in here and they have just absolutely no hope for themselves. And to have somebody say, “I believe in you. I think you can do this. Is it gonna be easy? No. But I still think you can do it.” I mean to have somebody say that to them, and then to see clients start to believe in themselves, it’s a pretty awesome thing to witness. And also, I think just to be able to play a small role in someone’s story, their story of change, and their story of meeting their goals [...] I will loan you hope. I will borrow you my hope. I will coach you in accomplishing that hope. But I can’t do it for you. And I think too that saying of like “I can’t work harder than my clients” is part of that too. I can’t want a certain success more than the client does. And that can be really difficult because we’re in this field because we care about people and we wanna make a difference, and we want, you know, people to be well. But we can’t force them to do it.

Melissa viewed her work as an attempt to extend hope as a kind of currency circulated in relational exchanges with clients. Importantly, Melissa never claimed that she gave hope away or that she offered this currency freely. Rather, she used the language of “borrowing” or “loaning” this currency with the expectation of the Maussian “gift” (1954), that the debt of hope accrued

could and would be reciprocated through the successes of her clients. While Melissa's language explained her personal viewpoint about her work, it also spoke to the broader experiences of staff at Greener Pastures.

Every day at work, shelter staff engaged in different ways with homeless men who went from sleeping on the streets of Rustville to sleeping in the bunks of the emergency shelter or the subsidized housing units that were connected to the shelter's programs. There were countless specific reasons that individuals ended up living on the street. But nearly all these reasons involved some kind and degree of "social abandonment" (Biehl 2005) in which homeless men faced overwhelming marginalization. Whether there were scarce employment and housing options, irreparably frayed kinship relations, unnavigable health and psychiatric systems, exclusionary economic policies, stigmatizing social conditions, menial public assistance, or some combination of these and other factors, homeless men were continually confronted by a world that did not seem to require their participation in it. According to workers, all of this contributed to the feelings of hopelessness that men often endured and expressed during their stay at the shelter. And, at times through tears, staff shared with me the diverse and profound experiences of societal abandonment that contributed to their clients' hopelessness.

Against this backdrop, workers tried to be optimistic and hoped that their work and the world they supposed needed it would add up to something. Workers hoped that, through their routine, everyday work, they could contribute to a better world for their clients, and like Melissa, they sought to "make a difference" and "play a small role" in individual clients' "story of change." They hoped that clients could get into safe and affordable housing, that clients could achieve sobriety and mental health, and that clients could find reliable and sustainable sources of income. And all their efforts were principally directed toward helping clients reach these goals.

And as Melissa described, her hope for clients could only be “accomplished” if homeless men worked toward their own “change,” “success,” and “goals” in their lives. In other words, workers’ optimism for clients could only continue circulating if clients first received it. However, Melissa could not “do it for” clients, and shelter workers could not “force” clients to change if they did not want to. And herein lies the *relational* aspect of optimism amid institutional contexts of care for others. In their ethical relations of optimistically caring about and for homeless men, shelter workers hoped that clients could receive their hope and use it toward the transformation of clients’ own lives and reach the goals of housing, mental health, sobriety, and income.

In this chapter, I explore an “ethics of optimism” that I claim fundamentally shapes the ethical worlds of workers at Greener Pastures. In the next section, I discuss some anthropological work on ethics and care and position my own work within a Foucauldian framework with the caveat that some contours must be expanded to include relationships of care for others as an important element of ethics. In the third section, I draw on Foucault’s four formal elements of ethics to describe the ethical worlds of workers at Greener Pastures. First, workers viewed themselves as caring people who sought to make a difference in the world. Through their work of caring about and for homeless men, they cultivated a professional and personal identity I call a “shepherding self.” Second, workers aimed their efforts toward a telos of “salvation” in the lives of their clients. As I show, this aim has a deep genealogical connection to pastoral power, but it persists today at the shelter. Third, workers engaged in diverse ways in the work of caring about and for homeless men. This work of caring for others was also a form of ethical work in which their shepherding selves could be cultivated. And fourth, workers were driven by a responsibility to care for marginalized homeless men. They felt that their roles contributed to fulfilling a social

obligation to end homelessness. I claim that these four formal elements make up an ethics of optimism that shapes the ethical worlds of workers and that this ethics of optimism provides the basis of a “good-life fantasy” about how the institutional work of homeless care will “add up to something” in the world (Berlant 2011:2).

Ethics and care

Anthropologists’ explicit interest in the moral and ethical dimensions of human life has grown substantially in the last decade and a half. A few important edited volumes have appeared (Fassin 2015, Fassin and Leze 2014, Lambek 2010) along with several influential books that advocated for a more thorough anthropological engagement with the topics of morality and ethics (Faubion 2011, Laidlaw 2014, Lambek 2015, Lambek et al 2015, Zigon 2008).

Approaches have varied widely across philosophical camps from engagements with “ordinary language philosophy” per the works of Wittgenstein, Austin, and Cavell (Lambek 2010, 2015, Das 2010, 2015); to explorations in the work of Heidegger (Zigon 2007); to building on the phenomenological tradition (Desjarlais and Throop 2011, Throop 2012); to generative interactions with Foucault’s later work whether ethnographic (Robbins 2003, Mahmood 2005, Nguyen 2010) or systematic (Faubion 2011, Laidlaw 2014). As I show in the next section, I draw specifically on Foucault’s later work on ethics as it offers useful analytics to this study.

Paralleling the increasing concern with ethics and morality in the field was a growing interest in the topic of care (Buch 2015). Not surprisingly, some anthropological work has focused on the moral dimensions of care, drawing inspiration in part from feminist theorists like Carol Gilligan (1993) and Joan Tronto (1993) who have called attention to care and care ethics as central categories of social analysis. Kleinman (2009, 2013), for instance, has emphasized the

moral status of care as “doing good” in the face of suffering and illness, and has reflexively framed caregiving as “one of those relationships and practices of self-cultivation that make us, even as we experience our limits and failures, more human” (2013:293). For Joao Biehl (2012), care denotes an existential quality that opens a possibility for “good” or, in its absence, disregard, neglect, and social abandonment. In a somewhat different vein, care, for Cheryl Mattingly (2014:12), takes on an ontological quality, and is tied to human existence itself (cf. Heidegger 2008:225-269). Albeit Mattingly writes about care in terms of the “grounded projects” of heroic Neo-Aristotelian virtue building despite life’s many tough circumstance (2014:5) and emphasizes the experimental nature of such projects of care in their contextual “moral laboratories.” These anthropological accounts largely depict “care” as an attempt to do some kind of moral good in the world. Thus, they align with several anthropological theorists’ proposals that the topic of care provides fertile grounds for ethnographic explorations concerned with ethics and the good (see Lambek 2010:15-16, Robbins 2013:458).

On the other hand, much work concerned with humanitarian forms of care has taken a different path. Humanitarianism is typically associated historically with a variety of acts and institutions that aimed to “improve aspects of the human condition by focusing on suffering and saving lives,” (Ticktin 2014:274) often in response to emergencies and difficult circumstances (see also Calhoun 2008, 2010).⁸ Rather than focus on care as an attempt to do good, many anthropologists of humanitarianism have paid broader attention to political economies and structures of power to shed critical light on the less-desirable effects of and limitations on care.

⁸ Among those acts most widely recognized are: the birth of the red Cross after the battle at Solferino, the abolition of slavery, the emergence of international humanitarian law in response to WWII, or more recently, intervention by international NGOs in times of national or regional crises (Barnett and Weiss 2008, Bornstein and Redfield 2010, Calhoun 2008, Fassin and Pandolfi 2010, Feldman and Ticktin 2010, Haskell 1985).

Following Foucauldian critiques of development that inspired anthropologists in the 1990s (e.g. Escobar 1995, Ferguson 1990), much scholarship has taken either a more cautious or condemnatory stance toward international humanitarian projects in general.⁹ This is because greater attention has been paid to relations of inequality (Ticktin 2011), colonial histories of power (Nguyen 2010), exclusion via the logics of selectivity and triage (Fassin 2007, 2010 and Redfield 2008, 2013), and the “iatrogenic violence” (McFalls 2010) and “structural violence”(Schuller 2012) inherent in international humanitarian interventions. Recently, for example, critical anthropologists have been quick to point out the unintended consequences of humanitarian forms of care. In her aptly titled “Casualties of Care” (2011), Miriam Ticktin has shown that humanitarian “regimes of care” can end up producing a form of antipolitics whereby immigrants to France were recognized as morally legitimate sufferers in need of help but not recognized as political subjects. Humanitarian care can thus seem careless if it ignores the larger sociopolitical situations in which vulnerable people are enmeshed and at the same time, depoliticized (see also Fassin 2012, Feldman and Ticktin 2010). In his equally aptly titled “Killing with Kindness” (2012), Mark Schuller has pointed out that NGOs in the humanitarian aid world often inspire a rampant “trickle-down imperialism” in which local people are frequently excluded from participation in projects meant to benefit them. If attempts to care for vulnerable people become undermined by ignoring the larger context of structural violence and the hierarchies thereby produced, then humanitarian organizations can end up doing more harm than the good they so intend. Such accounts have considered care through the lens of what Ortner (2016) has called a “dark anthropology” that focuses explicitly on structures of power,

⁹ Also see deWaal 1997, Minear 2002, Terry 2002.

violence, and inequality in the contemporary world, and stand in stark contrast to accounts of care that focus instead on its ethical, moral, and relational dimensions.

But not all accounts of humanitarianism have focused on its structural aspects. Namely, Erica Bornstein's (2012) study of humanitarianism in India has explored the relational aspects of humanitarianism by focusing on the impulses and meanings of humanitarian practice and the experiences and moral lives of people engaged in it. "Disquieting Gifts" offers a situated ethnographic view that takes seriously both the desire to give and the production of relationships of obligation (or distance) through diverse humanitarian practices in New Delhi. Bornstein's work (2012) reveals that a more complete analysis of humanitarianism must go beyond a sole focus on the outcomes and effects of humanitarian projects to consider the complex experiences and understandings of humanitarian practitioners who attempt to act morally in the world.

In this chapter, I consider care along the same lines that Bornstein considers humanitarianism. I draw on ethnographic interviews with workers at Greener Pastures Shelter for Homeless Men to understand how they viewed themselves, what they aimed to accomplish in their work, what kind of work they did, and why they did this work. In my analysis, I use a Foucauldian framework of ethics, but my focus is very different than his. Foucault was explicitly concerned with the sexual ethics of the desiring subject,¹⁰ whereas I am concerned here with the caring ethics of the pastoral subject.¹¹ Specifically, I approach the care of others as both a form

¹⁰ In "The Use of Pleasures" and "The Care of the Self," sexual ethics is fundamentally concerned with a "self" that mastered itself through diverse practices of self-transformation. In these accounts of sexual ethics, Foucault seems to leave little room for relationships with others outside of dyadic relations of proper pedagogy, and he was never clear about how other kinds of relationships with others might fall within his domain of ethics (Faubion 2011:14, 52-53).

¹¹ While the care of others remains somewhat opaque in Foucault's accounts of ethics, I locate relations with others as a possible ground for ethics, particularly those strategic relationships of care for others that Foucault has called "pastoral power." There are problems with doing so but as I mentioned, Foucault's analytics of ethics does not preclude complex relationships with

of power and a potential ground for the ethical self-formation of the workers of this study. Some may object that Foucault's work is concerned with ethics exclusively in terms of practices of self-transformation. This much is true. Yet I am not alone in also recognizing that Foucault also claimed the "very stuff" of ethics involves "the freedom of the subject and its relationship to others" (1997:300). As Laidlaw (2014:116) has pointed out and Faubion (2011) has gone to great lengths to show, Foucault's idea of ethics does not preclude complex relationships with others. So, I draw on Foucault's analytics of ethics to frame my ethnographic data but focus on a different subject matter than he did—i.e., the subject who cares for others. Drawing on interviews with shelter staff, I consider care as an ethical but relational form of work.

An Ethical System of Care

Foucault investigated ethical systems most clearly and thoroughly in the second two volumes of his history of sexuality (1988, 1990b), where he focused on a period between fourth century BCE Greece and second century CE Rome. In these texts and elsewhere (1997), he outlines the four key features that bound the ethical domain of his study. The first feature is the determination of the "ethical substance" which is "the way in which the individual has to constitute this or that part of himself as the prime material of his moral conduct" (1988:26). Second is the "mode of subjectivation" which is "the way in which the individual establishes his relation to the rule and recognizes himself as obliged to put it into practice" (1988:27). The third element is the "ethical work" that "one performs on oneself, not only in order to bring one's conduct into compliance with a given rule, but to attempt to transform oneself into the ethical

others. If Foucault's work on ethics can be useful outside of analyses of the solitary or neoliberal subject, then there must be novel ways to reimagine it as relational, particularly in studies of care for others.

subject of one's behavior" (ibid). And fourth is the "telos of the ethical subject," or an end goal at which the ethical subject strives of which he writes: "a moral action tends toward its own accomplishment; but it also aims beyond the latter, to the establishing of a moral conduct that commits an individual, not only to other actions always in conformity with values and rules, but to a certain mode of being, a mode of being characteristic of the ethical subject" (1988:28). In short, Foucault offers analytics which focus on the ontological (ethical substance), the deontological (mode of subjectivation), the practical/ascetic (ethical work), and the teleological (the telos) that together make up ethical systems. For Foucault, these formal elements change according to historical and cultural contexts, and this is perhaps why they have been put to productive use in anthropology. In this section, I draw on these elements but also complicate them to describe the ethical world of the shelter workers of this study. Most importantly, though, each element is a part of a whole ethical system I call an "ethics of optimism" and so is best considered together rather than in isolation.

Ethical Substance: The Shepherding Self

At Greener Pastures, the "ethical substance" that workers cultivated was a professional, but also personal, identity that I call a "shepherding self." This consisted in that part of workers that was optimistically willing and concretely qualified to care in specific ways about and/or for homeless men. On one hand, workers considered themselves to be caring people who optimistically sought to make a difference in the world. On the other, it was through their work

of caring about and for homeless men that workers could cultivate this identity. In other words, a shepherding self requires the care of others for self-cultivation.¹²

To that point, all the workers I interviewed viewed themselves generally as “caring” people, who like Melissa, wanted to “make a difference” in the lives of homeless men. Upper management, clinical therapists, case managers, and front-desk workers alike expressed similar views about their personal and professional identities:

Paula, a manager at Greener Pastures viewed herself as a person who “really needs to help people” and viewed shelter work as potentially restorative of the many losses that homeless men experienced in their lives. She sought to help men “turn their lives around” and “become independent” through her work.

“I’m a person who really needs to help people. And so I get to do that here. [...] You’re really helping people to really turn their lives around and go from their very lowest point to living in their own apartment and being independent. [...] When you’re homeless, you lose everything. You lose everything including your sense of worth, your dignity. And so we’re in the business of restoring that.”

And Melissa, a clinical therapist at the shelter, similarly viewed herself as a caring person who wanted to help her homeless clients, and viewed shelter work more broadly as caring:

“I really do love relationships and, um, being able to maybe be that person that really does care and that really does wanna help.”

¹² This is not unlike the relation of proper pedagogy between a teacher and a student about which Foucault wrote: “In the practice of the self, someone else, the other, is an indispensable condition for the form that defines this practice to effectively attain and be filled by its object, that is to say, by the self. The other is indispensable for the practice of the self to arrive at the self at which it aims” (2005:127).

Michelle, a resource developer at the Greener Pastures, likewise reflected on shelter workers as caring people who sought to make a difference.

“The majority of staff, like I said, they care, care about people as a whole and just want to help make a positive difference.”

And Shari and Shaw, both front-desk workers at the shelter, put it most frankly.

Shari: *“You can’t work here if you don’t care.”*

Shaw: *“I really do care for these guys man, yeah. They my boys. [...] That’s what all the guys say, that I really, really care.”*

These are but a handful among many responses from workers that make clear the identity that I call a “shepherding self.” This self is “shepherding” insofar as it participates in relations of pastoral power (see chapter two). It is a part of workers that on one hand is “concretely qualified to care in specific ways” insofar as all shelter staff met certain professional qualifications to fill specific roles at the shelter by attending trainings, receiving certifications, or getting bachelor’s and master’s degrees in anthropology, sociology, social work, psychology, theology, and counseling, and doing other required clinical and practical training in the field. But it is worth noting that many workers viewed themselves beyond just their profession as “caring” people more generally. The “shepherding self” also entails that part of workers that is “optimistically willing” insofar as workers hoped to “make a difference” in the lives of clients. Through their work, all staff at Greener Pastures, like Melissa, hoped to “play a small role” in clients’ “story of change” from living on the streets of Rustville to getting permanent housing. And they were only able to cultivate the ethical substance of their “shepherding selves” by doing the work of care for Rustville’s homeless men.

Telos: Salvation

The work of care at Greener Pastures entailed a hopeful vision in which workers, through their diverse forms of work, could help clients achieve a better future. But before getting to workers' views on their hopeful aims, I take a minor genealogical detour to show how pastoral power has always entailed an aim toward salvation. Pastoral power is linked to ethics if we understand relationships of care as a potential ground for ethical self-formation.¹³ According to Foucault, the *meaning* of salvation has changed dramatically over millennia, but amid these changes, it has consistently entailed an “aim toward salvation” and has produced relations of care based on this aim. It continues to produce “shepherding selves” whose work is guided by this aim. In the era of its origins, salvation meant that a flock of people would be cared for, protected, and guided to good land. In the era of its institutionalization, salvation meant that the souls of the church would be cared for and guided to eternal life. And since the eighteenth century, salvation has taken on “different meanings” as many “worldly” aims took the place of the religious aims held by the church pastorate (1982:215). Nonetheless, a key component of pastoral power over many centuries was this “aim toward salvation” which persists in the world today and I return to this below as it was a significant component of ethical system of care that I explore.

As I showed in chapter two, Foucault's genealogy captures the aim or telos of pastoral power in its distinct eras. First, he traces the origins of pastoral power to the ancient Mediterranean East wherein the practice of shepherding a flock became a working metaphor for

¹³ In “On the Genealogy of Ethics,” Foucault notes a decisive break between the ethics of the self and the ethics of others in the Christian era, although his studies do not consider how this turn has reshaped ethics: “From the moment that the culture of the self was taken up by Christianity, it was, in a way, put to work for the exercise of a pastoral power to the extent that the *epimeleia heautou* [care of the self], became, essentially, *epimeleia ton allon*—the care of others—which was the pastor's job” (1997:278).

the leadership of people (1979:227-228, 2007:123). In that context, the shepherd was to look after each member of the flock, to make sure the sheep do not suffer, to search after those that get lost, and to treat any that have been injured (1979:229). In Foucault's accounts of pastoral power's origins, he explains that ancient leaders aimed "to ensure the salvation of the flock" (ibid) by providing the care, protection, and guidance that they needed.

Second, during the era of pastoral power's Christian institutionalization, the matter of salvation was no longer simply for a shepherd to provide care, protection, and guidance for a flock, but for a pastor to ensure that the flock found salvation beyond daily sustenance. In other words, the institution of Christianity altered pastoral power to encompass an aim toward eternal salvation for both the individuals and the whole flock.

Third, a dramatic shift occurred in the eighteenth century as salvation took on a new, secularized meaning. Since then, pastoral power has proliferated primarily at the level of the state but also "spread out into the whole social body" (1982:215). And as pastoral power spread out and "found support in a multitude of institutions," its aims have also grown. Of this, Foucault notes: "It was no longer a question of leading people to their salvation in the next world, but rather ensuring it in this world. And in this context, the word salvation takes on different meanings: health, well-being (that is, sufficient wealth, standard of living), security, protection against accidents. A series of 'worldly' aims took the place of the religious aims of the traditional pastorate" (1982:215; for more on these themes, see chapter two).

At a broad level, Foucault's accounts of pastoral power show how care for others has been intertwined with power through a long history in the West. Taking the several thematic elements of his divergent accounts together, as I do above, shows that pastoral power has always entailed an "aim" toward the salvation of the flock, even if the meaning of salvation has

dramatically changed throughout history. It is precisely through the care and guidance of the shepherd that the flock will find their salvation, and this continues to be the case today. But “salvation” has taken on diverse meanings in diverse contexts, and here, I explore what it meant at Greener Pastures Shelter for Homeless Men. While workers did not draw on the language of “salvation,” and perhaps very few practitioners of pastoral power in the contemporary world would do so, Foucault’s work offers a teleological idea that continues to capture how the aim of care is linked to a deeper genealogy of power.

The “worldly” aim toward “salvation” in this life at the shelter meant housing homeless men and transforming homeless lives. And through diverse forms of ethical work (see the next section), staff attempted to get homeless men into housing and make sure that they were able to stay there. At a broad scale, the entire system of homeless care in the United States revolves around an aim of putting an end to homelessness in general. At the highest level of the state, the United States Department of Housing and Urban Development unifies all “continuum of care” organizations around a goal of the end of homelessness. Among other specifics, the Continuum of Care is “designed to promote communitywide commitment to the goal of ending homelessness” (HUD 2015). At the regional level, over one-hundred continuum of care organizations in the area share in such a commitment. Further, Greener Pastures participates in both county and city funded programs that aimed to “end homelessness in [Rustville].” And Greener Pastures’ vision, work, and programs were defined along such lines.

Not insignificantly, many workers drew on these ideas during interviews. They seemed to adopt this aim as they explained their own work as guided by it:

Brianne, a case manager explained how even though her case work was individualized based on clients’ needs, it conformed to the goal of ending homelessness.

“My workload is determined by what my client’s needs are. So not everyone’s in the same phase, but the goal is, you know, we’re trying to end homelessness.”

And Jessica, a clinical therapist depicted shelter work more generally as implicated in this aim.

“And so really Greener Pastures is really working to help people change their lives in a positive way and to end their cycle of homelessness.”

Idah, a case manager described her work as also related to the high-level goal of the continuum of care.

“It’s part of the CoC and ending homelessness. [...] Which basically, our job is to basically keep them housed and help them maneuver any barriers that would help make them be homeless again.”

While other workers did not draw on the exact language of putting an “end” to homelessness, they still remarked that their work was meant to make a difference. As is also apparent in the ethical substance of the shepherding self, workers viewed their work as hopefully aiming toward change in clients lives. Again, Foucault’s work has shown that it is precisely through the guidance and care of the shepherd that the flock will find their salvation.

Michelle explained the shelter as a “catalyst for change” and viewed shelter services as potentially transformative.

“I believe that we are the catalyst for change for people that are willing to accept that. I believe that we’re offering services that allow people to transform their lives with dignity.”

And Lacey, a case manager at the shelter described shelter workers as people who “really do care” and who help clients see the “light” through which things can become better.

“I would say that we deal with the homeless population who probably, some of them may have given up on themselves. Some may be hopeless. But then when they see that there are individuals

who really do care who really will work with them to get housed, I think that's when they can see that light, and things become a little bit better for them”

And Melissa was hopeful that caring shelter workers could make change.

“We care about people and we wanna make a difference, and we want, you know, people to be well.”

Whether being motivated by the prospect to “end homelessness” or just striving to help make things “a little bit better” for clients, workers aimed to care for and guide a flock toward salvation in housing. Importantly, while staff aimed to end homelessness and transform lives through their work, they also aimed to cultivate their ethical substance that was their shepherding selves. As Foucault described: “a moral action tends toward its own accomplishment; but it also aims beyond the latter, to the establishing of a moral conduct that commits an individual, not only to other actions always in conformity with values and rules, but to a certain mode of being, a mode of being characteristic of the ethical subject” (1988:28). As Faubion phrases it, Foucault’s telos also “refers precisely to the subject that is the end of any given actor’s striving” (Faubion 2011:4). Workers sought to provide care and services to homeless men with an aim to end homelessness in the lives of clients and transform lives. But they also viewed themselves as caring people who sought to make a difference in the world. The cultivation of the ethical substance of their shepherding selves required the ethical work of caring for others with the aim, that through their proper care and guidance, their flock could find salvation through housing. Driven by the first aim to care for and guide a flock toward salvation through housing, workers also aimed beyond the accomplishment of their moral conduct to commit themselves to a certain mode of being characteristic of shepherding selves. And the complexity here is worth noting that the “shepherding self” is distinct from the self of Foucault’s ethical analysis insofar as rather

than aiming toward self-mastery through practices of the care of the self, it aims toward both salvation and self-cultivation through practices of the care of others.

Ethical Work: The Work of Care

Foucault's third formal element of ethical systems is "ethical work," or what he elsewhere calls the "arts" or "aesthetics of existence" (1990b, 2005b) or more often the "techniques" or "technologies of the self" (1988, 1997). More precisely, "technologies of the self" are "intentional and voluntary actions" by which individuals "not only set themselves rules of conduct, but also seek to transform themselves, to change themselves in their singular being, and to make their life into an *oeuvre* that carries certain aesthetic values and meets certain stylistic criteria" (1990b:10-11). The ethical work of caring for others could perhaps be considered outside of the domain of the "ethical work" of caring for oneself.¹⁴ And pastoral power could be considered a "technology of power" which is analytically distinct from what Foucault called a "technology of the self."¹⁵ But, here, I follow Kleinman's suggestion that caring for others can be understood as involving "relationships and practices of *self-cultivation* that make us, even as we experience our limits and failures, more human" (2013:293). Moreover, Ricoeur (1993) has articulated a view of ethics in which the assumed distinction between self and other is rendered problematic through the possibility of a "solicitude" in which one attempts to live well *with and for others*. And while Ricoeur's account of ethics seems opposed to

¹⁴ But, Foucault also remarked that, in terms of pedagogy, "techniques of the self are frequently linked to the techniques for the direction of others. For example, if we take educational institutions, we realize that one is managing others and teaching them to manage themselves" (1997:277).

¹⁵ Yet interestingly, the point of convergence where the two "encounter" each other Foucault takes up under the conceptual study of what he calls "governmentality." (1997:225).

Foucault's analysis which focuses on concrete practices of self-fashioning, I heed Das's (2012:135) astute observation that "we must not set aside one of these conceptions too quickly in favor of the other." In other words, the care of others and the care of the self should not automatically be viewed as mutually exclusive analytics. Taken together they afford a view of ethics as relational. My concern here, however, is not to debate about the philosophical merits of Foucault's view of ethics or weigh it against other views. Rather, I explore the care of others as ethical work.

Caring about and for homeless men at Greener Pastures Shelter involved diverse forms of work. To reiterate, staff at Greener Pastures hoped that their work would make a difference in the lives of clients. Their efforts were aimed toward a telos of "salvation" in which homeless men could find and stay in housing and their work was primarily directed toward helping clients achieve this goal. While there were several smaller scale goals like mental health, sobriety, and income, which were important also, these contributed toward the ultimate goal of housing.

Practically, the first step toward reaching the aim of housing was the emergency shelter itself as it was the place where men who were previously living on the streets of Rustville could find a comfortable but temporary place to stay. As some workers noted, because homelessness can be a matter of life and death insofar as it can lead in manifold ways to premature mortality rates (see O'Connell 2005), "salvation" through emergency housing could be a literal issue. The emergency shelter provided beds with fresh sheets and storage trunks to over fifty homeless men every night of the year along with showers and laundry facilities. It also provided lunches and hot meals donated and prepared by volunteers every day. While the immediate purpose of the shelter was to provide a warm and safe place for men experiencing homelessness, the long-term goal was for shelter clients to eventually get into and stay in their own housing. As the shelter

could only be temporarily occupied by any single homeless man, workers considered it a means toward the hopeful goal of permanent and stable housing.

But it was nonetheless important as many workers contributed to just this first step of emergency shelter. There were several front-desk workers who directly engaged with the men staying at the shelter more consistently than any other staff members. They had a few core responsibilities to help men meet their day-to-day needs and to keep the shelter operating. First, front-desk staff were responsible for the security of the building: they made hourly rounds paying close attention to bathrooms and sleeping areas, made sure any potential concerns or unusual client behaviors were relayed to social work staff or management, screened clients and their bags with security wand metal detectors upon entrance, and had to intervene in crisis situations or call for appropriate forms of crisis intervention. Second, they were also responsible for maintaining disciplined time: they completed orientations, intakes, and attendance sheets to make sure clients were in the building when they should have been and nonclients were not, they managed cigarette breaks and distributed medications on schedule, administered and tracked blood alcohol content tests and sent failing clients to detox if necessary, oversaw chores and ensured cleanliness throughout the building, and monitored mealtimes and kitchen cleanings. Third, they were responsible for routine odds-and-ends work at the shelter: they checked and responded to emails, answered doors and phones, sorted and handed out mail, cleaned up and organized general office clutter, dispensed day-to-day supplies like towels, deodorant, shampoo, body wash, toothbrushes, toothpaste, and other hygiene essentials, distributed sandwiches to shelter clients, or if there was a surplus, anyone from the neighborhood in need who stopped in to ask for food, and ultimately were the first line of staff to deal with any immediate client or visitor concerns.

But, front-desk work also could involve very intimate relationships of care with clients that could not be checked off a list. For instance, every morning, including on his days off, Shaw helped an overweight client put his socks and shoes on. He also shared his experiences of aiding an older, blind client with his personal hygiene. In detail, Shari expounded her experience of assisting a new client who was going through severe heroin withdrawal. She sat with him by his bedside and accompanied him to the hospital. And Nia, engaged in personal exchanges with clients that she considered therapeutic in nature.

All of these forms of front-desk work were viewed by staff as a means of keeping the shelter functioning, but also as integrally related to this first step on a longer journey toward clients achieving stable and permanent housing. As Shari explained:

“Nobody else would be able to do their job without [the front desk workers]. The guys that are in our shelter, this is the first place they go and the last place they go when they’re on their way out the door. Case managers, clinicians, they wouldn’t be able to function without us.”

And as Nia put it, front-desk work involves

“taking a person from where they are and trying to help them there so that they can get to that next level [...] and trying to figure out what you can do to help them so that they can get to the next step. Like I said, get some housing and get out of here. We want you to do your best—be your best person.”

All shelter staff viewed front-desk work as crucial to the functioning of the shelter. The case managers and clinicians would not be able to continue with clients’ progress beyond emergency shelter unless the everyday work at Greener Pastures could be completed by the front-desk staff.

But they also viewed it as the first step toward getting homeless men into permanent housing. This “next step” toward reaching the aim of housing involved several “supportive

housing” programs in which homeless men could find and maintain residence with the assistance of case managers. While Greener Pastures was originally just an emergency shelter, their capacities had developed over the years and now included several supportive housing programs that were meant to provide “housing first” to over one hundred of Rustville’s homeless.

During Greener Pastures first couple decades in operation, the dominant approach of homeless service providers was a “linear” one in which homeless individuals were required to prove their readiness as a condition of housing (Kertesz et al 2009). Such a model assumed that mental illness and addiction presented risks to stable housing and mandated that the “hard-to-serve” homeless had to be “housing ready” by becoming clean and sober, by taking their psychiatric medications, and by obeying shelter curfews (Tsemberis 2004). However, by the time of my study, policy had shifted, and Greener Pastures had adopted the “housing first” model after losing \$150,000 in federal funding in the mid-2010s for their “transitional housing” programs that were based on the linear model. This new approach emphasized that the homeless should not be disqualified from housing on the condition of sobriety or treatment and considered the homeless to be “consumers” of services who could make their own choices (HUD 2021). While homeless men were no longer required to meet the previous standards of housing readiness as a condition of their housing, there were several efforts at Greener Pastures to offer services directed toward mental health and sobriety that I return to later.

Both the first step of emergency shelter and the second step of supportive housing involved case management. A few case managers worked with the men staying in the shelter, but several worked with the supportive housing programs that were located near Greener Pastures’ neighborhood or in other parts of Rustville. Yet the shelter was considered by all case managers to be their “home base.” Case managers’ primary focus was to help clients get into housing and

to make sure that clients were able to stay housed. They worked with clients to understand clients' personal needs and tailored services and resources to best meet those needs. Some clients suffered from severe and persistent mental illness, but some did not. Some clients were diagnosed with AODA (Alcohol and Other Drug Addiction), but some were not. Some clients had physical disabilities that demanded specific attention. And some clients had singular circumstances that case managers attempted to be "flexible" to accommodate. All this required that case managers had a firm understanding of the clients' "individualized needs." Based on these needs, case managers developed plans with clients to reach goals, which were specific to individuals, but necessarily involved housing as the top priority. They contacted clients on a regular schedule to check in and make sure progress was being made toward goals and attempted to intervene if progress was not being made. They also made referrals to an array of supportive services in Rustville's broader continuum of care (e.g. payee services, counseling services, spiritual care services.) And of course, case managers kept records and documents of everything through HUD's data tracking and management system. All such case management work involved in the second "supportive housing" step revolved around the aim of getting Rustville's homeless men into housing first and making sure that they were able to stay housed permanently.

As I mentioned, there were also several other "targeted goals" of mental health, sobriety, and income which contributed to both the goal of housing and many staff engaged in work that was focused also on these goals. While "housing first" made housing no longer conditional on compliance with prescriptions or abstaining from alcohol, workers still viewed mental health and sobriety as significant components of clients being able to get into housing or stay in housing permanently. While recent shifts to "housing first" obviously made housing the top priority in Rustville's continuum of care, many workers had learned from experience that mental illness

and/or addiction could be major factors that could lead to interventions, evictions, or complications in which clients could end up back on the street. So, case managers had to carefully manage clients' behavior when it could jeopardize their housing situation. Typically, they attempted to check in with clients regularly and make sure they were taking medications or being provided with other mental health services they needed. There were also several clinicians who worked in Greener Pastures' in-house behavioral health and addiction therapy clinic. Clinical staff met with shelter clients once per week for hour-long sessions or more if clients had a crisis or just needed to meet to talk and had four to six scheduled meetings with clients per day. Sometimes they also set hour-long blocks of time for group therapy sessions with three or more clients. Clinical therapists sought to guide and direct clients to identify ambivalences in their lives and make the behavioral change necessary to progress toward housing. But therapy also involved the work of helping clients navigate their day-to-day needs. Finally, case managers, clinical therapists, and several programs at Greener Pastures aimed to assist clients in finding work that paid a livable wage. Case managers connected clients to employment services in Rustville; clinical therapists coached clients toward rejoining the workforce; and there were job training programs and resume-writing workshops that were regularly held at the shelter. These targeted goals—of mental health, sobriety, and income—were vitally important for shelter workers, but they were ultimately directed toward the primary aim of housing. As staff explained, permanent housing could not be guaranteed without clients achieving mental stability, kicking drug and alcohol addictions, and finding sustainable sources of income.

All this work, and much more I did not discuss,¹⁶ was directed toward helping Rustville's homeless men. Most, though not all of it, also involved relational aspects where staff assisted and guided clients toward achieving housing. All of it was a form of caring about and for others which was also a practice of the self-cultivation of workers. The workers at Greener Pastures Shelter for Homeless Men unanimously held an image of themselves as caring people. This was both a personal and professional identity I have chosen to call a "shepherding self" as this links their care to the form of power that is far-reaching in contemporary institutions of care (see chapter two). They were optimistic that they could make a difference in the world and sought to do so by fulfilling their institutional roles and completing the many duties required of them. From the front-desk to case management and the clinical team, workers aimed toward the telos of salvation that could be found in housing but also toward the cultivation their "shepherding selves." But one question that remains is why did workers do the work of care?

Mode of Subjectivation: Responsibility to Care

Staff at Greener Pastures often recognized that homeless men faced diverse and profound experiences of exclusion, marginalization, and societal abandonment, and felt a moral responsibility to care because of this. As they viewed themselves as caring people, they felt an obligation to put this care to work in their profession. This responsibility to care was the "mode of subjectivation" of their ethical system insofar as it provided the means by which workers established their relation to the rule of caring and recognized themselves as obliged to put it into practice (Foucault 1988:27). At a small scale, workers shared a belief in the responsibility to act

¹⁶ Including resource development, volunteer coordination, and upper management, to name a few.

in accordance with the institutional prescriptions of appropriate care given their specialist institutional roles within the shelter. For example, case managers expressed a responsibility to care in accordance with the norms and values of social work which they acquired during their training yet also in accordance with specific institutional mandates and their institutional roles as practicing case managers at a homeless shelter for men. The same was true of clinicians and others, in their own ways. Occasionally, workers questioned institutional and professional norms and values. But at a larger scale, their questioning never deterred the underlying responsibility to care, only the proper method of the ethical work of care. Even though their specific ethical work of care was diverse, the responsibility to care remained the same across all specialized fields. Wes, who was a resource developer, put this responsibility to care in terms of an “ethical commitment” to the marginalized homeless, and he identified a “need” for compassion and care for all homeless people.

“The people that we serve who live in poverty almost never get a break, even in death. [...] Our ethical commitment to taking care of the marginalized, yeah [...] we need to be compassionate and care for all of the people who are homeless no matter what.”

Erica, a case manager at Greener Pastures who had herself experienced years of homelessness, explained this responsibility in potent terms, and indeed implicated broader society in this responsibility.

“I believe homelessness is everybody’s problem. There is more than enough housing to go around to meet people’s needs. No one should be homeless. Homelessness is a public policy issue, and it really needs to be dealt with in the way that you deal with anything else. It’s a hazard to humans. That’s what I think homelessness is. It’s a hazard to humans. And it’s just wrong. And I want before I leave this earth, I want, I really would like to see the issue fixed

cause no one should be living in tents when they don't have to. I would like to see the cities take the initiative to have everyone housed. Everyone deserves shelter. Food, clothing, shelter, those are our basic needs."

And Chuck, a case manager, found it "ridiculous" that the homeless continue to suffer in the United States, but was doing something about it in his work.

"We live in the wealthiest, most powerful nation at least that our history tells us has ever existed on this planet. That being said, to me, it's ridiculous that anyone suffers from homelessness or doesn't have proper health care or proper mental health care in any way."

Susan, an upper manager, expressed this responsibility in terms of "filling a critical gap" of care for homeless men who were not "fortunate" enough to overcome their marginalization on their own.

"Here at Greener Pastures we believe that we play a critical role in reducing the incidence of homelessness. Not only that but we feel that we also fill a critical gap in helping those that have been marginalized due to poverty, trauma, social constraints, drug and alcohol addiction, mental health status. Everybody knows somebody who falls into one of those categories. Most individuals, they're able to overcome those barriers by themselves or with the support of family and of friends, but not everybody's so fortunate. And for those individuals, Greener Pastures exists."

And Shaw, a front desk worker who had also experienced years of homelessness framed this responsibility in terms of "giving back." He had himself experienced being "lost out there" on "the street" and felt a responsibility to reciprocate his success by doing the work of care at the front desk.

“We got so many people out there that’s not getting them paid attention to. So the handful of people that we do like to give back, it’s important. I used to be on the street. I left home when I was 11 years old. I slept in garages. I uh, slept in garbage cans, uh, cars. I was out there [...] But I fought the fight man. When I was out there, I didn’t have nobody to give me no food. No nothing. So the moment I got the time to give back and show my appreciation—that’s why I love what I do. Because man, I was lost out there.”

Whether at a broad scale of grand moral claims of homelessness being “everyone’s problem” and the need to be “compassionate and care for all of the people who are homeless, no matter what”; the national scale of “the wealthiest, most powerful” country being worthy of ridicule for allowing homeless people to continue to suffer; or the smaller, local scale of paying attention, giving back, and filling in the cracks through which overlooked, forgotten, and marginalized homeless men have fallen, workers shared a belief in a responsibility to do something about homelessness. And whether at the front-desk, in the upper management offices, in the clinic, in the shelter, or on the streets, staff were, indeed, attempting to do something about homelessness. These are but a handful of many responses during interviews that illuminate the responsibility to care which afforded workers a way to establish their relation to the rule of caring and recognize themselves as obliged to put it into practice.

A Good Life Fantasy

To summarize, the ethical system of care at Greener Pastures can be delineated as follows: Shepherding selves (ethical substance) accepted and responded to a responsibility to care for a vulnerable flock (mode of subjectivation) and thereby voluntarily participated in practices of care (ethical work) with the aim of both guiding that flock toward salvation and

cultivating their shepherding selves (telos). As I hope to have made clear, workers' ethical worlds were informed and shaped largely by this ethical system. They sought to be caring people, felt obligated by a responsibility to care about and for homeless men, and worked in diverse ways to care with the hope that clients' lives could be changed for the better.

This ethical system of care constituted the bedrock of what critical theorist Lauren Berlant has called a "good life fantasy." By "fantasy," Berlant does not cynically mean that people have been duped into imagining the impossible. Rather, fantasies can be attainable or unattainable; normative, or non-normative; and can allow for life to flourish or be exhausting. According to Berlant, fantasy is "the means by which people hoard idealizing theories and tableaux about how they and the world "add up to something"" (2011:2). And, amid ordinary life, people maintain optimistic attachments to fantasies about what a good life could or should be. Berlant's work is focused primarily on a few dominant "good life fantasies" in the post-World War II era, for example, things like upward mobility, job security, meritocracy, and political and social equality. While these fantasies have had immense influence in the United States, politically, economically, affectively, and otherwise, Berlant argues that, since the 1990s, such good life fantasies have been fraying as the hopes and promises of structural transformation have proven less and less attainable for so many people (2011). Much less ambitiously, this chapter only offered a view of the microscopic, good life fantasy to which workers at the shelter attempted to stay attached. As we have seen, workers at Greener Pastures hoped that their work made a difference in the world. And their ethical system of care provided the means by which they could hoard idealizing theories and tableaux about how. And at base, their work required some bare minimum of optimism that they and the world could "add up to something."

Like “fantasy,” Berlant does not mean by “optimism” that one is naïve in hoping one’s efforts will “add up to something” in the world. And considering Berlant’s own work on the “crueler” dimensions of optimism, Berlant writes: “Even when it turns out to involve a cruel relation, it would be wrong to see optimism’s negativity as a symptom of an error, a perversion, damage, or a dark truth: optimism is instead, a scene of negotiated sustenance that makes life bearable as it presents itself ambivalently, unevenly, incoherently” (2011:14). And even as workers experienced some ambivalence, unevenness, and incoherence in doing the work of care, their optimism also provided some sustenance that made their work lives more bearable. So, alongside Berlant, I do not claim that workers’ have been duped into a false good life fantasy in believing their work really could help homeless men. Numerous “success” stories that workers (and several previously homeless men who, at the time of my research, volunteered or worked at the shelter) shared with me would suggest otherwise. Nor do I claim that workers’ optimism was pathological or naïve. Rather, staying optimistically attached to a good life fantasy of care was a task, an achievement.

And like the ethical system of care I described, optimism was relational. Workers, like Melissa, sought to play a small role in homeless men’s stories of change. And they attempted to loan hope to clients who were often hopeless. But, when workers’ optimism wore too thinly because their work of care and the world they imagined needed it refused to “add up to something” amid contexts of crisis, workers became “jaded,” “burned out,” “worn down,” or “cynical.” As Adam, a case worker remarked:

“It’s just a struggle because you don’t wanna get jaded. That’s a big thing with case management is getting jaded. It becomes difficult when you, you know, to continually be

optimistic, cause sometimes you're in situations where it just beats you down and you're frustrated about it."

To that point, loaning hope in a broader economy of optimism that could, and at times did, run in short supply was a fraught endeavor for many workers. But I return to this theme in the chapters that follow.

In this chapter, I have focused only on the ethical system that I claim shaped the ethical worlds of the workers at Greener Pastures. I discussed the anthropology of ethics and care and based my work in a Foucauldian framework. But unlike Foucault's focus on the ethics of the care of the self, I incorporated the care of others as a vital feature. Perhaps this approach stretches Foucault's analytics beyond recognition. But on the other hand, doing so offers a way beyond the confinement of the neoliberal subject who learns to care for itself and takes seriously the pastoral subject who attempts to care for others. The workers of this study attempted to do good in a world they viewed as so often overlooking, ignoring, stigmatizing, neglecting, abandoning, or otherwise discarding homeless men. They viewed their work as one possible way to care despite the carelessness they often saw. And their ethical worlds were shaped by an ethics of optimism in which they and the world could add up to something.

CHAPTER 4. CRUEL OPTIMISM AT THE IMPASSES OF CARE

Introduction

In chapter two, I investigated Foucault's genealogy of pastoral power to bring attention to two of its overlooked dimensions in the field of cultural anthropology. First, anthropologists have generally ignored that pastoral power produces more than just an obedient and confessing sheepfold: it also produces caring shepherds, or what I have called "subjects who care." Second and linked to the first, anthropologists have not recognized several of the constitutive features of pastoral power that Foucault elaborated in his divergent but thematically related accounts (1979, 1982, 2007). I claimed that considering these features is one crucial step toward discerning the production of the subjects who care in the contemporary world.

In chapter three, I examined several of these features as they relate to the "ethical system" that animates contemporary institutions of care and constitute, in part, the contemporary subjects who care (see Foucault 1988, 1990b). First, pastoral power entails a salvific telos directing the care of the subjects who care. It is precisely through the care and guidance of the shepherd that the flock will find their salvation, and this has been the case since pastoral power's origins. Albeit, as Foucault noted, today pastoral power aims for salvation here and now, in this life, through the efforts of our institutions of care (1982:215). Second and linked to the first, pastoral power provides a blueprint of a good life for the subjects who care—a seemingly maneuverable path to reach this salvific telos. By doing the work of care in their institutional settings, contemporary workers gain a sense that they are doing their part to make the world a better place, that their work and the world they suppose needs it add up to something in the end. Taken

together, these two points show how pastoral power constitutes *optimistic* subjects who care in contemporary institutions of care.

But optimism may become cruel as the good life fantasy of institutional care reveals itself as unattainable. Try as they may to be effective care workers making minute or larger-scale change in the world, the contemporary pastorate is so often worn down by what is required of them in their work. Particularly, for so many front-line workers in pastoral institutions across the country and beyond, from emergency medical workers and child welfare specialists to disaster relief workers and substance abuse counselors, the labor of attempting to care in an environment where crisis has become ordinary leads to utter exhaustion. At this impasse, care workers struggle to make do and just get by amid the overwhelming cruelty of the present (Berlant 2011). In the context of homeless care in the US, front line workers are constantly overwhelmed and worn out by their routine labors of care. High rates of post-traumatic stress disorder, vicarious traumatization, compassion fatigue, and burnout characterize front line work in the homeless sector more generally (Schiff and Lane 2019). Today, it seems the conditions of the front-line work of institutional care for homeless men are also the conditions of the attrition of the optimistic subjects who care. In this chapter, I explore three cases of front-line workers in the homeless sector who are stuck in impasses of care. Drawing on critical theorist Lauren Berlant's diagnosis of the precarity of our current age (2011), I argue that such impasses of care are crucial sites of cruel optimism in contemporary institutions. They reveal the limits of both pastoral power and the optimism of the subjects who care amid the crisis ordinariness so characteristic of our historical present.

Cruel Optimism

The analytic use of the phrase “cruel optimism” originated a decade ago in the field of affect theory. Thinkers in this field have attempted to cast the body, the senses, and emotions as serious and vital components of human experience and have catalogued and theorized about a somewhat diverse *mélange* of things called “affects” (Ahmed 2003, Ngai 2005, Sedgwick 2003). Drawing on Deleuze and Guattari’s (1983, 1987) concepts of “forces” and “intensities” always in movement, many affect theorists have shifted critical focus from the predetermined, reproduced, or foreclosed features of life to what is unfinished, in flux, or “becoming,” attempting to illuminate the novel, processual dimensions of sensory experience (Seigworth and Gregg 2010, see also Biehl and Locke 2010). Whether described as potential “shocks” that arise autonomously in the human sensorium (Massumi 2002)¹⁷ or as more “ordinary” feelings that coast along with the currents of everyday life (Stewart 2007),¹⁸ affects are most commonly defined as some kind of emergent sensorial capacities to affect and be affected (Seigworth and Gregg 2010).

For Lauren Berlant, there is a structural aspect to how these capacities emerge as they do. In Berlant’s seminal work, “Cruel Optimism” (2011), affects are broadly circulating public feelings that unfold amid a materially and historically enduring present. They are neither the solitary experiences of individuals nor do they arise absolutely spontaneously. Rather, they

¹⁷ For Massumi (2002), an affect is defined in its openness and potential. Temporal structures form and dissolve in relation to each other, there is “a kind of bubbling of structuration in a turbulent soup of regions of swirling potential” (2002:34). Affects emerge from this soup as “shocks” or “autonomous” bodily capacities by interrupting actuality with the processes of becoming.

¹⁸ For Stewart (2007), “ordinary” affects are the “varied and surging capacities” that unfold “in impulses, sensations, expectations, daydreams, encounters, and habits of relating, in strategies and their failures, in forms of persuasion, contagion, and compulsion, in modes of attention, attachment, and agency, and in publics and social worlds of all kinds that catch people up in something that feels like something” (2007:2). They are felt and can provide a sense of normalcy to a life always in motion.

“exemplify a shared *historical* time” (2011:15). Berlant argues that our shared historical time in the contemporary world is best characterized as an era of “cruel optimism.” This age emerged in the United States and Europe during the last four decades as the anticipations and hopes of structural transformation that developed during the post-Second World War period have “realized less and less traction in the world” (2011:3). Promises of social equality, meritocracy, economic security, political satisfaction, reliable intimacy and other “good life fantasies” of this epoch have become tattered and threadbare in contemporary times (2011:3). Yet so many people actively struggle to maintain attachments to such fantasies against the continual threats of disillusionment that characterize our historical present (2011:28).

As Berlant claims, optimism orients and sustains our attachments to the possibility that a good life can be achieved. In that way, it is necessary for all our lives to keep going with some modicum of purpose; it provides the “evidence” of having not given up entirely on the objects and projects to which we find ourselves attached (2011:259). However, optimism becomes cruel when it is at the same time an obstacle to our flourishing. Insofar as so many of us continue persisting with attachments to our deeply fraying good life fantasies while simultaneously being worn down by what is required of everyday living—i.e. managing the incoherence of unachievable hopes and desires, unkept promises, mounting contingencies, and precarious presents and futures—then our current era can be characterized as one of cruel optimism. Consequently, the shared feelings of shame, grief, uncertainty, and fatigue that unfold in our historical present exemplify our era of cruel optimism.

Before proceeding, one crucial qualifier should be noted. Whereas Berlant, a critical theorist, focuses on the affective structure of cruel optimism in Berlant’s engagements with literature, film, art, and other media, I focus here on the unfolding of cruel optimism in the single

context of front-line homeless care in the US. While Berlant's intention was never to offer "sociologically empirical cases" in her text (2011:11), Berlant is unclear about how and to what extent cruel optimism's conceptual novelties could or should be applied in cross-disciplinary contexts. The position I assume here: If cruel optimism is as ubiquitous as Berlant suggests (that is, as a defining feature of our era), then it lends itself as an analytic to diverse contexts in the contemporary world. In this chapter, I am making only one among many possible uses of Berlant's ideas about cruel optimism (for others, see Bartlett et al 2018, Freeman 2020).

Crisis Ordinarity

An important part of Berlant's argument in "Cruel Optimism" (2011) is that it is no longer accurate or tenable to think of "crisis" as simply a rift in the otherwise organized and orderly flows of life. Crises are not merely "exceptional" or "extraordinary" events as has been typically assumed but have become defining conditions of living as people must constantly adjust to the overwhelming contingencies and precarities generated by and within present-day liberal democracies (2011:10). In other words, crisis has become *ordinary*, and such "crisis ordinarity" permeates contemporary social life where people attempt to just get by and make do despite the constant fraying of the good lives they imagine. The cruel optimism of our present era unfolds amid the crisis ordinarity of everyday life, and this is experienced affectively before it is apprehended reflexively or sorted out any other way (2011:4).

Crisis ordinarity takes different forms in the contemporary world. An enduring recession with inflating debt bubbles of swelling mortgages and student loans continues to leave many lives scraping by paycheck to paycheck in the wake of what has become "ordinary" economic life. An ongoing global pandemic is reshaping normal routines around blurry social

and legal ideals of public health wherein life itself is experienced as decisively precarious for so many in what is now the “ordinary” of communal and political life. Shared affective responses arise from these central forms of crisis ordinariness today. At the more microscopic level of front-line homeless care in the US, crisis ordinariness takes a form that is best characterized in two senses that converge in the phrase “crisis ordinariness.” First, navigating moments of crisis are simply part of the front-line work of caring for homeless men in the US. Though jarring, these kinds of crises were never exceptional or extraordinary events for shelter workers. As several workers put it, they were “just a part of the job” of front-line homeless care. And this gets to the second point, ordinariness. Moments of crisis always emerged from somewhere, as “an amplification of something already in the works” (Berlant 2011:10). What was already in the works were the varied systemic failures which workers critiqued but could do nothing to remedy. As workers viewed it, the architecture of institutional homeless care in the US functioned to manage the homeless population but fell short in myriad ways ultimately to resolve the issue of homelessness. In this other sense, the “ordinary” of front-line work was a kind of systemic stalemate in which workers could only do so much to care. Both senses of “crisis ordinariness” shape the larger context of institutional homeless care in the US today, and I engage Berlant’s concept on two scales here: the interpersonal experiential and the larger political-economic.

At the first scale, Berlant defines “crisis” as “a process embedded in the ordinary that unfolds in stories about navigating what’s overwhelming” (2011:10). Throughout my interviews with many front-line workers at Greener Pastures, there was no shortage of such stories. Hundreds of pages of verbatim transcription and notes detail what overwhelms workers about their work, how it overwhelms them, and how they attempt to navigate it. Most prevalently, workers were overwhelmed by occurrences of clients’ mental breaks, physical issues, substance

and sobriety problems, and the violence that occurred in the shelter and at the shelter's extensions of subsidized and assisted living units. According to front-line workers, clients suffered mental breaks that stemmed from undiagnosed or diagnosed illnesses such as schizophrenia, bipolar disorder, manic depression, or others which could result in violence aimed at oneself and/or others and could require the intervention of a professional team of specialists. Some experienced physical issues that stemmed from rapid physical decline due to undiagnosed or diagnosed illnesses such as heart disease, hepatitis, HIV/AIDS, diabetes, liver disease, and others which could result in sudden hospitalization or further intervention from a team of emergency medical responders. Workers noted that this was a particularly striking issue for the population of homeless men at Greener Pastures. Clients faced substance and sobriety difficulties involving immediate sicknesses from the overuse of or withdrawal from alcohol and/or heroin, or the abuse of crack, pills, or various synthetics which could result in overdose, EMT response, or hospitalization. Finally, threats of violence and real violence between men, or between men and the staff, could occur and result in injuries, police intervention, or even jail time for offenders. In rare but serious cases, mental breaks, physical issues, substance and sobriety problems, and violence could result in client death. These are merely examples of brief or prolonged moments of experienced crisis that were "just a part of the job" for front-line workers in the homeless sector. Nonetheless, attempting to provide effective care to clients during these moments was what workers considered the most overwhelming part of their work of care. Sometimes there was success in resolving the crises, and sometimes there was failure which could be costly. Sometimes, though, there was simply nothing to be done and no way forward—a point to which I return in the following section.

At the second scale, these crises never unfolded as ruptures against the typical state of events. Rather, they emerged from a fraught ordinary of institutional care. As Berlant suggests, the ordinary is “a zone of convergence of many histories, where people manage the incoherence of lives that proceed in the face of threats to the good life they imagine” (2011:10). By attempting to provide institutional care for homeless men, front-line workers at Greener Pastures worked toward an imagined good life for themselves and their clients where they would be effective care workers and clients would be successfully and permanently housed (see chapter 3). Pastoral work-lives converged in this zone of a good life fantasy of effective institutional care, and proceeded, often precariously, in the face of threats to it. The individual crises that overwhelmed workers (described above) threatened this institutional good life fantasy, but they always occurred in an “ordinary” of structural inadequacy of which workers were aware and critical yet could do little to remedy.

Case workers expressed how they felt aggravated by the failings of the federal government to prioritize the care and treatment of mental illness and addiction and to fund that priority adequately. Outreach workers were aggravated by the shortcomings of a fragmented system of homeless service provision as they would watch men cycle for months, years, or in some cases, more than a decade from shelter to soup kitchen, from emergency room to prison, or from detox to the tents back under the highway bridge. Clinical therapists were upset by a health care system they saw as overlooking, undertreating, and at times, hastily misdiagnosing the homeless population while they were also dismayed by a legal system that they thought worked against rather than for homeless men.

Though not “front-line workers,” upper management were critical of the lack of decent paying jobs in the city, region, and across much of the country which exacerbated any idealized

notion of “affordable housing,” especially for the most marginalized. Front-desk workers were disheartened by the history of racial injustice across the country which confined so many African American men to life on the street. Some of them were also troubled by how many military veterans came through the shelter due to what they viewed as a neglect and abandonment by the country of those who volunteered to serve it. And workers of all kinds were indeed cynical about the countless ways that housing has become unstable and precarious for so many in the US due to an underlying but pervasive logic about the “free-market”—for example, things like cuts to social services, the rolling back of rent regulations, dwindling public housing programs, negligible rent subsidies for those who actually could qualify, and gentrification in the name of urban development which are so often the major reasons leading to evictions, foreclosures, and displacements. In short, workers recognized one or many of these structural elements that shaped the ordinary in which front line crises unfolded. And like moments of crisis, there was little workers could do to fix these systemic issues.

Considering both senses of “crisis ordinariness” would suggest that the routine work of navigating moments of crisis with clients is already embedded in an ordinary of institutional ineffectiveness to resolve homelessness—a kind of ongoing crisis itself. Despite that this routine work is overwhelming and exhausting for front line workers, they persist in their attempts to care. Despite that workers find so much lacking about broader institutions of care, they endure in doing the best they can, given numerous limits, in their work. The main point here: Insofar as front line workers continue the institutional labor of caring for homeless men while at the same time being overwhelmed and exhausted by the crisis ordinariness that such work entails, then their work can be characterized as cruelly optimistic. Furthermore, as the ethnographic data

below illuminate, the affective charge of such cruel optimism reaches a critical point at the impasse of the present.

Impasses of Homeless Care

The present takes shape as an impasse for so many in an era of enduring cruel optimism where crisis has become ordinary. Berlant writes of this impasse as a kind of cul-de-sac of lived uncertainty: “In a cul-de-sac, one keeps moving, but one moves paradoxically, in the same space. An impasse is a holding station that doesn’t hold securely but opens out into anxiety, that dogpaddling around a space whose contours remain obscure” (2011:199). While Berlant writes of “the impasse” of the present in the singular form to emphasize its structural form, my data show that this structural form gives way to dozens of smaller, lived impasses. Such impasses were commonplace at the front line of homeless care as so many workers experienced so many moments where they felt they could do nothing to care for clients. In other words, in these “holding stations,” (Berlant 2011:199) front line workers experienced the deadlocks of institutional work where their optimism to care wore thin.

A history of pastoral power has constituted optimistic subjects who care in the contemporary world (see chapter 3), but with no clear path forward to guide a flock to a better future, front line workers often found themselves simply dogpaddling, treading water at the many impasses of care that routinely emerged (to draw on Berlant’s metaphor above).¹⁹ At an

¹⁹ Berlant uses this metaphor elsewhere in an equally pertinent way: “In the impasse induced by crisis, being treads water; mainly, it does not drown. Even those whom you would think of as defeated are living beings figuring out how to stay attached to life from within it, and to protect what optimism they have for that, at least. Marcuse’s prophetic description of postwar U.S. society charts it out: while people comfort themselves with stories about being the system or being defeated by it, they “continue the struggle for existence in painful, costly and obsolete forms”” (2011:10).

affective register, they conveyed in sentiments, facial expressions, gestures, timbres, and emotions the overwhelming “cruelty of now” (2011:28) that arose from the manifold impasses of homeless care. Their feelings of anxiety, frustration, disappointment, and even resignation, were palpable. The vignettes below detail several cases when frontline workers experienced the impasses of homeless care. As “spaces of time lived without a narrative genre,” (2011:199) these impasses do not conclude with resolution but with the anxiety of potential loss that workers experienced. In the first case, a support worker I call “Erika” faced the potential loss of her professional caring self. At an impasse with a client she deemed to be a “difficult,” she considered quitting her job. In the second case, a clinical therapist I call “Kate” contemplated the foreseeable death of a client. While he waited for a new and better future, she continued waiting for an inevitable loss, a fate that she had expected. In the third case, an experienced case manager I call “Idah” faced the literal loss of a client. “In limbo,” she continued to hope that her client would be found but had to dwell in an uncertain present. In each case, workers experienced the impasses induced by the crisis ordinariness so characteristic of an era of cruel optimism. Pastoral power met an incoherence at these junctures and optimism so often became cruel as workers were worn down by the present impasses of homeless care. The tone of these vignettes shifts dramatically from an analytic to an affective valence as I attempt to convey the sensorial uncertainties of workers’ lived experiences at these impasses.

Other Jobs

Outside the supportive housing complex in one of the city’s poorest neighborhoods, nobody was rushing, and nobody looked panicked. One firefighter sat and calmly talked to Herb, an African American man in his seventies, while two others stood nearby casually joking with

each other. It seemed what was going on was just a mundane part of their routine, no more intense than a lunch break at the firehouse. Someone inside the truck finally turned off the bright red flashing light that for the past several minutes and through the mild, misting rain illuminated the glass entryway to the building. I was on my way out the door after a scheduled research interview with Erika, Herb's support worker, but stopped briefly here to see what was unfolding outside. Peering through the massive windows, I could not make out exactly what the firefighter was saying to Herb, who stared solemnly down at the sidewalk. But I had a good idea because it turned out that Erika was right. Only a few moments before, she had predicted in a tone of half serious resignation, "He might just call before you leave today."

In the past five months, Herb had called 9-1-1 and other emergency services over three hundred times. The fire captain commented that "he's running up a bill in city services that cost more than the [sports arena's] rent!" Herb almost always called because his asthma bothered him, but not to a point where responders would qualify it as an "emergency." He had medication and, at Erika's request about a month before this day, the fire department chipped in and bought him a nebulizer for personal use. If he would simply administer the treatments himself in his room, then the emergency calls should stop. But he didn't, and they didn't. And Erika reminded me that just like the story of the boy who cried wolf, the single occasion no one shows up to help could prove to be the only occasion that help would truly be needed. It was a matter of time until Herb's age, declining health, and medical conditions would catch up with him in a serious way.

So, emergency responders vigilantly showed up every time Herb called, knowing full well the unlikelihood they would be needed, a kind of ordinary pulsing of a potential crisis. And Erika continued to try to work out creative ways to alleviate what everyone regarded as an unnecessary strain on public resources. After five months though, she was running out of ideas.

Other local organizations seemed to have their hands tied in this case and the county was of no help. After all, Herb was not a violent threat to himself or others so he could not be committed against his will or have his behaviors regulated. Like so many homeless men using so many services across the United States, he simply occupied social space in what the broader community seemed to consider yet another public inconvenience. As the firefighters got back in their truck, I watched a gentle drizzle fall on Herb on the street corner outside. I was glad to see that this emergency call did not require any medical intervention but was dismayed to see him looking so defeated: wet from the rain, motionless, hunched over, head hanging.

Erika summarized Herb's situation quite bluntly during our interview: "Everyone can't be independent." According to her, because Herb suffered from severe and persistent mental illness, he was almost entirely dependent on institutional care for his very survival. But he should not have been in the supportive housing complex in the first place. Herb was entirely unreliable when he was left on his own and clearly needed more than the bit of support Erika could offer. He eluded his insurance providers despite their persistence to try to reach him. He dodged his case worker who desperately tried but failed in taking a more "hands on" approach with Herb. In Erika's words, he was "just kind of floating, by himself," as all of the efforts meant to help him just "fell by the wayside." What he needed was the around-the-clock, personalized care a group home kind of setting could offer. This was what the local Safe Haven provided for the city's most dependent and vulnerable men—the literally homeless with severe and persistent mental illness. They had helped Herb before.

The problem was that the local Safe Haven was no longer an option. Because of recent funding cuts, it was forced to close its doors. All the clients, including Herb, were relocated, and often ended up in ill-fitting environments. Erika had described how she found it both "difficult"

and “frustrating” how certain homeless men with “severe mental health problems” and “severe substance abuse problems” who needed twenty-four/seven care were forced out of the group homes where they were staying. Many of them were hastily placed into the more independent living, subsidized housing complex where Erika and other staff could offer relatively limited care as support workers. Erika could not make sure Herb ate three meals a day or that he took his medicine when he was supposed to, both reminders she thought utterly necessary. She reached out to him as best she could, but he was virtually always avoidant with her, and with everyone else for that matter. For Erika to help Herb in any real way at the supportive housing complex, he needed first to seek her help.

Erika assured me that she cared about Herb. Having come from years of homelessness herself, she had a unique, and I would argue, profoundly insightful way of caring. But her optimism to care for her clients more generally was curbed at this impasse. Her care had worn her down and she was at wits end. Through many deep sighs during our interview, she debated what to do about Herb. She leaned back in her chair and rocked slowly, signaling an occasional, near-listless shrug as she spoke of him. Perhaps this was all she could muster given her exhausted attempts to care. She struggled to manage and to just get by without ever being able to resolve his situation. This was just part of her job—the crisis ordinariness of front-line homeless care. With exhausted resources, tight time, constraining protocol, and a seemingly immovable bureaucratic apparatus, what could Erika actually do to help a man like Herb? Perhaps there was a solution of which she was unaware. Perhaps if she cared differently, things would get better. With some reticence and tight lips, she concluded her thoughts about Herb’s situation somewhat abruptly: *“So you know... It’s making me so discouraged that, to tell you the truth, I’ve started looking for other jobs.”*

This impasse of homeless care unfolded amid the crisis ordinariness of front-line work which was comprised of a knotted mess of institutional shortcomings in which Herb's needs were not met and in which Erika had little recourse to help in the present moment. With case managers, support workers, fire fighters, and others, she had attempted to provide Herb with the limited support available, yet this became a seemingly impossible task as he avoided this help only to continue to press emergency services. Facing this impasse, Erika's discouragement was overwhelming to the point where she had considered looking for other jobs. Her feelings unfolded as the optimism of effective institutional care to which front line care workers found themselves attached was slowly dissolving. While other jobs could mean a kind of loss of her caring self, at least in terms of her front-line work of caring for homeless men, it could also provide a way away from the impasse.²⁰

Waiting

Despite the unambiguous clinical appearance of Greener Pasture's therapy offices, the clinical therapists who worked there emphasized that their work was far from typical, at least in the normative sense that their therapist colleagues outside of a shelter context experienced.²¹ All the clinicians at Greener Pastures were certified in both mental health and addiction therapy as the particular population for whom they cared commonly dealt with a plethora of issues that

²⁰ Erica later explained that she was becoming more interested in getting into politics and even running for a local office position. I do not dwell on an analysis of this but do think it is worth noting that she remarked how direct political engagement could offer her opportunities to make changes that she could not make in her current role.

²¹ One clinician explained that she did not have the luxury of working with "mothers" who were temporarily "upset that their kids didn't get into Harvard." Perhaps this was a reference to a personal experience. Or as I thought, this was a likely stand-in sentiment or even a class critique that suggested the highly troubled nature of clinical therapy with homeless men relative to other therapy settings with more ontologically secure populations.

demanded these types of therapeutic interventions, difficult as they were (see above “Crisis Ordinarity”). These issues took center stage in most clinical encounters with the homeless clients that the clinical staff saw. Most clients desperately wanted to reach the goal of living in stable housing permanently, but such issues were viewed by staff as major “barriers” that separated them from that achievement. Many times, clinicians ended up simply doing the work of case management during therapy sessions. With a citation of Maslow’s hierarchy of needs, the same question was rhetorically put to me different ways by different clinicians: “how can clients begin to work on their feelings when they don’t have a roof over their heads and they don’t know where their next meal is coming from?” Clinicians routinely found themselves simply making phone calls to local social services and pantries as a part of their job. While activities like these did not synchronize well with the ideal role of the therapist, clinicians seemed to accept it as just the lot that they were given. Overall, clinical therapy with the population of homeless men at the shelter involved a kind of nitty-gritty work that does not share the conventional connotations of “therapy.” At Greener Pastures, much of this work involved a continuing struggle to manage the survival of clients amid the crisis ordinary of front-line work.

Kate used the most colorful language to describe her anger at the injustices that contribute to homelessness and the most lingering silences to fragment her sadness about the many forms of social abandonment that homeless men experience in the US (see Biehl 2005). Several times during our interview, I got caught up in the potency of her acute feelings and experienced a strange folding of countertransference that required my own emotional labor in my attempt to maintain the right distance (Hoschild 1983). I could not determine if she was the analyst who felt too much for her subjects or if I was the analyst who felt too much for mine (see Coleman 2009). Further, I was troubled by trying to locate what should be the “right” distance

for an ethnographer to maintain during emotionally charged interviews, particularly interviews with clinical therapists who engage in their own ilk of conducting emotionally charged interviews with homeless men. The point here is that Kate seemed to feel deeply for the situations of her clients and her feelings arose in an ordinary of crisis management, and most palpably, at a present impasse of care with a client I call “Dennis” who Kate said was “experiencing medical crisis after medical crisis,” which was deeply “demoralizing to him.”

I never prodded staff at Greener Pastures with deep, existential, and personal questions as these would have been beyond the scope of my research on the work of care. I simply asked about their work—what they did, how they did it, and what they thought about it—and made those research intentions clear from the outset. But on numerous occasions, what I assumed to be relatively benign types of interviews precipitated upsetting emotional moments for front-line workers. Several workers struggled to hold back tears, a few wept briefly, and one even outright sobbed during interviews. In those instances, it seemed the more workers talked about their work, the more their emotions simply spilled over. I tried to be sympathetic as I found during the course of research that the list of overwhelming frustrations of front-line workers was indeed a long and complex one (see above “Crisis Ordinarity”), and that the costliness of the emotional labor involved in their work often proved to be too much for some workers.

As the clinical therapists at Greener Pastures assured me, “self-disclosure” with their clients was ill-advised in the therapeutic context. But outside the practical work of hands-on care, such kinds of emotional management seemed less necessary. On the other hand, after several years of working at the front line of homeless care, Kate came to believe that the “academic” version of clinical therapy was “total bullshit” as far as the treatment of homeless men was concerned. As she explained, she worked in deeply personal ways with some of “the most

underserved” and “most traumatized, victimized people you’ll ever encounter” who are going through “some of the most tragic stories and most dangerous situations” of their lives. And this justified her view of emotional exchanges with clients as also a matter of reciprocity. While she did not make it a habit, Kate was fine with getting emotional with clients. It seemed less than “genuine” for her to sit idly by, scribbling notes while clients broke down in front of her. As she put it: “that’s not really fair if I’m gonna put on a big mask and ask you to take yours off.” The implications of her words stung me only a few minutes later when she struggled to retain control of her own emotions as our interview unfolded.

I inquired into the challenging aspects of Kate’s work as a clinical therapist at Greener Pastures. I relay part of her response and include changes in comportment and affect in parentheses:

(Kate pauses.)

Working with people I know are going to die.

(Kate’s voice gets quieter and raspier.)

Um... because the mortality rate for like active alcoholics and active addicts is pretty high. And then you add on homelessness and high-risk behaviors and... I have a couple AODA [alcohol and other drug abuse] substance abuse clients with severe medical conditions care of their disease and one who relapsed and inevitably died.

(Kate’s voice gets lower and trembles. She struggles to hold back tears.)

Within like a seven, it was like a seven-month relapse [...] where he inevitably died as a result.

And like learning how to deal with that is an interesting balance because on the one hand, you

can see it coming, and on the other hand, what do you do with that person who you know might kill themselves? But that's not where they're at or what they wanna work on, or. Um. [...]

(Kate takes a deep breath.)

[Dennis], he's very well in this spiral of system failure quite possibly. Which sucks because he's been doing the best he can. And he's been sober for a year. But he, he put his body through hell for a very long time. And so, like on the outside, I'm starting to see, like, on insulin-dependent diabetes. Well, no, diabetes unmanaged—he's gonna end up on insulin. Kidney disease—we don't know what level. He has congestive heart failure. He's a pack a day smoker. And all these things that are just gonna add up. And meanwhile he's waiting for like, this new chapter of his life to begin. And so that's.

(Kate sighs a long, exasperated sigh. She tries very hard to hold back tears and resituates herself in her chair. She then takes a deep breath and does hold back tears. Her voice gets louder.)

That's an important practice, in like, staying in my lane.

Kate could hardly bear to watch her clients decline to a point where their future life chances were narrowing and uncertain. But therapeutic interventions were limited by the congealing facets of crisis ordinariness given institutional limitations that played out day-to-day. Kate understood that her clients had a high “mortality rate,” and she had witnessed the death of a client recently, though I do not share the details of that experience here. She also witnessed the complicated medical problems that stem from and contribute to mental illness, substance abuse, and homelessness. And Kate was deeply concerned for clients on the razor's edge of death but found she could do nothing to care effectively. She felt that the only appropriate recourse in her

role was to express her concern for them and had to tell several clients over the years, “I’m afraid you’re going to die.”

Beyond voicing this concern, Kate’s care was stuck, and it overwhelmed her. She tried to control her feelings, but this was understandably a heightened struggle given this impasse of homeless care at the threshold of life and death. As she described the specific situation of Dennis, her eyes were brimming, but the tears never quite gave. According to Kate, Dennis was doing the best he could. He achieved a year of sobriety, a feat which is not fully comprehended by those not self-identified or labeled by others as substance abusers. But he put his body “through hell” for years and had to deal with a litany of physical problems that then wore him down. While Dennis was “waiting for like, this new chapter of his life to begin,” Kate was also waiting for what she feared would be his last chapter. Kindly reassuring clients like Dennis of her hopes for their successes, playing the role of “cheerleader” against all odds, but remaining otherwise a spectator on the side-lines of a tragic game of health, sobriety, and housing security, Kate was “learning how to deal with” situations like Dennis’s. “On the other hand, what do you do with that person who you know might kill themselves?” At such an impasse of front-line homeless work, Kate’s affects and feelings unwound, and the optimism of effective institutional care revealed itself as cruel.

In Limbo

Idah missed me twice already. The first meeting was cancelled last-minute because some unexpected work pulled her away. The second time we scheduled an interview, she simply didn’t show up, and I never asked for an explanation. It must have slipped her mind. Now it was almost noon, an hour after we had planned for our third meeting and I didn’t see her anywhere. While I

typed her another email reminder on my phone, I wondered if maybe we would just never meet. As everyone's time was stretched so thinly at Greener Pastures, I made a point to try not to be a bother to staff. But occasionally, I had to make a request or two. I went to the front desk. "Charlotte, was Idah supposed to be in today?" I asked, almost certain of the answer. "Yeah. But I haven't seen her," Charlotte responded. "You've been waiting for her this whole time?" she asked. I smiled and nodded as she gently handed a small paper cup of water and a few pills to a very hunched-over, older shelter client. Charlotte glanced at the sticky notes surrounding her computer screen. "Hang on. I have her work number right here." Charlotte called Idah and spoke very quietly and very briefly, then she turned to me and said, "It's okay if you wait downstairs." A group of volunteers were setting up to prepare food across the hallway, and I would soon become more of an obstacle than a help during the daily hustle and bustle at the shelter.

I sat by myself in one of the shared office spaces in the basement where the case managers filled out paperwork—generally the most mundane part of their job.²² After nearly another hour passed in silence, Idah swung the door open hurriedly, tossed her bag on the floor next to me, and asked somewhat abruptly, "can we do this interview here or should we go somewhere else?" I responded, "here is fine." Half out of breath and visibly flustered, she plopped down next to me. "It's okay if you would prefer to reschedule," I told her half-heartedly. Idah assured me that now was as good a time as any. I got a sense that she would rather get this interview out of the way than postpone it any longer. She did agree to it but maybe she thought I

²² To pass the time, I studied and mapped this space: white-tile dropped ceiling with intensely bright fluorescent lighting, neutral off-white-colored walls, barely audible secondhand ticktocking on the nonspecific-looking wall clock, predictable office flooring, a bunch of sleeping computers on older-looking desks. So many right angles, so few colors. It seemed like the perfect place not to enjoy doing paperwork.

was being a bit too persistent. Or, as I came to think later, maybe she was just overwhelmed by everything and “interview with anthropologist” was not on her list of priorities.

As we began our interview, Idah heaved a deep sigh, crossed her arms, then much to my surprise, burst out laughing. After a few seconds as I looked on somewhat bewildered, her laughter slowly subsided. She calmed down and began to slowly shake her head back and forth with her eyes closed as if gesturing “no” very deliberately and rested her open hands on the edge of the table. “So today!” she exclaimed loudly but with audible exasperation. Still a bit stunned, I asked her, “What happened today?” Idah proceeded to tell me, through a lengthy monologue, about her morning. Her client, “Randy,” had gone “off-grid” and she was doing everything she could to try to find him. Finding missing clients was one small but extremely important part of her job as a case manager at Greener Pastures.

But she had many other jobs and a lot of clients. Generally, after outreach workers from the shelter connected chronically homeless men to temporary forms of subsidized housing, it was Idah’s job (and others) to keep them housed and help them navigate any potential issues that could get in the way of them staying housed. In other words, it was her job to keep clients from becoming homeless again. This was no simple task. It required her to help them get in contact with any needed employment services, disability services, transportation, or benefits offices, and to help them navigate any phone calls or paperwork involved. She would also take clients to food pantries, on doctor’s visits, or to other appointments and assist them in maneuvering through all of this as they needed help. She regularly checked in with her clients and helped them find needed hygiene products, other daily necessities, and cheap or used furniture to fill their housing units. As she told me, it was important for clients to be comfortable in their living spaces to want to stay housed.

Like Erika and Kate, Idah worked in an ordinary of front-line crisis. She was regularly overwhelmed by trying to assist clients as they dealt with serious emergencies: helping during drug overdoses, enduring physical threats during psychotic episodes, and even intervening in suicide attempts. After fifteen years of doing the “street” work of case management, she had become accustomed to crises, but was far from complacent or nonchalant about them. There was a sense of urgency and responsibility she felt with her clients. After all, as she told me, she was often “the only person that they have” and “the only connection they have to the world.” This was the case with Randy, and I could tell she was troubled by the events that unfolded earlier in the morning.

Randy’s sudden disappearance made Idah extremely uneasy. Occasionally, newly housed homeless men will vacate their housing situation for a variety of reasons. Some have legal trouble (e.g. an outstanding arrest warrant) that catches up with them and can avoid it altogether if they can’t be located in any single living space. Or sometimes it does catch up with them and they end up in jail, which always took a bit of sleuthing on Idah’s part to find out. Some will connect or reconnect with estranged family or friends who will offer an alternative living situation and they will simply move out without telling any support worker. Others have lived on the street for so long that they get overburdened by the new pressures of living inside and ditch their units without warning. It may seem counterintuitive to many who are reading this, but for some, life indoors is simply too stressful. It requires a kind of awareness and planning that some would not sacrifice for what they consider the freedom of life outside. And some have substance abuse relapses or mental breaks that drive them away for lengthy periods of time in shame, guilt, or fear.

None of this concerned Idah too much regarding Randy's situation. What worried her about Randy was the possibility that he had fallen ill somewhere and could not contact her or worse, that he had died off-grid, some place that nobody would notice. It was a rare occurrence yet a gravely worrying one. Once in a while, clients do die in their units and either their case workers find them during a routine check-in or neighbors will call landlords or police because of an irregularly lengthy absence or a worrying smell. Seldom, lost homeless individuals would not be found at all. A major part of Idah's reason for worry was that Randy was older and had lots of health problems. He had experienced homelessness off and on for years. He received social security and disability but had very little income to spend on anything after paying for child support. All this added to her anxiety.

Idah called Randy every couple days to check up and make sure he was doing okay—that he was housed and was able to stay that way. He relied on her to take him to the local food pantry twice a month to pick up a basket of food. Last week (before our interview) was supposed to be grocery week, but Idah couldn't find him. She tried to call. It went straight to voicemail. She assumed that Randy misplaced the phone he was given. According to her, he occasionally lost things like that in his unit, but they always turned up. After a few days of failing to reach him by phone, she went to Randy's apartment, but he was not there. So, she left a note under his door saying that she visited and offered an alternative time to visit. Idah went back the evening before our interview but couldn't get into the apartment building. In her assessment, it was very "unusual" that Randy wasn't responding so she tried again early on the morning of our interview. When she didn't see any of the usual signs of Randy, she sat down in front of his apartment and waited for a bit as she "played phone tag" with the property's landlord. After a half hour or so, she connected, and the landlord quickly came over to help her into the building. Randy was not

inside either. In noticeable enervation, Idah told me: “*He wasn’t there. But I mean fortunately, you know, I didn’t find him deceased or anything. But he wasn’t there [...] So I don’t know. I’m still kind of in limbo.*”

Of course, Idah hoped to find Randy, but also recognized the possibility that he may not be found. Some previous clients who went missing were found in no time. Others were found much later. Some were found deceased. And others were just lost. The point here is that Idah was stuck at this impasse of front-line homeless care where she could do nothing to help Randy. I could see and hear her frustration about this potentially tragic situation. All the uncertainty was tiring her, yet she persisted in her search and was going to make calls immediately after our interview. While I waited in the front desk area of Greener Pastures that morning, Idah sat in front of Randy’s apartment, making calls, and trying to track him down. While Charlotte called her to check in for me, Idah was reluctantly becoming relieved that at least Randy was not dead in his apartment. From the moment our interview started, I could sense Idah’s weariness. She seemed physically and mentally drained. “In limbo,” she faced an impasse of front-line homeless work where she could only do so much to care.

Conclusion

The concept “cruel optimism” provides a way of entering into the impasses of the present without passing over them. As an analytic lever, it offers a means of thinking about the innumerable ways crisis inheres in the lived experience of those who continue to pursue worn down good life fantasies that thereby wear them down through such pursuits. In this chapter, I have drawn on Berlant’s work (2011) in an attempt to render clearer the exhausting uncertainty of the front-line work of homeless care in the US and the precarious positions of those who strive

to care against many odds. Ethnographic data cannot speak for itself, and it is through the lens of an affective present of cruel optimism that the limitations of front-line homeless care workers has become most clearly illuminated to me. Workers are attached to a good life fantasy whereby effective institutions, and the subjects who care within them, can lead homeless men to a better life, here and now, by guiding them down a path toward sobriety, health, employment, and housing (see chapter 3). By workers' persistence to continue caring in these institutions, they continue to stay attached to this good life fantasy. Yet, the optimistic work of caring for homeless men is cruel insofar as it exhausts the workers who do it. And it is at the impasses of care where workers struggle the most to manage the crisis ordinariness of their historical present. In these "holding stations," as Berlant puts it, the attempts to care that should add up to something are what ends up wearing workers down, professionally, emotionally, and physically.

This chapter was not concerned with the outcome of whether Erika did end up quitting her job, of whether Kate did end up mourning the death of Dennis, or of whether Idah did end up finding Randy. Perhaps if Erika persisted and eventually found a solution for Herb's situation, then she could be framed as the quintessential caregiver, a hero of sorts. If she quit her job and moved on to something less discouraging, she could be framed as care-less in front line terms, a victim of sorts, giving up under the crushing "weight of the world" (Bourdieu 2000). Perhaps with Kate's encouragement, Dennis could have healed and lived a restored and prolonged life. Or, if her worries turned out to be the case for him, then we could see yet another example of the "structural violence" (Farmer 2003) that devastates the lives of so many homeless men. Perhaps Idah's client returned shortly after our interview, never to disappear again. Or maybe her limbo turned out to be merely a postponement of something far worse for Randy. But in every case, there would be a resolution to the impasse, a way out of it by passing through it that would allow

for a sensible analysis of everything after-the-fact. All of this would miss the point that the front-line work of homeless care in the US is rarely so tidy. And passing through the impasses would provide a detour away from the lived experiences of the anxiety of loss that so many workers endure every day. Many moments of “perhaps” come and go, and many others persist, never to find their resolution. Front line workers often find themselves stuck in such impasses without any narrative arc of resolution in sight. By focusing on the impasses of homeless care, rather than how workers pass through them, I aimed to have conveyed a different truth about the lived experience of front-line homeless workers, that is, the cruel optimism of so many subjects who desperately try to continue to care for others.

CHAPTER 5. WHERE I END AND YOU START

“This job can get really heavy [...] To hear about the struggles that other people have to go through and to think about how heavy that is for them can become your own heaviness.”

-Melissa, a clinical therapist at Greener Pastures

“They always say don’t take the work home. But you do, you know? So, that’s heavy.”

-Tori, a case manager at Greener Pastures

Introduction

The previous chapter illuminated the cruel optimism at the impasses of front-line care at a shelter for homeless men. In it, I explored how front-line workers were continually worn down by the activity of trying to care for homeless men. The cases showed how workers were stuck in impasses amid the crisis ordinariness entangling their work: one worker considered quitting her job, another waited for what she foresaw as her client’s inevitable death, and the last was caught in the limbo of attempting to locate a client who went missing. Such impasses emerged from the everyday routines of trying to care for men at the homeless shelter, a population a few front-line workers referred to matter-of-factly as the “most forgotten about” and most “underserved population” in society. As I argued, these were not exceptional or extraordinary events; rather, they were simply the conditions of front-line work. In other words, at the front-line of homeless work, crisis was ordinary, and this exhausted workers affectively and wore on their sense that their attempts to care and the world they suppose needed it would “add up to something”—that is to say, the cruel optimism of front-line care (Berlant 2011:2).

In this chapter, I explore worker subjectivity amid these front-line contexts of cruel optimism. Responding to a task set out by Biehl, Good, and Kleinman that anthropologists should “rethink” subjectivity in innovative ways (Biehl et al. 2007), I argue that front-line care worker subjectivity in the US homeless sector is both historically constituted *and* continually shaped by present realities (Biehl et al. 2007). Biehl et al. write: “In the many settings in which anthropologists now work, the vagaries of modern life are undoing and remaking people’s lives in new and ominous ways. The subjects of our study struggle with the possibilities and dangers of economic globalization, the threat of endless violence and insecurity, and the new infrastructures and forms of political domination and resistance that lie in the shadows of grand claims of democratization and reform. Once the door to the study of subjectivity is open, anthropology and its practitioners must find new ways to engage particularities of affect, cognition, moral responsibility, and action” (2007:1).²³ This chapter thus attempts to “rethink subjectivity” along three respective axes: 1) the constitution of “vulnerable” subjectivity via a novel interpretation of Foucault’s genealogy of pastoral power, 2) the forming of “crisis-shaped” subjectivity via a reading of Berlant’s analysis of our present era and 3) the activity of boundary maintenance as a form of “lateral agency” via an ethnographic engagement with front-line workers. Understanding worker subjectivity is necessary for understanding the worlds of the homeless service providers of this study because it highlights how their worlds were shaped by institutional and structural conditions, but also how workers attempted to respond to those conditions by negotiating boundaries as a last resort to cope with being worn down by their routine work.

²³ For more on this specifically, see Biehl et al (2007).

First, Foucault's work illuminates the constitution of distinct kinds of subjects within discrete historical regimes of truth and institutions of power. Here, it offers a way to contextualize historically and institutionally the exceedingly precarious position of front-line workers in contemporary organizations of care. Drawing on his genealogical accounts with a novel interpretation which considers that subjects who care are simultaneously constituted alongside confessing and obedient subjects who are cared for (see chapter two), I suggest that "pastoral vulnerability" is a persistent feature of pastoral power and of the constitution of subjects who care in contemporary institutions, but with the caveat that this feature persists principally at the front-line of work where staff often found their professional and personal selves "jaded," "burned out," or "worn down," in their attempts to care for homeless men at the shelter. Furthermore, what I call "pastoral vulnerability" highlights the fact that, as I found, front-line workers often found themselves tangled in precarious relationships of care with clients where clear boundaries were difficult to locate and navigate while it offers a conceptual tool to clarify what Joao Biehl has astutely identified as a "knotty relationship between the care of the self and the care of others" that confounds many experiences of care in the contemporary world (Biehl 2012:252). I found that boundary negotiation was so problematic for front-line workers because they occupied a vulnerable position in their attempts to care. And boundary negotiation was ultimately a survival strategy for the job of providing homeless care.

Second, while Foucault's work on pastoral power is helpful in delineating the position of vulnerability inherited by front-line subjects who care in contemporary institutions, it falls short to address adequately workers' responses to the lived consequences of being constituted as vulnerable amid the crisis ordinariness of work which also shape front-line worker subjectivity (for more on this "crisis ordinariness," see chapter 4). To fill this lacuna, Lauren Berlant posits a

model of subjectivity beyond institutional production by focusing instead on the “crisis-shaped subjectivity” of populations already involved in “a collective catching up to what is already happening in ordinary worlds shaped in a crisis-defined and continuing now” (Berlant 2011:54). Berlant’s model recognizes that there is an array of activities that people engage in not to make themselves better through neoliberal modes of self-fashioning nor to make their structural situations better through sovereign modes of intentional agency. Rather, when good-life fantasies about a better future are continually worn thin in an era of cruel optimism, people often simply respond to the crisis ordinariness of the present through activities of detachment, survival, or just making do—forms Berlant attributes to a “lateral” kind of agency (2011:95-119). Berlant’s model offers a useful addition to the model of institutionally and historically constituted subjectivity by providing a means to reframe subjectivity as also emerging from “crisis-shaped” circumstances in the contemporary United States. As I found, the capacity of pastoral vulnerability especially yielded consequences that were costly to workers given the structural situation of crisis ordinariness in which their work was embedded. Thus, even as front-line workers were vulnerable subjects who cared, they were also crisis-shaped subjects who engaged in activities of lateral agency in their attempts to just get by, make do, and survive the stress on their sensorium that unfolded at the front-line of homeless care.

Third, considering both the historical constitution of vulnerable subjectivity and the present realities contributing to crisis-shaped subjectivity together affords a more complete picture of front-line worker subjectivity to be rendered. However, the question remains: given such vulnerable and crisis-shaped subjectivities, how do contemporary subjects who care at the front-line of homeless organizations attempt to persist and survive the stress of work? Drawing on ethnographic interviews, I describe two cases of vulnerable and crisis-shaped front-line

workers who coped and persevered by engaging the improvisational activity of boundary negotiation. By doing so, these workers sought a reprieve and relief from being worn down by the many ways “the weight of the world” (Bourdieu et al. 2000) inhered in their lived experiences of working at Greener Pastures Shelter for Homeless Men. The chapter epigraph highlights this theme and I return to it in the conclusion. My ethnographic material shows that front-line workers responded to their structural situation of vulnerability and crisis ordinariness by negotiating always unclear and fraught boundaries between themselves and their clients. As we will see, such efforts were not without complications.

Vulnerable Subjects

As Foucault made clear, pastoral power is still with us today (2007:148, 166). The multifarious ways in which its remainders persist is an open-ended question (see also Golder 2007). As I suggested in chapter two, paralleling the constitution of a flock of confessing and obedient subjects *of* care, the constitution of subjects *who* care for others continues to be part of its persistence in the present. And chapter three described one part of the constitution of subjects who care in terms of a pastoral optimism about the good life fantasy of effective institutional care while chapter four showed how this optimism could also be cruel for front-line workers. What I suggest in this section is that subjects who care at the front-line of contemporary pastoral institutions are further constituted by a specific vulnerability originally rooted in pastoral power—i.e., a pastoral vulnerability. As I describe later, at the front-line of homeless care in the US, where ordinary work unfolded in a highly tumultuous and crisis-induced present, workers often experienced the consequences of being constituted as vulnerable subjects who care. That this vulnerability could bear consequences that were costly for them, both professionally and

personally, was something they struggled to manage amid the crisis ordinariness of their work. But first, highlighting a few key themes in Foucault's work, I take a minor genealogical detour focusing on the eras of pastoral power's origins, institutionalization, and development to offer a very condensed account of the historical production of "pastoral vulnerability" in the present. By providing this brief account, I attempt both to contextualize pastoral vulnerability historically and to identify the exceptionally precarious subject position inherited by front-line workers in contemporary institutions of homeless care.

Perhaps, when attempting to do good in the world, humans are always and have always been irreducibly and existentially fragile (Nussbaum 1986). Yet what I mean by vulnerability in this chapter is much more precise as it specifically involves an inherited pastoral power that has religious roots but as I show, has become complicated in institutions in the contemporary world. By "pastoral vulnerability," I mean *the capacity for wounding, risking, or losing one's shepherding self in one's attempts to care for others*. Foucault's analyses of pastoral power are critical here as they touch several times on a unique theme of vulnerability regarding this historically rooted "power of care" (2007:100).

In its deepest history, given Foucault's terms, pastoral power constituted shepherds who were vulnerable insofar as taking on the "burden" of vigilantly serving their flocks entailed a potential loss of self in the *selflessness* of their care and a disregard for the shepherd's own well-being. Yet, by its later institutionalization, pastoral power became a power involving a relationship of shared risk between shepherd and flock (1979:236). Christianity continued to preserve the pastoral metaphor of the guidance and care for the church: if the flock was at risk of destruction by predators or simply going too far astray and becoming lost, the shepherd shared these risks also. What this meant at the level of religious life was if the sheepfold or "church"

was preyed on by evil and lost in iniquity and sin, the shepherd or Christian “pastor” shared these risks before God. He *risked* his pastoral self, his life and salvation in his care for and guidance of the flock toward salvation (ibid). Moreover, during this time, pastoral power became a power to be self-sacrificial for the flock’s salvation (1982:214). If required, the shepherd must lay down his life for his flock to be saved. The pastor could end up wounded or even lose himself for his church’s sake. Of course, as Foucault describes it, the specifically Christian tropes here are evident, for example, the Christian gospel accounts of the “good shepherd” who “lays down his life for the sheep” (John 10:11). In the era of its institutionalization, then, according to Foucault’s points, pastoral power constituted vulnerable shepherds insofar as Christian pastors were obliged to *share in the risks* of their flocks and had to be willing to *sacrifice themselves* in their work of care for their church.

Worth noting is that these features of pastoral vulnerability during the distinct eras of its origin and institutionalization are not strictly homogenous and identical. Nor are they entirely coherent and consistent through time. To that point, Foucault’s differing accounts of pastoral power confirm that his thinking on this matter was an ongoing work in progress (1979, 1982, 2007). While an exhaustive treatment of the differential theological and historical themes à la Foucault is beyond the scope of this chapter, I find the three separate components involving selflessness, shared risk, and self-sacrifice useful to “think with,” as Levi-Strauss famously put it, insofar as they connect the vulnerability of contemporary subjects who care to a deeper genealogy regarding the power of care (Levi-Strauss 1962). I further explore its contemporary inflections in the third section of this chapter. The point here is that, taken together, what Foucault’s historical points imply is that earlier manifestations of pastoral power demanded, at minimum, a kind of vulnerability of shepherds who cared for their flocks. In other words, in the

origins and institutionalization of pastoral power, subjects who cared were constituted by a kind of “pastoral vulnerability” in which their care for others could potentially involve a wounding, risking, or loss of their selves in the service of and devotion to their flocks.

It is necessary to reiterate here several themes that I explored in chapter two. Dramatic shifts occurred as pastoral power became complicated in the eighteenth century when institutions of care expanded and became highly systematized and rationalized throughout Europe and North America (see Weber 1978). First, this “power of care” became concerned with this life rather than the next (Foucault 1982:215). The state began to take on a pastoral role through its involvement in ensuring a population’s this-worldly problems were met (ibid). Second, during this period, there emerged a general increase in the “officials” who cared (ibid). Third, in the wake of Enlightenment science, there emerged an increase in the “aims and agents” of pastoral power and it grew from its religious roots to a far-reaching phenomenon as it “suddenly spread out into the whole social body” and “it found support in a multitude of institutions” (ibid). In short, over the past few centuries, what was once a strictly religious pastoral power became a highly complex and pervasive power concerned with a vast assemblage of “this-worldly” affairs (see Weber 1958), and it spread throughout society’s institutions of care, both within and “beyond the state” (see Rose and Miller 1998). This “power of care” persists today in many institutions, particularly in diverse organizations that attempt in numerous ways to provide specific services and care for individuals and populations deemed to be in need of such services and care.²⁴ Crucially, I view my site, Greener Pastures, as one such pastoral institution and I

²⁴ As has been thoroughly discussed by Nikolas Rose, one place where pastoral power’s remnants are most apparent are in the techniques of “individualization” and “responsibilization” that have proliferated in the “psy” disciplines (1999). But, as I argued in chapter one, there is more to pastoral power than just the production of confessing and obedient subjects.

view the workers and the population of homeless men they attempted to care for and serve as contemporary analogs of the shepherds and flocks elaborated in Foucault's accounts of pastoral power (see also chapter two).

Yet, one major difference that Foucault noted is that shepherding took many new forms as the complexity of pastoral power became amplified in institutions of care during the last several centuries (1982:215). Subsequently, it seems the vulnerability of shepherds that was fundamentally linked to pastoral power in its earlier forms was not evenly distributed across and within such emerging pastoral institutions. Thus, not all subjects who care today share a capacity for wounding, risking, or losing their selves in their attempts to care for others. Institutional specializations, organizational hierarchies, and the proliferation of public and private bureaucracies have insulated many from sharing the potential consequences of caring for others. Likewise, given a sizeable mid-ranking and managerial class who do not work in proximity to their contemporary flocks, pastoral vulnerability is not necessarily a requisite of caring in most contemporary pastoral institutions. Bureaucrats, philanthropists, fundraisers, evaluators, grant writers, researchers, board members, and many others can "care about" or "take care of" flocks they do not and will not meet, talk to, share experiences with, and thus "care for" (see Tronto 1993).²⁵ This to say, what capacity exists that entails a possibility to be wounded, risked, or lost

²⁵ Political theorist Joan Tronto has deliberately made distinctions in definitions of care that highlight this dimension in contemporary times. According to her, at one level, "caring about" involves the recognition of need (1993:106). In this sense of care, anyone who identifies homelessness as an issue worthy of any kind of caring intervention "cares about" homelessness. At another level, "taking care of" involves any action that assumes some responsibility to intervene (1993:106). In this sense of care, those who feel a social responsibility to do something and do indeed, do something about homelessness "take care of." Examples of this include donating money, food, or furniture; volunteering time and resources and perhaps, cooking meals; or supporting an organization that is doing something to address homelessness in other ways. At yet another level, "care-giving" consists of physical work and engagement with those requiring care (1993:107). It involves direct action and contact with the lives of those who need care.

in attempts to care for others for the many workers who are able to care at a distance from contemporary populations considered to be in need? In today's institutions of care, many workers are instead invulnerable to the potential consequences of pastoral vulnerability.

Moreover, pastoral vulnerability disproportionately continues to persist at the front-line of work today. As I found, more than any other workers in the nonprofit homeless sector that I engaged as a part of this study, front-line workers often experienced a profound wounding, risking, or loss of their selves as real-world consequences of their constitution as vulnerable subjects who care. On one hand, there were many specific instances that show links between older and contemporary forms of pastoral vulnerability.²⁶ On the other hand, rather than focus on each particular aspect of selflessness, shared risk, and self-sacrifice in my analysis below, I find

Front-line workers in homeless organizations across the country typify this form of care as they engage in hands-on and often intimate ways in their attempts to care. While Tronto makes these distinctions to show how the specific form of “care-giving” is undervalued in our society, it suggests to me that “care-giving” is unique in that it involves a pastoral vulnerability of those who care while “caring about” and “taking care of” do not.

²⁶ Front-line workers at the shelter often reflected on the “burden” of their office and the selfless service involved in their care. Many explained how they viewed their work as “heavy” and many discussed the ways that their care for homeless men entailed a kind of loss of self. Nia, a front-desk worker made this clear as she explained her approach to caring for homeless men: “You have to take *you* out. [...] Move myself out the equation and think about their needs.” What she meant was that to do her work well, she had to focus on what clients needed and disregard her own interests—i.e. a purposeful loss of self in the service of others. Many others explained that their work involved the potential for sharing the risks of clients. Adam, a case manager crystallized this point as he described the consequences of care-giving at the front-line: “You share in their successes. And their failures too. [...] It’s easy to say “oh yeah, we’re reducing this and that.” But at what cost to the case manager? It becomes difficult.” He also noted that once he got to know clients at the front-line of work, he couldn’t help but be “invested” in their successes, but likewise, he shared in their frequent failures and this contributed to how he saw himself “getting jaded”—i.e. the costs of a potential wounding of self from sharing risks with clients. And front-line workers described in countless terms the self-sacrifice involved in their work of giving care. Most frequently invoking the high rates of post-traumatic stress, vicarious traumatization, and burnout they experienced just by doing the routine work of front-line care in the homeless sector (see also Schiff and Lane 2019), many expressed a deep sense of personal and professional disappointment—i.e. a form of the potential sacrifice of self in the front-line work of care.

it more advantageous to focus on how these points coalesce into a thematic of “pastoral vulnerability” vis-à-vis front-line worker subjectivity. In the cases I explore below, the matter is not primarily that front-line workers were constituted in terms of one or another of these aspects. Rather, what is important is that they all experienced the *consequences* of being constituted as fundamentally vulnerable subjects who care at the front-line of work. By drawing on Foucault’s work, I hope to have offered some brief historical context to the institutional situation and the precarious position of front-line workers in contemporary institutions of care. Unlike the shepherds of Foucault’s genealogical account, what is at stake in pastoral vulnerability today is not the life or salvation of the shepherd but is a “shepherding self” which I defined in chapter three as “that part of an individual that is optimistically willing and concretely qualified to care in specific ways about and/or for a specific flock.” This is precisely what bears the consequences of pastoral vulnerability and may be wounded, risked, or lost. How? Insofar as front-line workers were confronted by the many disappointments and limits of their work; insofar as they faced feelings of burnout and futility professionally ²⁷; and insofar as they felt the stresses and burdens of their work weigh heavily on them personally, they bore the consequences of being constituted as vulnerable subjects who care. Yet as I defined above, vulnerability is a “capacity” and as such, it does not necessarily mean that workers are always wounded, risked, or lost in their attempts to care for others. As I discuss in the next section, the major factor by which this capacity bore consequences for workers was the structural situation of crisis ordinariness which workers faced but could do little to change.

This Foucault-inspired genealogical linking of the constitution of front-line subjects who care in the contemporary world to a deeper history of vulnerability wherein shepherds could be

²⁷ See also Brodwin 2011.

wounded, risked, or lost in their attempts to care for others casts light on the deeply precarious subject position occupied by many front-line workers in a variety of institutions of care beyond this study. Child welfare workers, medical doctors, nurses, mental health counselors, law enforcement, clinical practitioners, and social service workers of all sorts are but a few of these kinds of precarious and vulnerable subjects in the contemporary world. While the specifics and potential consequences of vulnerability would inevitably vary depending on the group studied and the particularities of given contexts, I expect that such subjects who care are also constituted by a fundamental vulnerability wherein their work requires a distinct capacity for wounding, risking, or losing their shepherding selves in their attempts to care for others. By wounding, risking, or losing their shepherding selves, I mean that workers become worn down and exhausted by doing the work of care. Social scientists studying such groups may find “pastoral vulnerability” to be useful in their considerations of the constitution of these workers’ subjectivity. Below, I focus only on the specific context of front-line workers at Greener Pastures shelter for homeless men. As I describe, front-line workers mostly faced the consequences of their vulnerability in a crisis-induced present of front-line homeless care. The historical detour above is merely a prelude to a further exploration of worker subjectivity as also shaped by the management of crises at the front-line of homeless care.

Crisis-Shaped Subjects

In our current era of cruel optimism, when the conditions of reproducing life involve the activity of being worn down by it (Berlant 2011), the labor of attempting to provide institutional care for others can be costly. At the front-line of homeless care in the US, workers found themselves *already* caught up in an ordinary defined by crisis. As I discussed in the last chapter,

front-line work at Greener Pastures primarily unfolded within a structural situation characterized by “crisis ordinariness.” A troubling but routine part of the job of front-line work involved enduring crisis-induced impasses of care that emerged from a broader context of institutional crises and shortcomings of which workers were aware and criticized openly but could do nothing to remedy. And most front-line workers with whom I engaged were affectively worn down by this structural circumstance and the everyday crises they tried frantically to manage. If front-line worker subjectivity is constituted, in part, by “pastoral vulnerability” as I suggested above, the consequences of this vulnerability became most apparent amid such crisis ordinariness.

Therefore, it is helpful here to move beyond the historical and institutional constitution of vulnerable subjectivity to the “crisis-shaped subjectivity” of front-line workers who labored in a crisis-induced present to provide a more complete account of the consequences of the capacity for wounding, risking, or losing oneself in one’s attempts to care for others. To that point, I find Berlant’s analysis in chapter three of “Cruel Optimism” to be particularly compelling here as it offers a way to rethink subjectivity beyond merely its historical/institutional constitution or sovereign expressions. This is not to say that crisis-shaped subjectivity is opposed to vulnerable subjectivity. As I show later in this chapter, the two are complementary insofar as vulnerability became most consequential at a threshold of crisis ordinariness.²⁸

Berlant theorizes a new model of agency in Berlant’s analysis of our era of cruel optimism (2011). Rather than construe subjectivity as only related to sovereign, autonomous

²⁸ To that point, Berlant does not advocate “a wholesale exorcism of sovereignty’s spirit by a dramatic act of taxonomic substitution,” but pushing beyond the sovereignty concept, Berlant argues that “we need better ways to talk about a more capacious range of activity oriented toward the reproduction of ordinary life” including “aleatory modes of self-abeyance that do not occupy time, decision, or consequentiality in anything like the sovereign registers of autonomous self-assertion” (2011:98).

decision-making as Agamben (1995), Mbembe (2003) and others have done, Berlant finds an alternate need to think about the possibility of human subjectivity and agency also in modes of “floating” or “coasting consciousness” that include unintentionality, detachment, or distraction (2011:96-97). As Berlant claims, amid our shared historical present when crisis has become ordinary, people often attempt simply to “survive the stress on their sensorium that comes from the difficulty of reproducing contemporary life” (2011:18). Models of subjectivity and agency that focus only on sovereign monads and their manifestations of intentionality risk overlooking the many routine forms of human activity that enable people to survive, to just get by, to coast, to make ends meet, and to persist given the often-overwhelming cruelty of our crisis-induced present (for more detail, see 2011:96-99). Thus, Berlant aims to “construct a mode of analysis of the historical present that moves us away from the dialectic of structure (what is systemic in the reproduction of the world), agency (what people do in everyday life), and the traumatic event of their disruption, and toward explaining *crisis-shaped subjectivity* amid the ongoingness of adjudication, adaptation, and improvisation” (2011:54 [italics added]). To reach this aim, Berlant posits that one of the better ways to talk about agency is Berlant’s innovative model of “lateral agency.” Lateral agency can be summarized simply as the diverse, lived responses to the structural conditions of crisis ordinariness that tend to wear out subjects in the contemporary world, but which do not make such structural conditions better, only more tolerable. Berlant’s major claim is that as people are continually worn down by the activity of trying to work and live ordinary life in the contemporary world, they often engage in activities of self-abeyance or momentary relief for which models of sovereignty that rely solely on manifestations of intentionality and the purposeful will of actors seem to be inadequate to address (2011:96-97).

As the central topic of Berlant's analysis, Berlant focuses on the "scene of slow death" in the phenomenon of the "obesity epidemic" that has proliferated largely among wage-laborers and the working class in the United States and Europe. As this population is worn down in their efforts of work and their labors of life, many so often engage in eating not as a form of a lifelong accumulation of self-fashioning, but as a form of a brief and pleasurable reprieve from the pressures of reproducing life (2011:110-116).²⁹ Thus, for many, eating does not ultimately make for a better life but simply allows for a transitory departure from constantly muddling through the incoherencies and inconsistencies generated by the crisis ordinariness of the present. In this way, and beyond models of sovereign subjectivity, eating has become a form of lateral agency of which Berlant writes: "in the scene of slow death, a condition of being worn out by the activity of reproducing life, agency can be an activity of maintenance, not making; fantasy, without grandiosity; sentience without full intentionality; inconsistency, without shattering" (2011:100). In other words, practices of eating do not necessarily make for a better, grander, more intentional, or more consistent life as, for example, many working-class Americans may not consciously imagine "the long haul" of health or focus intentionally on a lifelong sustainable diet as they eat (2011:117). But instead, amid our precarious present and uncertain future, eating may afford a temporary relief and reprieve from lives otherwise always in crisis.

²⁹ Berlant writes: "Working life exhausts practical sovereignty, the exercise of the will as one faces the scene of the contingencies of survival. At the same time that one builds a life the pressures of its reproduction can be exhausting. Eating can be seen as a form of ballast against wearing out, but also as a counter-dissipation, in that like other small pleasures, it can produce an experience of self-abeyance, of floating sideways. In this view it is not synonymous with resistant agency in the tactical or effectual sense, as it is not always or usually dedicated singly to self-negation or self-extension. Eating amid the work of the reproduction of contemporary life is best seen as activity releasing the subject into self-suspension" (2011:116).

Berlant's assessment offers a few key analytic links worth examining vis-à-vis the context of crisis ordinariness at the front-line of homeless care. First, like the working-class Americans Berlant focuses on, and for that matter, so many populations in our era of cruel optimism, the front-line workers of this study faced a continual wearing down in their attempts to continue caring. As I explained in the last chapter, as front-line workers attempted to provide institutional care amid the crisis ordinariness in which their present was entrenched, they were mentally, emotionally, and affectively worn out. Moreover, by being constituted as disproportionately vulnerable in the midst of this crisis ordinariness, front-line workers often faced dire consequences as they would experience being professionally and personally overwhelmed and faced burnout, futility, and exhaustion in their attempts to care for homeless men.

Second, Berlant suggests that we should move beyond the consideration of subjectivity and agency in terms of sovereign decision-making and intentionality. Relying only on an analysis of the structural situation of crisis ordinariness and the subjective constitution of "pastoral vulnerability" permits us to identify workers' fraught and precarious position at the front-line of contemporary institutions of care; yet it does not permit us to account adequately for the many activities that workers engage in as a response to this situation. At a register of subjectivity that only considers sovereign decision-making, I could provide an analysis of what workers intentionally did to make their structural situations better for themselves or their clients or how they were powerless to do anything given structural constraints. But such a view of subjectivity and agency would not allow for a complete picture of workers' own accounts which instead suggest that they engage in a wide range of activities directed toward simply surviving "the stress on their sensorium" that comes with the challenges of providing front-line care

(2011:18). Therefore, moving beyond historically constituted subjectivity to “crisis-shaped subjectivity” affords a more comprehensive analysis of workers’ own responses to their situation. It opens an analytic door that enables us to understand better not how workers utilized their agency to counter or push back against their structural situation, but rather how their agency allowed a “lateral” movement within their structural situation.

Third, like eating in Berlant’s analysis, there were many forms of lateral agency that workers engaged in that provided a brief relief from the difficulties and vulnerabilities of work life and a transitory departure from the crisis ordinariness of front-line care. Based on my observations and interviews with workers, these forms always congealed into one central theme defining the crisis-shaped subjectivity of front-line workers: the continual, improvisational, and often problematic negotiation of boundaries between workers and clients. An activity of maintenance rather than self-making, and of inconsistency without shattering, boundary negotiation offered workers a reprieve from being worn down by their work. Yet importantly, boundary negotiation was not directed toward making front-line work or front-line workers themselves better; rather, it was directed toward “making a less bad experience” of their structural situation of crisis ordinariness and the consequences of pastoral vulnerability (Berlant 2011:117). Of this, Berlant insightfully writes: “activity toward reproducing life is neither identical to making it or oneself *better* nor a mimetic response to the structural conditions of a collective failure to thrive, nor just a mini-vacation from being responsible—such activity is also directed toward making a less-bad experience. It’s a relief, a reprieve, not a repair [...] Under a regime of crisis ordinariness, life feels truncated, more like desperate doggy paddling than like a magnificent swim out to the horizon” (2011:117). As a form of lateral agency, boundary negotiation offered a relief and a reprieve from the “desperate doggy paddling” of work life that

front-line workers experienced under the regime of crisis ordinariness of homeless care. This will become clearer in the section that follows.

Taking these points together, Berlant's model offers a way to rethink subjectivity as also shaped by contexts of crisis wherein forms of "lateral agency" provide respite without ultimately making things better. Being constituted in part by pastoral vulnerability, worker subjectivity was also shaped by lived responses to the context of crisis ordinariness at the front-line of care. What I found at Greener Pastures shelter for homeless men was that given their structural situation of crisis ordinariness and pastoral vulnerability, most often front-line workers did not respond by burning out completely. Nor did they usually thrive and make for themselves a better work life as a response to their precarious situation. Rather, I found that front-line workers subjectivity was also crisis-shaped in the present as they struggled to just get by and persist in their work "amid the ongoingness of adjudication, adaptation, and improvisations" (Berlant 2011:54). Most of the time, this involved attempts to negotiate fraught and unclear professional and personal boundaries between themselves and their work with clients. As I describe below, such activity of lateral agency afforded workers a relief and reprieve from the consequences of pastoral vulnerability amid crisis ordinariness, (i.e., the disappointments, burnout, and burdens of their work) but did not ultimately lessen the extent of crisis ordinariness they continued to experience.

Boundary Negotiation

So far, I have accounted for front-line worker subjectivity in both its historical constitution and its continual shaping in the present. Now, drawing on interviews with front-line staff who worked at Greener Pastures shelter for homeless men, I explore both dimensions of front-line worker subjectivity to argue that boundary negotiation characterizes the major form of

lateral agency among front-line workers. In the first case, I draw on interviews with a front-line worker I call “Jodie.” Jodie found her work of clinical therapy with homeless men at the shelter to be particularly challenging amid her context of crisis ordinariness. She also found herself in a vulnerable position as she supported clients through their desperate attempts to survive day-to-day life. Yet, instead of “losing” herself and burning out completely, or making her work situation any better, Jodie responded to all of this by employing a term she called “compassionate disconnect.” This form of lateral agency allowed Jodie to detach from her work through boundary negotiation, but as she explained, such boundary negotiation was not merely a straightforward or easy task. In the second case, I draw on interviews with another front-line worker I call “Patrick.” Patrick worked with a housing program of Greener Pastures where he attempted to find housing for shelter clients who had diagnoses of severe and persistent mental illness and/or AODA (Alcohol and Other Drug Abuse) and make sure they were able to stay in their units. A major component of Patrick’s work was navigating difficult crises with clients. While he had no plans on changing careers as Idah did (see chapter 4), he did face the consequences of his vulnerability as he considered himself a kind of “burnout” who had become increasingly cynical during his years of experience at the front-line. Patrick persisted in his work by attempting to “shed” his professional self at the end of a workday in an attempt to detach his work struggles from his personal life. Like “compassionate disconnect” for Jodie, Patrick engaged this boundary negotiation as a form of lateral agency that afforded him a reprieve from the crisis ordinariness of his work and the concomitant consequences of his vulnerability. Also, like Jodie, Patrick explained that this boundary negotiation was indeed, a problematic activity. Both cases show the subjectivity of front-line workers in the homeless sector to be both vulnerable and crisis-shaped, but they also show that, as I discuss in the conclusion, working at

the front-line of contemporary institutions can be an enormously difficult task, particularly when the “heaviness” of the affective weight of care falls on the shoulders of so few. These ethnographic accounts offer a look into the subjective worlds of front-line workers in the US homeless sector. They reveal how workers engage in forms of lateral agency in the midst of the conditions of cruel optimism of their work.

Compassionate Disconnect

Years ago, a local Catholic university had a partnership with Greener Pastures, and undergraduate students were encouraged to participate in service projects that shelter management decided were both needed and appropriate. Over a decade before I met Jodie, she volunteered at the shelter as one among many of those students, and from the first time she walked in the door, she just felt like this was where she was “supposed” to be. “I just knew,” she told me, and she had been there “ever since.” She briefly worked as an intern at Greener Pastures as an undergraduate and went on to graduate school to study counseling psychology. After completing her degree, Jodie became a full-time employee and took on several different roles in the clinic over the years. Currently, she oversaw numerous managerial and bureaucratic tasks, but also felt that it was important to continue the front-line work of providing clinical therapy to her own case load of clients which had been a significant part of her job for nearly 8 years before I started my research.

Like Kate and the other clinical therapists at the shelter, Jodie worked in a context characterized by both structural and everyday forms of crisis ordinariness. At a structural level, Jodie recognized several issues that added strain to her already pressing work. She was concerned that mental illness and addiction were being sidelined by HUD’s (The US Department of Housing and Urban Development) prioritization of housing first. Even though the aim of the

“housing first” model was for clients to be housed as quickly as possible, Jodie found from experience that mental illness and addiction often presented major barriers to clients staying housed in the long run. She also felt stressed by recent changes under the “housing first” policies which restricted the length of time men could stay in the shelter. As she explained, some men at the shelter needed to find housing at their own pace, and policies which demanded seemingly arbitrary cutoff times would set these clients up for failure and add a dimension of increased urgency to her work with them. Further, she saw it as “frightening” that cuts in federal funding to housing programs were being pursued (and were eventually passed) at the time by the Trump administration which she felt would drastically affect her clients’ care provision and welfare. If programs at Greener Pastures received less than the meager funding they already received, they could end up being cut altogether and clients would likewise have less services available to them. She also noted that the lack of employment opportunities in the neighborhoods surrounding Greener Pastures was one of the major reasons men continued to return to life on the street. No work usually meant no money for her clients, and no money often meant no stable housing. While she remarked about these dimensions that shaped the structural situation of precariousness in her work and her client’s lives and she expressed some fear about what the future could bring, she also felt that she could do little to resolve any of these higher-level issues. The most she could do, and what she continued to do, was try her best every day in her role as clinical therapist to support individual clients toward reaching their goals of housing, employment, mental health, and/or sobriety.

At this practical level of clinical therapy, helping homeless men was no easy task as nearly all of Jodie’s clients were struggling simply to survive day-to-day challenges, and her front-line work required supporting clients through such crises. Her clients encountered daily

crises not just of housing, but of food as there was frequently a waxing uncertainty regarding where clients' next meals would come from. Clients faced crises of physical health as street living regularly took a toll on clients' bodies, particularly on older men at the shelter, in a plethora of ways that were obvious to all the clinical staff and many other front-line workers as well (see also chapter 4). Clients endured crises of safety as they regularly experienced threats, harassment, and violence from others on the street and occasionally from the police. They endured crises of mental health as homelessness often created or exacerbated symptoms of diagnosed or undiagnosed mental illnesses which usually negatively impacted housing security for men. And often, due to a variety of reasons, clients' addiction and substance abuse could cause dramatic setbacks on their paths to permanent, stable housing which Jodie approached with clients in terms of "relapse autopsies" to try to weed out and address the root causes of these setbacks and support clients in their attempts to overcome them. Typically, these were the kinds of day-to-day crises that were discussed with Jodie during therapy sessions with clients.

Given such daily struggles of homeless men at the shelter, Jodie attempted to help her clients beyond just strict therapeutic encounters. Sometimes her work also involved the management of the routine crises that clients experienced. She explained:

The clients that we work with are trying to meet their basic needs. "Where am I going to sleep tonight? What am I gonna eat? I haven't done laundry in a week, three weeks." Um. You know? "What can you do for me? I don't really wanna talk about my emotions right now." You know? It can be really difficult.[...] So many of our clients on a daily basis are struggling to meet those basic daily needs. And sometimes there's deeper issues that maybe contribute to the struggles, those daily struggles that I think therapy can address. But sometimes therapy is just case management, you know? [...] We're kind of like glorified case managers a lot of the time. And

that's okay. And that's what the client needs. And I think that's also part of what contributes to the relationship building. "Are you hungry? Let's stop, we don't need to talk about this right now. Let me go grab a sandwich and let me see what else I can find for ya, and then we'll figure out what we need to talk about." [...] There's just so much instability that impacts people's ability to focus on some of the more abstract ideas [of therapy]. [...] So many of the clients here are worried about getting attacked, are worried about you know, bad decisions they made when they were in a rough spot and how that may affect them in the future. They're worried about "where am I gonna sleep?" You know? "I got this temp job, what am I gonna do when it ends?" It's so much more moment by moment, I think. I think that can be really difficult in working with clients. Because how do you plan for the long-term when all you can do is focus on the next step in front of you? It's really tough.

As Jodie explained, attempting to help clients navigate their daily survival as a clinical therapist involved more than just a few brief therapy sessions. Rather, even in the clinical offices at the shelter, the front-line work of caring for homeless men regularly required the work of assisting in the management of clients' day-to-day crises of just scraping by and surviving. After so many years of experience, Jodie had seen that clients frequently just needed to focus on the next step in front of them whether that was a bed to rest in, a load of laundry to do, a safe place to be, steady employment, or even a meal. The "instability" of living life "moment by moment" without stable housing made therapeutic encounters often just a matter of helping clients manage the contingencies of everyday life amid an overwhelmingly crisis-induced present. But as she was sure to note several times: This "can be really difficult" and often was "really tough."

Amid the conditions of crisis ordinariness which shaped both the structural and practical contours of her work; Jodie experienced the vulnerability involved in her front-line work of

homeless care. She identified the potential for “losing” her “self” in her attempts to provide care for clients who struggled through surviving day-to-day life. Through much experience at the front-line of work at Greener Pastures, she witnessed first-hand many employees who “lost” themselves, burned out, and quit working at the shelter over the years—casualties of the consequences of vulnerability under the regime of crisis ordinariness of front-line homeless care. Recognizing herself as also vulnerable in her position as clinical therapist, she explained that she simply “can’t absorb” all the issues that her clients dealt with. Even if she tried to, she was sure that she would be “burned out from the job” and from all the stories that clients share, their hardships and struggles with stigma, guilt, and shame; their unlucky fortunes and perceived and real failings; their past and current traumas, chronic and persistent mental illnesses, and drug and alcohol relapses; their evictions, incarcerations, and occasionally their accidental or intentional deaths. Further, many of these specific issues amalgamated in the lives of individual clients and working with several clients who were living through such combinations of crisis in a single day often compounded the stress that most front-line workers routinely felt. Put simply, there were many clients experiencing many crises, and given the structural situation that made front-line work even more precarious and urgent, workers like Jodie often felt worn down in their attempts to care for homeless men.

Jodie identified this position of vulnerability as problematic. She wanted to care “authentically” for her clients and to be “authentically compassionate,” but also realized her own capacity to be profoundly affected by relationships with clients who regularly faced so many hardships and did not want to “lose” her self in her care. Jodie put it this way:

How do I care, how do I authentically care about someone, but also still go home at night to my warm bed, my house, and know that maybe someone might be walking down to sleep outside, you

know? How can I do that? How can I care authentically but also still be able to live my life? [...] It's hard not to be affected by some of the things we see and hear. [But] how do I still live my life or not feel guilt every time, you know, I experience something positive? You know, thinking about my clients, like I can still, I need to still live my life and um, yeah. Again, outside of saying like, it's this funny balance, and how do you be authentically compassionate without losing yourself in it?

My silence after Jodie's brief discussion proved the rhetorical power of her last question. "How do you be authentically compassionate without losing yourself in it?" Her language was deeply insightful regarding the pastoral vulnerability that continues to constitute front-line subjects who care. If workers did not inherit already precarious positions at the front-line of caring institutions, it would seem that "losing" their selves in their attempts to care would not be an issue for concern. Rather, for Jodie and so many of the other front-line workers at the shelter, it seemed that pastoral vulnerability—in this case the capacity to be "lost" in the care of others—was a potential reality. It is also important here to recognize that by "losing yourself," Jodie did not mean strictly professional burnout, even though she did note that, all too frequently, front-line workers experienced burning out from the stress of the job while on the job. There was also a personal dimension of being affected outside of work life, of "taking work home" and being affected by it beyond just the eight-hour workday.³⁰ As I previously mentioned, professional and personal boundaries were fraught and unclear for most workers I engaged with as a part of this study and negotiating such boundaries was almost always a problematic endeavor.

³⁰ Kate, another clinical therapist summarized this point succinctly: "It's hard to turn off this like, empathy, you know? [...] How do you turn off something that you've done your whole life? And how do you stop caring about someone just because your eight-hour shift is over? And just, we have to learn that if you don't, you're gonna, you'll lose it. You can't do this job if you can't shut it off."

Given the crisis ordinariness of Jodie's front-line work of care and the pastoral vulnerability that could yield costly consequences amid such crisis ordinariness, Jodie attempted to navigate the "funny balance" of caring about her homeless clients while not losing herself in the process through a mechanism of boundary negotiation that she called "compassionate disconnect." Jodie came up with this useful neologism years before to attempt to create a more-or-less improvisational solution to the problem of being vulnerable at the front-line of work. In her words, compassionate disconnect was "how to be compassionate and care, but also know where I end and you start." As she explained, a major cause of burnout among front-line professionals in the social work and clinical fields was not being able to locate where the worker ends and the client starts. Without such a clear location, front-line workers seemed to have little recourse to cope with the consequences of their own vulnerability and stresses of work. I pressed Jodie on what she meant by this original coinage, and she elaborated:

So compassionate disconnect is, I wanna have empathy for my clients. I wanna care about my clients. I want the best for them. I want them to achieve their goals. But I'm also not going to lose myself in the process. I'm not gonna take on their struggles as my own necessarily. [...]

That disconnect because there's still this space between you and I, and there is a line for where you are responsible for what you're responsible for. And I will care, and I will also grieve when things don't go well or go as planned. Um, but I also have to remember that – I think it's important to remember that I can't carry everything that I hear, or I will not be able to be a healthy person in my own life. And I'm not gonna be able to be healthy for the other clients that I serve. So there has to be a little gap that I don't lose myself in this process. One of the rules I created for myself a long time ago was that I will think about work, I will think about clients, conversations, things like that until I get home. And as soon as I get home, I need to turn that off.

And that's my disconnect because I'm not gonna allow this job [...] to cross over into my own personal life too. So yes there are difficult situations and tough cases that it is difficult not to think about on the weekend or you know, late at night. But if I allowed myself to do that with everything, the heaviness of what we hear and what we do and what we see, I think, is part of what can lead to burnout really easily and just unhealthiness in the provider's own life.

Jodie described that she wanted to be compassionate while she worked with clients but had to negotiate boundaries by disconnecting from her front-line work. On one hand, she wanted to have empathy, to care, and wanted the best and for her clients to achieve their goals. But on the other, she did not want to “lose” herself in the process. To protect herself from the potentially costly consequences of her pastoral vulnerability, she needed to find that space between herself and her clients, the “little gap” of where she ended, and clients began. After all, as she viewed it, Jodie could not “carry everything” as “the heaviness” of what she heard and did and saw during intimate therapeutic encounters with homeless men could potentially cost her own health and lead to burnout “really easily.” Furthermore, if she did “lose” herself, it meant that she would not be able to be healthy for the other clients she had “to serve.” While it did not resolve the structural and everyday situation of crisis ordinariness nor did it make Jodie’s life particularly better in any identifiable way, such boundary negotiation afforded Jodie a way to detach from the struggles of her work life. Compassionate disconnect, then, was a form of lateral agency that offered a relief from being worn down by the enduring hardship of the work of front-line care for homeless men.

Focusing on both vulnerable and crisis-shaped subjectivity allows for a more complete picture of Jodie’s own accounts of attempting to survive the challenges of front-line work and persist amid the crisis ordinariness of homeless care. In one way, Jodie’s subjectivity was

constituted as fundamentally vulnerable. With years of experience, she recognized the capacity to lose herself in her attempts to care for homeless men at the front-line if boundaries were not properly managed. However, this capacity became particularly significant amid the context of crisis ordinariness that shaped the structural and everyday contours of work. In other words, given that front-line subjects who care in the homeless sector are often worn down in their attempts to care, workers could, and sometimes did, face professional burnout and personal disappointment. But Jodie did not ultimately succumb to her structural situation and responded through her attempts to negotiate boundaries. Her approach of “compassionate disconnect” afforded a means of detachment from the stresses of attempting to care that exhaust so many front-line workers. In that way, boundary negotiation was a form of lateral agency that did not make Jodie’s structural situation or her everyday work better. Rather, it simply offered a relief from a work life that was otherwise in crisis and from the “heaviness” of the front-line work of care for homeless men at Greener Pastures.

Shedding It

Of all the workers at Greener Pastures, Patrick was the most eager to meet with me. In the early 2000’s, he received his bachelor’s degree in anthropology from a local university and expressed in our interviews how he thought this degree prepared him well for the work he did at Greener Pastures for the past several years.³¹ He saw an intimate link between our shared field of

³¹ Because of our shared interests in both anthropology and front-line work in the homeless sector, he viewed me as a kind of kindred spirit. At times, this complicated our interactions as I tried to maintain my own boundaries of attempting “objective” research and as he prodded me on two separate occasions for over an hour about what my research was “really” about. During these “off-record” (i.e. after I had turned off and put away my audio recorder) times, I found myself attempting to clarify that I had no hidden intentions, but despite my best efforts, it seemed

study and his work and was proud that this enabled him to “see things” that case workers and other staff could not see: “That all comes from anthropology. It’s like how people use their space, you know? You can kinda see the imprints that are left behind.”

To that point, Patrick’s job was to assist previous shelter clients in getting housed on their own and to monitor them and their living spaces to ensure that they were able to stay housed. He worked for a program of Greener Pastures that I call “Off-street Living” in which shelter men who were diagnosed with severe and persistent mental illness and/or AODA (Alcohol and Other Drug Abuse) were eventually placed into some form of subsidized housing. Part of Patrick’s job was to find suitable apartments and help clients stay in these “rental units.” To identify apartments, he had to assess things like cost of unit per client subsidy, extent of client ability or disability, and neighborhood safety when searching for housing which required of him that he “thinks like an anthropologist.” For example, he always considered spatial dimensions of housing as he never wanted to put clients in neighborhoods where they had a history of drug connections so they would not be easily tempted into relapse which, Patrick knew from experience, could affect a stable housing situation. This was meant to help clients get a “fresh start,” though other social ties could be cut loose as well from these moves. Much of the work Patrick did he viewed as a kind of “balancing act” whereby he navigated making and communicating the best choice among often conflicting options, a skill he developed over many years and seemed pleased to attribute to a learned “codeswitching” between landlords, social workers, police officers, and shelter clients.

Patrick remained skeptical. I found our conversations deeply illuminating, but do not share out of respect for Patrick’s wishes that they would not be recorded.

He explained different dimensions of this balancing act. For example, as far as finding suitable apartments for shelter clients, he sought landlords that were reliable since “absent” landlords rarely followed through on client requests. On the other hand, he avoided landlords who seemed too eager to work with his clients because those landlords were often “in some kind of financial trouble” and so were only really interested in the reliability of payments from the government that clients just out of the shelter could afford them. All this required of Patrick a balancing to find landlords who were responsive but not overly enthusiastic. As far as getting clients into housing units, Patrick felt he had to be upfront with landlords about clients’ histories of mental illnesses or substance abuse as these issues could unfold in ways that would affect properties, as I describe later. But on the other hand, he had to be cautious about HIPAA (Health Insurance Portability and Accountability Act) policies. As he stated, mixing utter seriousness with grim humor as he frequently did: “I have to not disclose too much. But I have to kinda say it in a way that’s not gonna make them [the landlords] freak the fuck out, you know? “What do you mean he’s schizophrenic?! There’s ninjas?!?! What the hell are you talking about?” [Patrick chuckles loudly.]” So, he learned the right language to navigate the balance between client privacy and landlord wants to get clients into suitable units. As far as keeping clients housed, Patrick worked with social workers to identify problems and relapses and regularly inspected rental unit spaces to decide if clients seemed healthy and well or if some kind of intervention was necessary. Inspections could be anywhere from an hour and a half to a full day if things were “problematic.” While he wanted clients to succeed in staying housed, he recognized the position of landlords as well, and occasionally had to work with police to evict problematic clients: “I’m gonna try and keep everybody in line. I don’t do any law enforcement, but I work with them.”

A major component of Patrick's "balancing act" was navigating emergencies and managing the crisis ordinariness of routine work. During what he considered "crisis events," Patrick played an important role in a larger network of case workers, police, crisis teams, hospitals, and morgues in which he acted as a kind of gatekeeper, literally holding the keys to clients' units if intervention was considered necessary or if it was too late to intervene and a client had died. In terms of the practical crisis ordinary in which Patrick's work unfolded, sometimes there were issues of alcohol and drug relapse. Over the years, numerous clients had relapsed and slowly transformed their subsidized units into "drug houses" which often attracted attention from police as they got labelled "nuisance properties." In one recent example, a client was even offering women for prostitution from his drug house. According to Patrick, as soon as landlords discovered issues such as these on their properties, they immediately wanted to involve the police and evict. After an eviction was filed and the sheriff's office contacted Patrick, he had twenty minutes to drop whatever else he was doing and get to the property or the police may "knock the door down." In situations like these, evictions rarely unfolded as orderly events (see also Desmond 2016). Violence and/or arrests could result, and occasionally Patrick was called upon to testify in court later.

Over time and from experience, he had learned to read situations of relapse to try to assist toward recovery before any issue became too tricky. As he put it:

Everyone has the potential for a relapse so that's always something that's in the back of your mind. So you kinda look for those signs. How are they looking, you know? If they start using again, things get messy here [...] There's, just recently, [Timothy] was relapsing pretty good. He's back here now. He's inside the shelter [at Greener Pastures]. In his place, he had cardboard signs. "I'm homeless." He's got a home. He's not on the street anymore. That's to get

money for drugs. He has needles, a broken crack pipe, he's got a spoon there, various medications around, ashtrays full of tobacco cuz he wants to empty that. You see the Mylar wrappers from Swisher Sweets, sandwich bags in the living room, those kinda things. So you know there's a lot of drug activity going on there. [...] We've been working on that with another guy that we, uh, was having trouble with where he did have a drug house where literally while we were there, there were people coming up to the window and knocking. And one of his guests saying "not right now!" [Patrick said "not right now!" in an urgent whispering voice leaning to the side as if speaking through an imaginary window.] You know? And we were convincing him, it's like, why don't you come back here [to the shelter]? Walk away from all of this.

Patrick studied clients' living spaces as an anthropologist, looking for "the imprints that are left behind." He always had clients' potential for relapse in the back of his mind and often found remnants of drug and alcohol usage which were not good signs from his perspective. Such signs could be empty beer and liquor bottles, used needles and spoons, crack pipes, remnants of blunt-making³², small baggies and tins for drug storage, and a variety of others. In Patrick's view, even when he found evidence of illegal activity, none of it disqualified men from continuing to inhabit their rental units through the "Off-street Living" program. But relapses could, and often did, spiral out of control, and began to affect housing stability which meant that Patrick would work with social workers to try to find the best way to help toward recovery. After all, every front-line worker viewed sobriety as a shaky but utterly necessary requisite to staying housed successfully. Sometimes what working toward recovery meant was encouraging clients to move back into the shelter to hopefully regain sobriety. Patrick explained that this occurred on

³² "Blunts" are made by removing the tobacco out of a cigar, replacing it with marijuana, and using the remaining outer tobacco-leaf as a wrapper. In this context, the cigars are usually cheap and easily purchased at most gas stations (e.g. "Swisher Sweets").

numerous occasions. But he could not force men out of their units unless they were deliberately or unintentionally destroying the landlord's property. However, with case workers, he often tried to convince clients to abandon their housing units and get back in the shelter until sobriety could be achieved. Oftentimes, this was the most he could do in the aftermath of crises of relapse.

Other crises involved issues of mental illness. If he got calls from case workers that crisis intervention was needed, Patrick would work with police officers or crisis mobile teams to try to help clients in dire times. For instance, a recent client text messaged their case manager that they were threatening to take their own life and then did not respond when the worker called them back. The case manager immediately reached out to Patrick who accompanied the police and the worker into the apartment and together, they were able to help intervene and skillfully defused the situation. At the time of our interview, Patrick was trying to locate another client who was diagnosed as a “paranoid schizophrenic” who had abandoned their rental unit altogether. He took some pictures inside the apartment to return later to see if anything had been moved which would have been a minimal sign of residence—as Patrick explained, this was more evidence of his skill of reading space which he acquired as an anthropology student. As the case of Idah described in the previous chapter, clients that cannot be found are a cause for deep concern among front-line workers.

In his work, Patrick navigated a crisis ordinary in which dealing with evictions, relapses, and mental health crises was a part of his routine front-line work. What made navigating this crisis ordinariness so difficult for Patrick was his own vulnerable position at the front-line of homeless care. Several times in our interviews, he reflected on how his work could affect him. He said:

It gets hard to watch [...] You know, we're not talking about life organisms in a petri dish here. You know? These are people that you can interact with, and who have stories, and lives, and histories all of their own. And once you get to know that this is not just a case that you're talking about. This is a person. And so it kind of hits close to home with your heart that you're watching somebody's life going through their ups and downs and you're there for all the moments of it, you know? [...] There's compassion fatigue, there's burnout. I'm probably more of a burnout. It's like, I already know what's going to happen. It's like after a while, you just start preparing for the worst, and then it makes it easier [laughter].

Patrick recognized the fundamentally vulnerable position he occupied at the front-line of work. In one sense, this was linked to his profession as he cited both compassion fatigue and burnout as consequences of vulnerability at the front-line. He identified his own experience as “more of a burnout” because after years of experience, he felt worn out, and tried simply to prepare for the worst. Adopting this kind of cynical approach was how Patrick made “easier” what was “hard to watch” amid his work experiences of crisis ordinariness. In another sense, this was a personal vulnerability as well. That collectively his clients “are people” and individually each client is “a person” and not just a “case” was what Patrick found troubling. And this could take a personal and emotional toll as well as Patrick not only watched but was “there for all the moments” of the ups and downs and the unfolding of crises which personally could hit “close to home” with Patrick’s “heart.” In both professional and personal senses, Patrick was vulnerable in his attempts to care at the front-line. Like Jodie’s account above, and for so many other workers, pastoral vulnerability bore consequences specifically at the front-line of work where attempts to care could be costly amid the crisis ordinariness of routine work.

The professional and personal consequences of Patrick's vulnerability were most clearly elaborated as he discussed the most challenging part of his job—that is, dealing with clients who had died from accidental overdose, suicide, homicide, or other unfortunate events. Though it was not an everyday occurrence, dealing with death was a tough part of Patrick's work. As he stated with the grim kind of humor that was not uncommon during our interviews: "Fortunately I don't see too many dead bodies. [Patrick chuckles awkwardly.] But it does happen every once in a while." If someone died, Patrick had to work with police and morgues to identify the deceased and make statements, with family members of the deceased (if any could be located and contacted) or attorneys to settle estates, and with other shelter staff to move belongings out of the units. In one such instance, a client relapsed after celebrating getting a new place to live and accidentally overdosed on heroin and died. Patrick arrived not long after the client's ten-year-old child discovered their lifeless body. While this was traumatic, it was also a part of Patrick's job I could tell wore on him in a lasting way. Very seriously and with his head down and eyes focused on the floor, he told me: "So, that I'd like to forget cuz that just sucks to think about, on every level."

Given the context of crisis ordinariness and the vulnerable subjectivity of front-line workers, trying "to forget" experiences like these was a part of Patrick's boundary negotiation. Because he often found himself so overwhelmed by his exhausting work life and his precarious position at the front-line of care, he tried to find ways to detach and allow himself to be "distracted," not to think about his work, and "forget," even if only for a while. After sharing several stories of client deaths, Patrick got to a critical point about the difficulties of being affected by the stresses of work and the treacherous terrain of boundary negotiation:

There's a reality to it all too. For everybody who succeeds, there's people who die. And you're not going to save everybody. You can sure as hell try. But I can't. [...] The challenging part is not bringing it home. And it's the same thing with police officers and all that kinda stuff too. Finding ways to leave it here. [pause] What I do is I actually physically change my clothes when I'm home. So I'm literally shedding it. And putting on, like, my home clothes, right? Or something. It's really silly. But, being distracted, just not thinking about it. Like I'm going on vacation next week, and I always take full weeks so I'm not thinking about anything. Cause that's a way to forget and actually relax a little bit. But, um, that is usually the big cause of burnout I see with case managers. I mean, what's it? The average is 2 years in case management? [Todd: Hmm.] So, it's hard. And some people, they don't realize how much pain people are in or once stories start coming out and you realize what happened to this client that you're working with. And how the hell do you go on every day? And how do you not think about that in everything else you're doing in life?

Like so many front-line workers in the homeless sector in the US, Patrick found the challenging part of his work was “not bringing it home” and “finding ways to leave it” at work. Workers who could not find ways to leave work at work and who continued to bring it home with them burned out quickly, as several workers were quick to note. But as he explained, he physically changed his clothes at the end of a workday to “shed it.” The “it” that Patrick continually referred to was not just his front-line work in a strictly professional sense, but also the many congealing experiences of trying to manage routine crises with clients to try to keep them housed that affected Patrick personally. As he powerfully put it: “how the hell do you go on every day? And how do you not think about that in everything else you're doing in life?” From relapses and evictions to mental health emergencies and occasionally, death, Patrick's front-line work could

and at times, did, affect his personal life. Thus, he saw himself as a “burnout” because of the vulnerability involved in his attempts to care. He could be worn down both professionally and personally by the limits and disappointments in which he could only do so much to care.³³

But Patrick confronted the consequences of being constituted as vulnerable amid the crisis ordinariness of his work by negotiating boundaries. By “shedding it,” Patrick engaged in a form of lateral agency in which he sought a reprieve from the difficulties of trying to care at the front-line of work. Like “compassionate disconnect” for Jodie, “shedding it” did not make seem to make Patrick’s life “better” in any way, at least in any way he identified to me. Nor was it an intentional exercise of sovereign agency that changed the structural circumstances of crisis ordinariness. Rather, “shedding it” was Patrick’s necessary recourse to detach from the conditions of work which wore him out and so often seemed devastating—what Patrick called “the reality to it all” in which “for everybody who succeeds, there’s people who die.” Even as he described this form of boundary negotiation as “really silly,” I found that this was perhaps the most serious thing about crisis-shaped subjectivity among front-line workers in the US homeless sector. Their everyday work involved attempting to manage crises with clients whose lives were shaped primarily by survival and persisting in this work demanded some form of boundary negotiation or else, the consequences of care could become too heavy for already vulnerable front-line workers. Workers’ agency did not clearly counter their structural situation and push back against it, rather it provided room to move “laterally” from within it.

³³ Worth noting is that Foucault detailed this circumstance as pastoral power’s “paradox of the shepherd” wherein a flock had to be tended to both individually and totally. It is paradoxical because saving a whole flock could cost the loss of a single individual yet saving an individual could cost the loss of the rest of the flock: “Omnes et singulatim.” (see 1979).

The Heaviness of Care

By focusing on the constitution of vulnerable subjectivity and the unfolding of crisis-shaped subjectivity in this chapter, I hope to have offered a clear analysis of the experiences of subjects who care in contemporary institutions in the homeless sector. Insofar as institutional, front-line work entailed a capacity for wounding, risking, or losing workers' shepherding selves in which they could experience burnout, vicarious traumatization, compassion fatigue, and their own growing cynicism in their attempts to care for homeless men, then pastoral vulnerability remains a contemporary inheritance of pastoral power and a persistent feature of the constitution of front-line subjectivity. Insofar as front-line workers engaged in activities of lateral agency as a response to being worn down by the consequences of such vulnerability amid the structural situation of crisis ordinariness in which routine work unfolded, then front-line subjectivity was also crisis-shaped in the present. Taking both dimensions of subjectivity seriously has allowed a more complete picture of the complex and difficult work of attempting to care at the front-line of homeless institutions in the US to be rendered.

To summarize, in contexts where crisis has become ordinary, people often feel worn down by living everyday life. For many populations in an era of cruel optimism, the necessity of just getting by in the present tends to take precedence over the possibilities for thriving and making a better future. In the context of pastoral institutions of homeless service provision in the US, workers disproportionately felt the weight of care at the front-line of work because they occupied a position where they were fundamentally vulnerable in their attempts to care for homeless men. Amid the crisis ordinariness of their work, they often experienced the consequences of being constituted as vulnerable subjects who care. However, as I found in my research with front-line workers, they usually did not burn out completely. Nor did they engage

in activities that changed their structural situation. Rather, most of the time, they managed to persist and survive the many pressing challenges of care by negotiating fraught and unclear boundaries. Such efforts are best understood as a form of lateral agency that shape worker subjectivity amid crisis ordinariness by affording a means to survive the stress on their sensorium that comes from the difficulties of providing care at the front-line.

Importantly, the cases of Jodie and Patrick are not unique. I interviewed many others who used similar strategies. While they provide specific insight into the vulnerable and crisis-shaped subjectivity of front-line workers at Greener Pastures shelter for homeless men, I found that nearly all the front-line workers I interviewed shared similar accounts of both the crisis ordinariness that shapes the structural and everyday contours of work life and the position of vulnerability they occupied at the front-line of care. To reiterate, it was at the threshold of such crisis ordinariness where the consequences of pastoral vulnerability bore most heavily on workers. Many experienced feelings of exhaustion, disappointment, futility, burnout, vicarious trauma, and compassion fatigue, even as they engaged in diverse forms of lateral agency which afforded them only a respite and a way to survive the work of care in a crisis-induced present. Whether screaming in the car on the drive home to get out the stress of the workday, going for a motorcycle ride to clear an exhausted mind, binging Netflix for hours on end to retreat from depression, meditating in silence to find some sense of calm, playing video games or doing puzzles after work to try to mentally shut down and reset, or finding numerous other ways to “escape,” to “get away,” to “leave work at work,” to “put on that armor,” or to “harden up a little bit,” all forms of lateral agency involved some activity of boundary negotiation in which workers struggled to find ways to continue caring in a world that so rarely values care (Tronto 1993:107). When attempts to help carry some of the burdens of a largely neglected and socially abandoned

population weighed too heavily on the shoulders of the few vulnerable subjects who cared, such boundary negotiation was a kind of last-ditch effort, ultimately “directed toward making a less-bad experience” of the cruelty of the present of front-line homeless care (Berlant 2011:117).

CONCLUSION.

This dissertation explored the ethical, affective, and subjective worlds of homeless service providers in a US city. In the first chapter, I framed the study in its context, described the central elements that emerged from my study, and explained the methods I used. As I showed, Greener Pastures emerged in the 1980s as a response by a group of churches to address the growing homeless population in Rustville. Over several decades, it proved itself in terms of its effectiveness, adopted the federal language of “care” and adapted to shifts in policy that allowed it to grow into the well-funded, high-performing organization I came to know during my research. My initial intention was to study the work of care—what it was, what it did, what it meant to workers, and what challenges it presented—but within the first few months of getting to know the landscape at Greener Pastures and conducting, transcribing, reading, and re-reading interviews, it became apparent that there were several themes that significantly shaped the worlds of workers. And these themes were the focal points of chapters three, four, and five.

While chapters three, four, and five engage my ethnographic material, the second chapter “Pastoral power: A work in progress,” stands out as a conceptual investigation. In it, I explored Foucault’s concept of power and offered a detailed reading of the thematic elements of pastoral power that Foucault described in several different accounts (1979, 1982, 2007). I provided a twenty-two-point chart to clarify and classify these elements according to its distinct eras and Foucault’s separate accounts. I suggested that the differences in these accounts imply that Foucault’s work on pastoral power was still a work in progress and may offer more conceptually than what has already been considered. As a form of power, pastoral power involves strategic relations which also bear responsibilities and consequences for the shepherds. And at another

level, I suggested, along with Foucault, that pastoral power itself is still a work in progress today as it persists in many institutions of care. I looked at the uses a few scholars have made of several of these themes and described the uses I make of several other themes in later chapters. While this chapter is not ethnographic, it offers context to the remaining chapters.

In the third chapter, “An ethics of optimism,” I explored how workers’ ethical worlds were shaped by optimism. All the workers I interviewed hoped their work of care would contribute to a better world in which homeless individuals could reach the goals of housing, mental health, sobriety, and income. And the diverse forms of work that they undertook all revolved around these aims. Pastoral power has a long history of aiming for salvation, and while the meaning of salvation has changed, this aim continues to persist in the world today as an ethical telos directing the work of care and constituting optimistic subjects who care for others. To that point, I looked at how the work at Greener Pastures revolves around this pastoral optimism and explored the ethical subjectivity of workers.

In the fourth chapter, “Cruel optimism at the impasses of care,” I explored how front-line workers’ affective worlds were shaped by cruel optimism. Despite hoping for the best, the front-line workers I interviewed often faced impasses in their work with homeless clients where they reached their limits to care effectively, and this wore down and exhausted workers. Workers had to endure crises with clients but also described the many systemic shortcomings that made their work even more difficult. Drawing on Lauren Berlant’s work, I claimed that both factors contribute to the conditions of crisis ordinariness that affected front-line workers at the shelter. The conditions of the front-line work of institutional care for homeless men were also the conditions of the attrition of the optimistic subjects who cared at the front-line.

In the fifth chapter, “Where I end and you start,” I explored how front-line workers’ subjective worlds were shaped by boundary negotiation. On one hand workers were constituted as vulnerable subjects at the front-line of care, but on the other they were shaped by the crises of the present. The capacity of vulnerability especially yielded consequences that were costly to workers given the situation of crisis ordinariness in which their work was embedded. Workers attempted to survive the stresses of their challenging work by negotiating boundaries. It was a last resort of lateral agency that afforded them a reprieve but did not change the conditions of vulnerability or crisis that were so prevalent.

I attempted to capture the worlds of the workers at Greener Pastures in the title “Care in Crisis” as this describes on the one hand, how shelter workers wanted to care and hoped that their work would contribute, in small ways, to a better world; yet on the other hand, how attempting to care at the front-line was so often a profoundly fraught endeavor. While previous research has shown the countless tragic circumstances homeless men in the United States have endured, much less is known about those who are trying to do something to help. By casting light on the ethical, affective, and subjective worlds of these workers, I hope to have provided readers with a fair, albeit limited, account of what it is like to care in crisis.

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Curriculum Vitae

Todd Jonathan Ebling, M.A.

Ph.D. Dissertator (Graduation: Expected Summer 2021)

RESEARCH INTERESTS:

Care and homelessness (focus in urban North America); ethics and morality; medical and psychological anthropology; political and legal anthropology; social theory

EDUCATION:

2013-2021 College of Letters and Science, University of Wisconsin-Milwaukee –
Ph.D. Dissertator (Anthropology), GPA: 4.0
2011 College of Graduate and Professional Studies, Eastern University – M.A.
(International Economic Development), GPA: 3.9
2010 Eastern University – B.A. (Anthropology / minor Philosophy)

ACADEMIC POSITIONS:

Lecturer:

2021 *Global Violence*; Department of Anthropology, University of Virginia

Research Assistant:

2019-2020 Pediatric Intensive Care, Children’s Hospital of Wisconsin; University of
Wisconsin-Milwaukee and Medical College of Wisconsin

Associate Lecturer:

2018-2020 *Introduction to Cultural Anthropology: Culture and Society*; Department
of Anthropology, University of Wisconsin-Milwaukee
2017-2019 *Global Violence, Disease, and Death*; Department of Comparative Ethnic
Studies, University of Wisconsin-Milwaukee
2016-2018 *Lifeways in Different Cultures: A Survey of World Societies* (taught both
in-person and online versions); Department of Anthropology, University of
Wisconsin-Milwaukee

Adjunct Instructor:

2018 *Contemporary Anthropological Issues: Global Violence*; School of
Humanities, Social Sciences, and Education, Mt. Mary University,
Milwaukee, WI.
2016 *Introduction to Cultural Anthropology* (Online course); Social Science
Department, North Iowa Area Community College

Service to the Field:

2019-2020 Digital Editorial Fellow; PoLAR (Political and Legal Anthropology
Review)
2019 Contributing Author; Somatosphere (Science, Medicine, and
Anthropology)

Department Service:

- 2015-2016 Faculty Representative (elected), Anthropology Student Union; University of Wisconsin-Milwaukee
- 2013-2020 Editorial Committee and Peer Reviewer; *Field Notes: A Journal of Collegiate Anthropology*

PEER-REVIEWED JOURNAL ARTICLES:

- 2018 Solitude and Solitude. Co-author Thomas M. Malaby. Manuscript in revision (09/24/2018). *HAU: Journal of Ethnographic Theory*.
- 2015 History, Violence, and Legitimacy in Uganda: An Anthropological Analysis of Post-Colonial Politics and ICC Intervention. *Field Notes: A Journal of Collegiate Anthropology*. 7:20-34.

PRESENTATIONS:

Panel Organizer/Chair

- 2019 *Benevolence and Responsibility: The Pastoral Paradox in Contemporary Institutions of Care*. Society for Psychological Anthropology Biennial Meeting, Santa Ana Pueblo, NM.

Paper Presenter

- 2019 *The Currency of Hope: Exchanging Aspirations at the Front-line of US Homeless care*. American Anthropological Association Annual Meeting, Vancouver, BC.
- 2019 *Compassionate Disconnect: The Paradox of Mental Health at a Homeless Shelter for Men*. Society for Psychological Anthropology Biennial Meeting, Santa Ana Pueblo, NM.
- 2019 *Compassionate Disconnect: The Paradox of Mental Health at a Homeless Shelter for Men*. University of Wisconsin-Milwaukee Anthropology Student Union Annual Student Colloquium, Milwaukee, WI.
- 2018 *Crumpled Together and Torn Apart: Vicarious Trauma at the Front Line of Homeless Care*. American Anthropological Association Annual Meeting, San Jose, CA.
- 2018 *"Where I End and You Start": The Ethical Limits of Good Care*. American Ethnological Society Annual Conference. Philadelphia, PA.
- 2018 *The Micro-politics of Care: Social Work and the Management of Moral Responsibility*. University of Wisconsin-Milwaukee Anthropology Student Union Annual Student Colloquium, Milwaukee, WI.
- 2018 *Examining Nonprofit Executive Director-Board Relations in Two Countries as they Relate to Perceptions of Board Effectiveness: Executive Director Perspectives*. Co-presenters Douglas M. Ihrke and Michael Ford. Midwest Public Affairs Conference, Chicago, IL.
- 2017 *Sharing Care: Relational Ethics in Care Giving and Receiving*. Society for Psychological Anthropology Biennial Meeting, New Orleans, LA.
- 2016 *Technologies/Care: Self/Other*. American Anthropological Association Annual Meeting, Minneapolis, MN.

2015 *Which Justice? Whose Rationality?: Negotiations of Legitimacy in Post-Conflict Northern Uganda.* University of Wisconsin-Milwaukee Anthropology Student Union Annual Student Colloquium, Milwaukee, WI.

AWARDS:

2020 Graduate Student Excellence Fellowship (GSEF), Graduate School, University of Wisconsin-Milwaukee
2020 Graduate Assistantship as Research Assistant, Department of Anthropology, University of Wisconsin-Milwaukee and Medical College of Wisconsin
2019 Graduate Student Travel Award, Graduate School, University of Wisconsin-Milwaukee.
2018 Graduate Student Excellence Fellowship (GSEF), Graduate School, University of Wisconsin-Milwaukee.
2018 Graduate Student Travel Award, Graduate School, University of Wisconsin-Milwaukee.
2017 Graduate Student Travel Award, Graduate School, University of Wisconsin-Milwaukee.
2015 Foreign Language and Area Studies Fellowship (FLAS), for intensive study of Hindi, South Asia Summer Language Institute, University of Wisconsin-Madison.
2014-2015 Graduate Assistantship as Teaching Assistant, Department of Anthropology, University of Wisconsin-Milwaukee, Milwaukee, WI.

FIELD RESEARCH:

2016-2019 Dissertation research in Midwestern U.S. city focuses on non-profit organizations, ethics, and practices of care for people experiencing homelessness and/or chronic mental illness or unemployment.
Fall, 2011 Graduate research in Kampala, Uganda during internship with Malaria and HIV/AIDS program of development branch of Ugandan non-profit organization. Research focus on Ugandan economic development and NGOs.
Summer, 2007 Major undergraduate anthropology thesis involving ethnographic research with orphaned and vulnerable children while volunteering for non-profit organization in Jeffrey's Bay, South Africa. Research focus on history of the apartheid era and the transitional effects of post-apartheid politics on the lives of street children in the townships.

MEMBERSHIPS:

Professional:

American Anthropological Association
Society for Cultural Anthropology
Society for Medical Anthropology
American Ethnological Society
Association for Political and Legal Anthropology
Society for Psychological Anthropology

University: American Anthropology Interest Group on NGOs and Non-Profits
Phi Kappa Phi
Lambda Alpha Honor Society for Achievement in Anthropology
UWM Anthropology Student Union

LANGUAGES:

English	First language
Hindi	Basic written and spoken
Spanish	Beginner