

Proposing a Theological Ethics of Solidarity and Care: Learning from the Rough Grounds of Mindanao and Catholic Social Thought¹

ABSTRACT

This paper was the first-ever lecture given in the Joel E. Tabora, S.J. auditorium of the St. Alphonsus Theological and Mission Institute on the occasion of its inauguration and blessing. It analyzes solidarity and care as lived experiences within the Philippines' pandemic context and as ethical concepts conceived through philosophical and theological perspectives. The discussion proceeds with an empirical study of concrete practices of solidarity and care. It then interfaces praxis and theory by conceptually analyzing both terms from the viewpoints of feminist relational ethics and Catholic social teaching. In conclusion, this article proposes a theological (Christological) ethics of solidarity and care that entrenches human dignity and the common good not only during times of crisis but in every human experience of heightened vulnerability and social evil.

¹ This paper was originally delivered as a lecture presentation on August 3, 2023, during the blessing of the newly-built Joel E. Tabora auditorium at the St. Alphonsus Theological and Mission Institute. This was to be the inaugural lecture given in the J.E.T. auditorium.



PRELIMINARIES (*PERSONAL ANECDOTES*)

I feel deeply honored to be given this opportunity to share with you some thoughts drawn from my licentiate and Advanced Research Master's thesis, especially on this momentous occasion of the blessing of this beautiful auditorium, named after the Ateneo de Davao University (ADDU) president, Fr. Joel E. Tabora, S.J.

This auditorium stands as a symbol of the sustained collaboration and shared dream of the Ateneo de Davao University and the St. Alphonsus Theological and Mission Institute (SATMI): to establish Mindanao as a locus theologicus, with SATMI and ADDU providing quality theological and missiological education that is cognizant of the diverse contexts and pressing concerns of Mindanao, of Asia and the world.

I must say that as I speak, I see myself as a product of both institutions, SATMI and Ateneo. SATMI and the Redemptorists have set for me, as it were, the foundations. Through the inspiration of St. Alphonsus, and the missionary spirituality of the Redemptorists, I have come to internalize the fact that theologizing becomes futile if it is not undertaken at the service of the poor and most abandoned.

While the Redemptorists have set the foundations, the Ateneo, on the other hand, has broadened my horizons, making me see that to theologize means to seek God in all things. My journey in the ADDU, first as a formator and Philosophy lecturer and now as a member of the theology faculty, has helped me deepen my conviction and commitment to frame theology as a means of promoting human dignity, social justice, and the common good. And

this undertaking proceeds from the heart of the Church, that is, in the loving encounter of Jesus who is always in solidarity with the disenfranchised and marginalized. I hope that the following theological reflections humbly contribute to the ever-relevant challenge of our theological institutions of doing theology that serves the last, least, and lost.

THE PANDEMIC CONTEXT AND THE *ETHICS OF SCARE* RESPONSE

When the COVID-19 virus hit the Philippines in the first quarter of 2020, many Filipinos found themselves struggling to cope with the challenges and difficulties it wrought. The pandemic crisis was a time when everyone's vulnerabilities were exposed, fears magnified, communities threatened to disintegrate, and people forced to isolate and fortify boundaries. The disruptive and catastrophic effects of the pandemic became even more exacerbated in the conflict-ridden and poverty-stricken areas of Mindanao, southern Philippines.

The predominant response of the government was to treat the pandemic as a security threat. Its foremost strategy in stemming the spread of the virus was to impose punitive restrictions. The state, utilizing the police and military forces, enforced heavy-handed mechanisms of control such as city and province-wide lockdowns and curfews, suspension of mass transportation and non-essential businesses and activities, and non-negotiable observance of health protocols such as wearing of masks and social distancing. Although some saw these measures as necessary, a great number of people, especially those whose

source of living depended on daily person-to-person transactions, saw them as excessively restrictive. The general message of the President was that of fear and punishment: “We are at war against a vicious and invisible enemy... Obey the police and the military. Do not quarrel with them... you will be arrested and brought to prison.”² As this was happening, the healthcare facilities and medical frontliners’ capacities to treat infected persons were being exhausted. There was a clamor for unified, efficient, and well-coordinated crisis management from both national and local authorities. The government set up an Inter-Agency Taskforce on Emerging Infectious Diseases (IATF-EID) mandated as overseers and policymakers for the pandemic. Curiously, most members constituting the team were army generals appointed as cabinet members. Not a single epidemiologist was a member of the group.

Scholars heavily criticized the government’s heavy-handed response as having no careful consideration with the plight of the poor whose meager incomes relied mainly on face-to-face transactions and engagements. For Karl Hapal, the Philippine government’s response to COVID-19 was “draconian” and excessively punitive justified by a narrative of a country in a perilous war-like situation.³ He describes this approach as “securitizing”, embodying a militarized and police-centered way of disciplining, which targets the ordinary and poor Filipino *pasaways*.⁴ The moral

² This statement is a transcription of Philippine president Rodrigo Duterte’s speech retrieved in the official website of Presidential Communications Operations Office (May 2020). See <https://pcoo.gov.ph/> [accessed 21 April 2022].

³ Karl Hapal, “The Philippines’ COVID-19 Response: Securitising the Pandemic and Disciplining the Pasaway,” *Journal of Current Southeast Asian Affairs* 2021, Vol. 40 (2): 224-244.

⁴ *Pasaway* is a Filipino Tagalog term pejoratively used to refer to anyone who is undisciplined and a violator of rules.

acceptability of this scare and fear-mongering tactics becomes even more questionable when considering the situation of those who are already suffering prior to the pandemic. Biana and Joaquin, for example, problematize this “ethics of scare” approach and express their disapproval, stating that it does not contribute to the general well-being of the public or elicit a community-oriented response to the pandemic crisis.⁵

LISTENING TO THE NARRATIVES OF PEOPLE ENGAGED IN WORKS OF SOLIDARITY AND CARE

Despite the government’s COVID-19 restrictive policies, organic initiatives of solidarity and care coming from individuals and local communities have emerged and even flourished. Whether these have been precipitated by sentiment of dissatisfaction towards the government’s programs or by a genuine concern to care for the near and the neediest, what is striking is that the emergence of these ‘spaces of solidarity and care’ is unprecedented given the overall atmosphere of fear and unfreedom. Even with the general demand that people distance themselves, at least physically, from each other, many Filipinos have not been swayed to devise creative ways of showing gestures of reaching out to help. These initiatives include social mobilizations such as community pantries, personal and community outreach, community kitchen and feeding programs, virtual gatherings, and caring circles, to name a few.

⁵ H.T. Biana and J.J.B. Joaquin, “The Ethics of Scare: COVID-19 and the Philippines’ Fear Appeals,” *Public Health*, Vol. 183 (2020): 2-3.

In order to examine these engagements of solidarity and care, this paper conducted a small-scale empirical study in Mindanao. By way of network referrals and snowball sampling, this research project undertook semi-structured interviews with individuals engaged in solidarity works. In listening to their narratives, this study began to learn about people's driving motivations and the practical realities and challenges they experienced as they navigated the crisis of the pandemic. These stories from the so-called 'rough grounds' were imbued with lived experiences of persistent creativity, defiant hope and care-inspired solidarity.

Table 1: (Pseudonymized) Profile of Interviewees

<i>Interview Participant</i>	<i>Age, Sex</i>	<i>Occupation</i>	<i>Religious Background</i>	<i>Institutional Affiliation</i>	<i>Community Initiatives</i>	<i>Beneficiary Sector</i>	<i>Beneficiary Location</i>
Maria	69, F	Religious Missionary Sister	Roman Catholic, Religious	Catholic School	Community Kitchen and Pantry, Outreach to IP communities	Urban impoverished families, homeless & Street dwellers, Indigenous People displaced in the city “bakwits”, Fisherfolks	Davao City; San Luis, Agusan City; Zamboanga del Sur
Juana	41, F	IP School Coordinator	Roman Catholic, Lay missionary	Religious funded; IP School	IP education ministry; IP catechesis and leadership program, culture-sensitive outreach	Indigenous Peoples	Malita, Davao Occidental
Jose	75, M	Religious Brother	Roman Catholic, Religious	Male Missionary Congregation	Urban mission and outreach, community organizing	Urban communities	Bajada, Davao City

Pedro	28, M	Religious Priest	Roman Catholic, Missionary	Male Missionary Congregation	Urban outreach, food assistance to healthcare workers, medical mission	Impoverished families in the city	Indangan, Davao City
Dodong	43, M	Religious Priest	Roman Catholic, Missionary	Male Missionary Congregation	Shelter for street children, dental ministry	Street children and abandoned children	Davao City, and other parts of Mindanao
Pablo	56, M	Diocesan Priest, Canon Lawyer	Roman Catholic, Parish priest	Diocese	Parish visitation, sacrament to the sick, food and supplies outreach	Basic Ecclesial communities (BEC), sick and old people	Davao City
Inday	76, F	Retired	Roman Catholic, Lay	None	Nutrition program for malnourished children	Malnourished pre-school children and their communities	Different Baranggays in Davao City

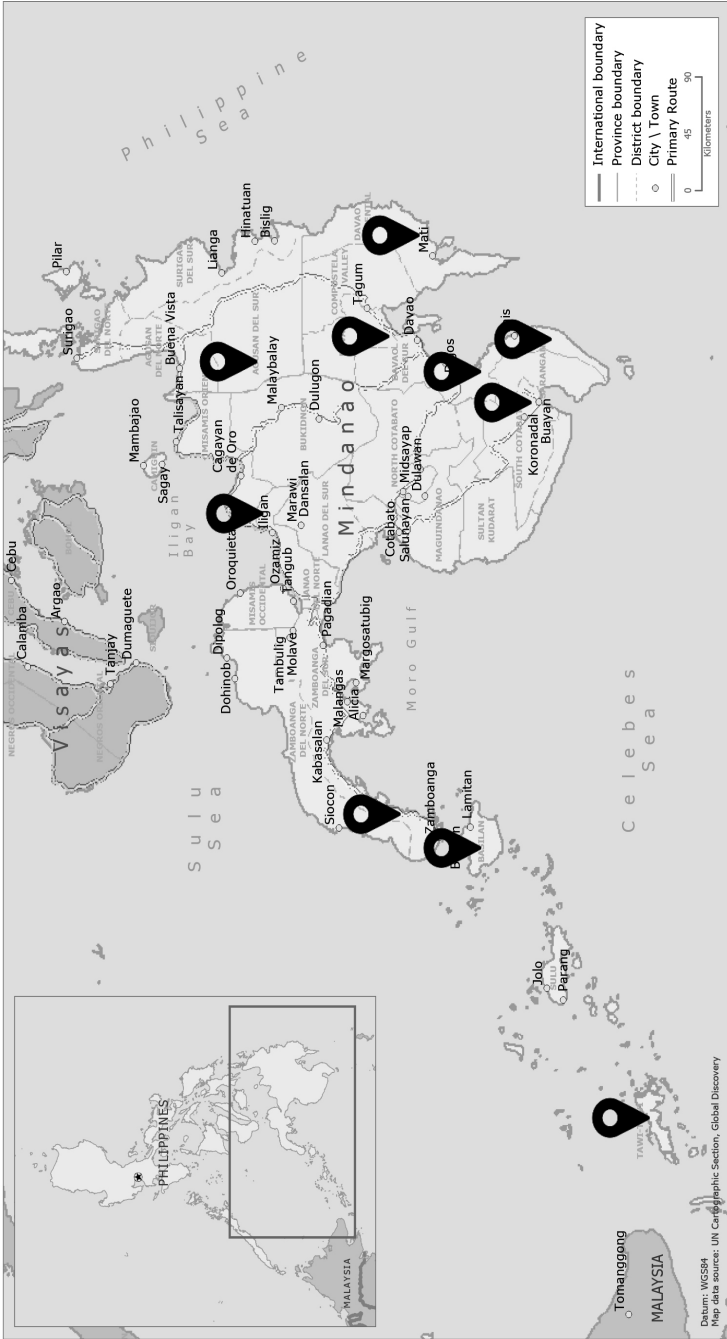
Andres	37, M	Religious Education Teacher	Roman Catholic, Lay	Catholic University	Food assistance to Medical workers, Family outreach to vulnerable communities	Impoverished families in the city	Davao City
Antonio	30, M	Religious Priest	Roman Catholic Religious priest	Parish run by Religious	Visitations, sacramental ministry, Food assistance to Medical workers, Family outreach to vulnerable communities	Poor families in the parish	Davao City, Iligan City
Corazon	23, F	Regional Government officer	Iranun, Muslim	Government, educated in a Catholic University	Food rationing to Muslim communities, medical and food, school supplies outreach	Muslim communities, urban poor, stranded students in the city	Davao City, Mati City, Zamboanga, General Santos, Basilan, Tawi- Tawi

Image A: Map of Mindanao and sites of solidarity-care engagements



OCHA Regional Office for Asia Pacific
PHILIPPINES: Mindanao
Issued: 21 September 2006

United Nations Office for the Coordination of Humanitarian Affairs (OCHA) Regional Office for Asia Pacific (ROAP)
11th Floor, 11th Avenue, New Asia Building
Rajdamann Nok Ave, Bangkok 10200, Thailand
<http://ochaonline.un.org/roap>



The interviews revealed stories of not just struggle and frustration but of dynamism and hope. A case in point is my interview with Andres, a lay person teaching religious education:

“At the time, the struggle was how to survive today and the next day because everything was uncertain... Even when there were food rations of rice and vegetables given once or twice a month... How could we live by that, especially those who have lost their jobs.

Seeing the struggles of my family and others, I felt I had to do something no matter how little.. I feel there's life in doing service.

Solidarity is more meaningful for me when we begin to understand the needs of others. We care not just because we pity them, but we share in what they feel and their struggles so that we can better relate with them. Solidarity is not mere charity giving, but sharing and being one.. feeling what the other is feeling so that one can better understand the needs of the other...”

When asked about how he thinks of solidarity, he replied:

“There is not really a term for ‘solidarity’ in Cebuano... but words associated with it are embedded with the idea of care.. Solidarity is

pakigduyog (to journey with); *pakig-unong* (to share with someone's struggle); *pakiglambigit* (to be involved with).. So solidarity is *pakighiusa*, *pakigduyog*, *pakig-unong* and *pakiglambigit*..”

In this interview transcription and in the other narratives of research participants, one sees the powerful role of stories⁶ in describing a phenomenon and evoking an ethical response to a moral dilemma. The personal narratives of interviewees were ‘vocative’ and informative of the realities that ordinary people faced, some of which were ignored, suppressed, and even silenced. When a metanarrative of fear, discipline, and scarcity predominates,

⁶ Many philosophers and ethicists generally affirm the potential of narratives and personal stories in both assigning meanings to a phenomenon and inspiring moral feelings and action. Paul Ricoeur, for example, speaks of a “narrative identity” whereby the self is understood in a dialectical relationship with the “other”, who summons the self to respond in care and justice. Here, the phenomenon may perhaps be the self-understanding of the self (one who tells and receives stories) in his/her encounter with the other. See Paul Ricoeur, *Oneself as Another*, trans. Kathleen Blamey (Chicago: The University Of Chicago Press, 1994). Martha Nussbaum in her book *Love's Knowledge* also underscores the significance of narratives and metaphors in understanding human experience and fostering empathy and compassion towards the other. Allegories reveal intimate ways of perceiving reality that stimulate both the intellect and affect, even to the point of engendering a moral response. See Martha C. Nussbaum, *Love's Knowledge: Essays on Philosophy and Literature* (New York: Oxford University Press, 2009).

As I reflect on the stories and anecdotes of my research participants, I am reminded of the lawyer's question “what must I do to inherit eternal life?” to Jesus in Luke 10: 25-37. Jesus responds by telling him the parable of the Good Samaritan. In his storytelling, Jesus transforms the descriptive questions of “*what* must I do?” and “*who* is my neighbor?” to a normative challenge of *how* one can be a neighbor to the wounded and downtrodden. The Filipina scripture scholar Prof. Ma. Maricel Ibita echoes this insight as she points out the creativity of Jesus in transforming the *what* to *how* thorough narrating the parable of the Good Samaritan. Ibita further highlights how Jesus' contextuality, his rootedness to his Jewish background, played a role in blurring the difference between *rê'ä*, “neighbor” and *rā*, “bad, enemy”. See Ma. Maricel Ibita, “The World and God's Word: of COVID-19, VUCA World, and Visions for the Future,” in *MST Review* 23/1 (2021): 145.

grassroots and underside perspectives tend to be devalued, twisted, and buried by those who try to monopolize power. Yet, people's narratives not only give an account of their real conditions but are 'evocative' of feelings and actions that exemplify compassion and concern. These silent gospels urged people's capacity to show care and solidarity. They became moral impetuses for empathy and concrete care. In a sense, the lived experiences of people expressed in their narratives connect the 'vocative' descriptive and 'evocative' normative senses of solidarity and care. The descriptive and normative interpermeate in the characteristically dynamic, ambiguous, and creative nature of lived experiences.

CONCEPTUALIZING AN ETHICS OF SOLIDARITY AND CARE

Concrete practices are the contested sites and spaces where solidarity and care are cognitively understood, tangibly experienced, and felt. They become promising points of departure for a deeper ethical reflection. The praxis-oriented meanings of solidarity and care resonate well with their conceptualizations in Catholic social thought and philosophical ethics.

In his social encyclical *Sollicitudo Rei Socialis*, Pope John Paul II, dubbed as the pope of solidarity, defines solidarity as "not just a feeling of vague compassion or shallow distress at the misfortunes of so many people, both near and far. On the contrary, it is a firm and persevering determination to commit oneself to the common good; that is to say to the good of all and of each individual

because we are all really responsible for all.”⁷ Solidarity, for the pope, is fundamentally a social virtue that dually promotes the dignity of the individual and the general welfare of the community.

Care, especially espoused by feminist thinkers Joan Tronto and Berenice Fisher, is defined as “a species of activity that includes everything that we do to maintain, continue and ‘repair’ our world so that we can live in it as well as possible.”⁸ This broad definition of care expands the classification of caring engagements among humans, societies, and the environment. It evokes a discussion on our responsibilities in caring for our society. Care constitutes a “life-sustaining web”⁹ of relations that are necessary for us to flourish as social beings. Furthermore, care, according to the KU Leuven theological ethicist Chris Gastmans, is a response to a lived experience of vulnerability.¹⁰ It is a positive, courageous, and proactive way of dealing with vulnerability that is part and parcel of the human condition.

It must be noted that the two concepts—solidarity and care—have traditionally maintained a certain epistemological distance from each other, primarily because each concept conveys ambiguities and complexities within themselves, and that each concept emerged from unique social and philosophical contexts.

⁷ Pope John Paul II, *Sollicitudo Rei Socialis*, encyclical for the twentieth anniversary of *Populorum Progressio* (1987), no. 38, Vatican website, https://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_30121987_sollicitudo-rei-socialis.pdf [accessed 21 March 2023].

⁸ Berenice Fisher and Joan C. Tronto, "Toward a Feminist Theory of Care," in *Circles of Care: Work and Identity in Women's Lives*, eds. Emily Abel and Margaret Nelson (Albany, NY: State University of New York Press, 1991), 40.

⁹ Fisher and Joan C. Tronto, "Toward a Feminist Theory of Care", 40.

¹⁰ See Chris Gastmans, "Dignity-Enhancing Nursing Care," *Nursing Ethics* 20, no. 2 (March 2013): 142-49.

On the one hand, solidarity has been largely associated with a justice and rights-based approach to ethics. On the other hand, care has been identified with the second-wave feminist movement in the 1960s and 1970s, which has challenged the overemphasis of cognitive thinking and rationality, at the expense of undermining relationality and emotiveness, in moral reasoning.

Yet the empirical and theoretical analyses of this study reveal how both concepts are intertwined and dialectically related. This is reinforced by Joan Tronto, who speaks of solidarity as “a social value” that “creates the conditions for caring among people and for greater responsiveness to democratic values.”¹¹ For other thinkers such as Robert Stake and Merel Visse, nourishing a paradigm of care is tantamount to “seeking solidarity.”¹²

But nowhere is the interlinking of the idea of solidarity and care more explicit than in the work of Bruce Jennings. Specializing in public health ethics and bioethics, Jennings argues for understanding solidarity and care as *relational practices*. Basing his ideas on the Canadian philosopher Charles Taylor, Bruce Jennings first defines practices as “forms of agency and activity in which diverse human capabilities or potentialities are actualized in the social and moral worlds.”¹³ Practices are actions or activities performed by individuals and groups with societal value or significance. These actions endeavor to actualize the flourishing of human persons, both in the agents and

¹¹ Joan C Tronto, *Who Cares?* (Ithaca, New York: Cornell University Press, 2015), 36.

¹² Robert Stake and Merel Visse, *A Paradigm of Care* (Charlotte, NC: Information Age Publishing, Inc, 2021), 64.

¹³ Bruce Jennings, “Relational Ethics for Public Health: Interpreting Solidarity and Care,” *Health Care Analysis* 27 (2019): 8; See Charles Taylor, *Philosophical Arguments* (Cambridge: Harvard University Press, 1995), 165–180.

recipients of such actions. The relational dimension in these practices “involves seeing human beings and doings in and through relationships of recognition, mutuality, respect and concern, need and vulnerability.”¹⁴ Relational practices therefore highlight the interrelatedness of individuals, the relational dynamic operative in social practices that positively impact groups, communities and societies.

With solidarity and care viewed as relational practices, Jennings clearly defines the concepts which both distinguish and link them. According to Jennings:

“Solidarity is the practice of affirming the moral standing of others—their rights, freedom, dignity, and membership in the communities of consideration. Care is the practice of attentiveness and attending to the moral (and mortal) being of others—their welfare, suffering, need, and vulnerability.”¹⁵

Solidarity signifies the act of just recognition, that is, a profound acknowledgment of the dignity of each person seen as a human subject. Care, on the other hand, conveys the just attention of human persons, especially when dignities, rights, and needs are undermined. Both concepts are heuristically distinguished by assigning the keywords of recognition and attention, respectively. Yet both are almost inconceivable without the other when viewed as relational practices. True solidarity is unimaginable without care, and vice versa.¹⁶ Moreover, Jennings explains

¹⁴ Bruce Jennings, “Solidarity and Care as Relational Practices,” *Bioethics* 32 (2018): 556.

¹⁵ Jennings, “Relational Ethics for Public Health,” 9.

¹⁶ This interrelatedness of the concepts were also highlighted by some individuals in the empirical data. The religious missionary Pedro, for example, argues that solidarity is the

that each of these terms signals moral impetuses that influence our disposition and action. To explain, the stance of solidarity for Jennings necessitates three important moral postures, namely: “standing up for, standing up with, and standing up as.”¹⁷ *Standing up for* means advancing and fighting for a cause. It includes denouncing oppressive and exploitative realities that pin down the neglected, needy and abused. *Standing up with* signifies a mode of encountering the other. It entails deeper understanding, empathy and even conversion of oneself in another person's face. *Standing up as* implies a “stronger degree of identification”¹⁸ with the downtrodden and disenfranchised, and a stronger commitment to the advocacy and cause that they promote and pursue.

Care as a relational practice also involves moral trajectories which Jennings identifies as: “attentive rehabilitation of the other; attentive companionship with and for the other; and attentive commitment to the other.”¹⁹ *Attentive rehabilitation* is a kind of caring that alleviates the plight and restores the best possible situation of the one in difficulty. It requires responsiveness in looking after the needs of the disenfranchised. *Attentive companionship with and for the other* obviously calls for a journeying with the other. This may, of course, lead to an experience of suffering with the other. But it also means a kind of sacrifice that benefits the other. The last moral posture in caring is the *attentive commitment to the other*. A

principle while care is its expression. In other words, solidarity always finds expression in care. In a similar vein, Pablo, a diocesan priest, clarifies that “solidarity is the disposition of the heart, care is the action.”

¹⁷ Jennings, “Solidarity and Care as Relational Practices,” 557-558.

¹⁸ *Ibid.*, 558.

¹⁹ Jennings, “Relational Ethics for Public Health,” 11.

deeper commitment to care implies dedication to seek ways to attend to the needs of others. It also entails formalizing certain structures in the society that secure the well-being and welfare of its members, especially the underprivileged and the poor.

Considering their dialectical relation, solidarity underscores the justice concern in care and extends the call of caring towards those outside our immediate relations. Care secures the person-to-person encounter required in solidarity engagements, emphasizing the relational-affective dimension of solidarity. An ethic that integrates both concepts responds to the human experience of social evils and vulnerability, consequently advocating the paramount importance of the common good and human dignity.

Table 2: An Ethics of Solidarity and Care

<i>Human Experience</i>	<i>Ethical Response</i>	<i>Values Upheld</i>
Social evil/injustice	Solidarity	The common good
Vulnerability	Care	Human dignity

Although seemingly estranged from each other due to contextual and ideological differences, solidarity and care are nonetheless dialectically related, constituting a relational ethic that we identify as the ethics of solidarity and care. The articulation of an ethic of solidarity and care signifies the recognition of and attention to human dignity and the common good in the context of relational practices. With these, solidarity is concretized in care practices, while care integrates an affective dimension in

the justice-oriented practice of solidarity. Taken as an integrated whole, one easily observes a certain ‘debordering’ in their conceptual parameters and an acknowledgment of how such concepts overlap.

THEOLOGIZING SOLIDARITY AND CARE

In the concrete encounters of solidarity and care with the other, one encounters Christ, who is Emmanuel, God with us.²⁰ At the same time, we see through the eyes of faith that Jesus Christ is the personification of solidarity and care par excellence. As noted by Meghan Clark, this Christological emphasis on solidarity has been a central theme in Pope Francis’ teachings and personal witnessing of solidarity.²¹ Moreover, this Christological-theological ethic asserts that Jesus Christ, who is the human face of the Other, is the perfect model and archetype of care. Anchoring the care we experience with others on the divine care that Jesus showed in his life-praxis and paschal mystery underscores care’s transcendental dimension that profoundly opens up a relational encounter with the Other. This also puts forward the point that perfect care towards the other is only realizable under the grace of the “Other [who] is God, who has entered our human condition and extended care in a perfect way through Christ.”²² In hindsight, experiencing solidarity and care as a relational

²⁰ See Matthew Petrussek, “The Mysticism of Encounter: How Pope Francis Provides Fresh Grounds for Solidarity by Transcending Postcolonial and Civilizational-Clash Paradigms of the Other,” *Journal of Catholic Social Thought*, vol. 16, no. 2 (2019): 242.

²¹ See Meghan J. Clark, “Pope Francis and the Christological Dimensions of Solidarity in Catholic Social Teaching,” *Theological Studies* 80, no. 1 (February 27, 2019): 102-122, <https://doi.org/10.1177/0040563918819818>.

²² Helenka Mannering, “A Rapprochement between Feminist Ethics of Care and Contemporary Theology,” *Religions* 11, no. 4 (April 13, 2020): 185.

ethic paints a picture of living with full human dignity. The ethics of solidarity and care reveals the wonder of being human and our openness and transcendent capacity towards the divine.

Furthermore, solidarity and care as a fundamentally human and Christ-centered relational ethic is a way of life applicable not only at a time of crisis, but all throughout our lives. As our interviewee Pablo insightfully describes it, solidarity and care can be seen as a *disposition* of the heart and a *call* to action for Christians and people of other faiths.²³ Throughout the centuries, the church has been a witness to this relational ethics. Pope Francis emphasizes that “the principles of the Church’s social doctrine”, in which solidarity occupies a central role, is the “basis for a culture of care.”²⁴ Cognizant of the pressing challenges of COVID-19, Francis posits that we need to live out a “grammar of care” to combat the “culture of indifference” prevalent in the world. Spreading the culture of care means “commitment to promoting the dignity of each human person, solidarity with the poor and vulnerable, the pursuit of the common good and concern for [the] protection of creation.”²⁵ This cannot be highlighted only in times of great suffering and crisis, for the call to cultivate a culture of solidarity and care will always be significantly relevant and profoundly essential in every day and age.

²³ Pablo, a diocesan priest and a Canon lawyer, further elaborates: “Solidarity and care are the concrete expression of looking after others, of doing what is just, reaching out to others, especially in taking initiatives. That is why it is very important in the Church.” This excerpt is taken from the original transcript of the interview.

²⁴ Pope Francis, *A Culture of Care as a Path to Peace*, Message for the Celebration of the 54th World Day of Peace (2021), no. 6, Vatican website, https://www.vatican.va/content/francesco/en/messages/peace/documents/papa-francesco_20201208_messaggio-54giornatamondiale-pace2021.html [accessed 14 May 2023].

²⁵ *Ibid.*

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