In this slender book from Palgrave's Pivot series, Tim Johnston argues for the importance of affirmation in caring for members of the LGBT community. Johnston understands affirmation as much more than mere encouragement or support; affirmation is fundamental to the development and maintenance of "a healthy, stable, coherent sense of self" (99). At the heart of his book is a theory about how "affirmative feedback loops" sustaining our self-concepts are created by the other people and objects in our environment (15). Closely related to this ontological thesis is an ethical argument for developing practices of care that uphold the identities of LGBT people. In a world in which LGBT people still encounter routine violence in a variety of institutional settings, urges Johnston, it is incumbent on those who care for LGBT children and adults to create, sustain, and repair LGBT identities by "initiating and amending affirmative feedback loops" (34).

Affirmation, Care Ethics, and LGBT Identity makes its argument in six chapters. Chapter 1 opens with a quotation from Laverne Cox that introduces the need for affirming spaces within the context of trans lives. Asked by Amy Goodman on Democracy Now! about trans suicides, Cox reflects:

I think we need to begin to create loving spaces where we affirm people's gender identity and expression, so that people can be--live in a space of gender self-determination without stigma and without shame, and know that . . . they're loved no matter who they are and how they identify. (3; Goodman 2014)

Cox's reflections set the stage for Johnston's project, which argues for the creation of affirming, safe spaces for all LGBT people. Noting that LGBT folk have successfully created subcultural spaces in which their identities are affirmed, Johnston queries what it would take to transform public spaces such as "schools, dormitories, hospitals, senior centers, parks, shopping malls, public transportation, and government offices" into places where LGBT people can be open and move fluidly without fearing for their safety.

An important part of Johnston's analysis of affirmation, developed more fully in later chapters, centers on the notion of bodily fluidity. Affirmation "extends beyond the strictly psychological into our somatic experience," says Johnston (4). Thus, positive affirmation of someone's identity creates a space in which that person can move fluidly. Johnston illustrates this by referencing a scene from Gen Silent, a documentary that explores the lives of six LGBT seniors in the US who make choices about revealing or hiding their sexuality in the context of long-term health-care facilities (Gen Silent 2010). In the scene referenced, a gay senior, Lawrence, compares two nursing homes in which his long-term partner, Alexandre, has lived by describing two different ways he put lotion on his partner's hands. In Alexandre's present facility, this caring gesture is described as an act of intimacy that involves "massaging [the lotion] in and taking your time and just feeling, feeling his skin, feeling his hand and you know, being able to sense my touch" (5). In a previous home, where the couple was afraid of revealing their identity, Lawrence would not have felt comfortable doing this. He would have
performed the act, if at all, in a way described as "clinical."

Chapter 2 uses select works from feminist care ethics to make the ethical argument that "we are obligated to affirm one another as a form of interpersonal care" (11). The chapter opens by asking "[h]ow do we stop people from bullying, discriminating, or demonstrating outright violence?" (11). Johnston points to the inadequacy of purely punitive solutions, arguing that we need to understand the reasons people discriminate against or harm other people. Setting the stage here is a scene from RuPaul's autobiography where RuPaul recollects attending a counterprotest to a Klan march dressed in full drag, locking eyes with a Klansman, and realizing that they were both seeking attention and validation, that they were each "alone, aching to belong" (13; RuPaul 1996).

Defining affirmation as "a moment when anything reflects and stabilizes an aspect of the self," Johnston claims that "affirmation is a process that creates the relational self, and affirmative feedback loops are the things that sustain that self across time" (15, original emphasis). Drawing parallels between his account of affirmation and Sara Ruddick's account of maternal love, Johnston argues that recognizing affirmative feedback loops and understanding how to sustain or modify those loops is "the work of attentive love"--seen most vividly when the people we love are going through periods of transitions and are "vulnerable to becoming undone" (23). To explicate the need for recalibrations in affirming responses as those we care for age, Johnston draws on Hilde Lindemann's analysis of "holding" and "letting go." Holding others in their identity depends on creating affirmative feedback loops. This holding, Johnston notes, can be done well or poorly. It is done well only when we are willing to adjust feedback loops to fit shifting identities.

Chapter 3 draws on the work of Henri Bergson to show, first, how objects function in creating and sustaining affirmative feedback loops and, second, how affirmation is a process that is somatic. Reflecting on the ways in which small acts such as placing a small rainbow flag over one's desk can set an LGBT client at ease, Johnston asks: "Why are some environments welcoming places where I can move fluidly, while others make me feel stilted and afraid?" (37). Johnston's analysis of the mechanics of affirmation begins by depicting the relational self described by care ethicists as, in Bergson's terms, "a multiplicity" that changes qualitatively over time and can only be understood as durational (38). Johnston then uses Bergson's account of memory to explain how the durational self experiences objects in its environment. Practically speaking, "we only perceive the past," which is to say that our present perceptions are always "stabilized" by the past (43). Thus, when a gay senior sees the rainbow flag, he is "also looking at his memories of such symbols of LGBT inclusion" (44). These memories affect our bodily fluidity. Being surrounded by representations of our identity, Johnston argues, enables us to experience a place as home and thus to move fluidly--much as we do in a neighborhood with which we are familiar. Caring for others well thus requires the ability to see the role of material environments in building affirmative feedback loops.

Chapters 4 and 5 use affirmation as a lens to examine two case studies of caring for members of the LGBT community at different life stages. Chapter 4 examines the bullying of LGBT youth in school settings, defining bullying as "the intentional destruction or malicious manipulation of affirmative feedback loops" (66). The bullying of LGBT youth impairs their bodily fluidity and their ability to project a coherent sense of self into the future. Nonetheless, Johnston argues against punitive, "zero tolerance" school policies as a deterrent to bullying, arguing that such policies are racially biased, fail to understand the ecological context of bullying, and are grounded in an individualistic notion of the self. Bullying is "a way of establishing the bully's own affirmative feedback loops" (69); thus, both bully and victim must
be reintegrated into the community through public discussions of hurtful behaviors that restore a victim's sense of agency and hold bullies accountable to the community (rather than expelling them from it).

Chapter 5 examines the "re-closeting" of LGBT seniors as they enter long-term care facilities. Returning to the *Gen Silent* scene featuring Lawrence and Alexandre, this chapter raises questions specific to caring for LGBT elders as they transition from home to assisted living. Because LGBT seniors are less likely to have familial care and lose as they age many of the relationships that affirmed their identity, they are both more likely to need institutional care and more vulnerable to bigotry in these institutional spaces. Thus, Johnston notes, many older LGBT adults will "default to the perceived safety of the closet" (88). To prevent this, Johnston emphasizes the importance of providing safe spaces and relationships, offering several practical suggestions. These include: cultural competency training for staff, eliminating bias on intake questionnaires, making nondiscrimination policies clear and visible, including LGBT people and symbols on promotional materials, encouraging new residents to bring decorations, photos, clothing, and other objects that will enable them to feel at home, welcoming nontraditional family members, assigning residents to the sex-segregated spaces (bathrooms, living spaces) of their choosing, and having conflict-resolution policies for dealing with tensions between residents that may arise around LGBT identities and issues.

Chapter 6 concludes by reminding us how affirmative feedback loops keep our identities anchored, urging care ethicists to situate moral agents in "the flow of time" and care providers to move beyond "awareness" of LGBT struggles to focusing concretely on "intuiting, forming, and repairing the affirmative feedback loops that enhance fluid mobility" (101, original emphasis).

I admit to cringing initially at the foregrounding of "affirmation" in a book about how best to care for LGBT people. Confirming Johnston's Bergsonian analysis, this (somatic) cringing experienced at encountering the term "affirmation" in scholarly work is, no doubt, related to my memories of the Stuart Smalley character (played by Al Franken) on *Saturday Night Live* in the 1990s. Known for his catch phrase, "I'm good enough, I'm smart enough, and doggone it, people like me," Stuart Smalley satirized a culture of self-help aimed at curing addictive and destructive behaviors--from alcoholism to women who love too much--through the practice of daily affirmations.

Johnston is not arguing for LGBT self-help, however. He is arguing instead for the development of an ethics of care that recognizes affirmation as a critical part of caring for others. As Johnston suggests, "the luxury of not recognizing the importance of affirmation is available only to those who live lives in which their environments easily and consistently affirm their identities" (99). Indeed, despite my initial response, Johnston convinces me that affirmation is an important facet of care. Thus, I want to affirm the worth of his project. I agree with Johnston that we have an ethical obligation to affirm the identities of the others with whom we are in relation, that this obligation extends to institutions (such as schools and nursing homes) as well as to individuals, and that meeting this obligation requires creating environments that will facilitate the fluid movement of nonnormative bodies in public as well as private spaces.

In addition to agreeing with Johnston's overall project, I applaud some of its details. For example, I appreciate Johnston's emphasis on the self as durational and on the different needs of LGBT populations during different life stages (for example, adolescence, aging). I also appreciate Johnston's emphasis on attempting to understand (rather than merely punish)
bullies and others who fail to positively affirm LGBT identities as an important element of an ethics of care.

At the same time, elements of this text are troublesome when examined through a feminist lens. As a book that advances an argument about care ethics, *Affirmation, Care Ethics, and LGBT Identity* cares too little for its feminist (and other) readers, for feminist scholarship, for the complex and varied LGBT subjects who identify as women, and for those who care for them. The writing is somewhat clunky, transitions are often awkward, and entire paragraphs are repeated verbatim in different chapters. Some sections seem unmotivated; it is not clear, for example, why a text on affirming the identities of LGBT people should be concerned about affirming fetuses and the deceased (26-27). Poor editing (for which the press is at least partly to blame) makes the text less readable than one might expect from a short monograph such as this.

A more serious difficulty concerns how Johnston engages (and fails to engage) relevant feminist scholarship. Although the text aims to engage feminist care ethics, the views of only two care ethicists--Sara Ruddick and Hilde Lindemann--are discussed in any detail. Carol Gilligan, Virginia Held, and Eva Kittay are mentioned in passing; Nel Noddings, whose extensive body of work on care in educational settings would seem relevant to bullying-prevention in schools, is never mentioned. Nor is the work of queer disability theorists such as Kim Hall or Alison Kafer brought to bear on thinking through questions of care for LGBT people and their mobility in public spaces. Sara Ahmed's analyses of straight orientation and queer disorientation and of how (black and brown) bodies get "stopped" would also seem highly relevant to thinking about how and for whom the fluidity of movement through public spaces is facilitated. So too would Maria Lugones's reflections on the ease with which she can move in some worlds but not in others.

To be fair, Johnston is not claiming to write a book in feminist theory, nor even to be "attempting a thorough review of all of care ethics" (8). At the same time, Johnston's failure to engage a wider range of care theorists, queer theorists, disability theorists, and critical race theorists (among others) seems related to the lack of intersectionality in this text. The "G" in LGBT overshadows the other letters in this work. Of the six LGBT folk interviewed in the documentary *Gen Silent*--including an aging lesbian couple and a transgender senior in search of housing--only Lawrence and Alexandre's story is discussed in the book. Of the several teen suicides attributed to bullying Johnston lists, the only female named is Amanda Cummings, who was a white, straight, cisgender teen, making it appear as if bullying happens only to gender nonconforming males and gender-conforming females. The two visible black bodies that appear in the text--Laverne Cox and RuPaul--are, moreover, (mis)treated as if their race were irrelevant to their stories. It matters that RuPaul is a black drag queen when he locks eyes with the Klansman. It matters that the program on which Laverne Cox talks about affirmation is titled "Black Trans Bodies under Attack" and features another black trans woman, Cece Mcdonald, who was imprisoned for nineteen months for defending herself against a transphobic attack. In lifting the Cox quote from its larger context to discuss the importance of "making mainstream environments affirming of LGBT identities," Johnston misses an opportunity to consider how the spaces one must navigate (such as prison) and the challenges of navigating those spaces may differ based on one's race and class as well as one's age, gender, and sexuality.

Lest my critique here seem unduly harsh, let me close by reiterating that I believe Johnston's overall project is an important one. There is the potential here to develop care ethics in new directions by thinking about the nuances of designing public spaces in which people with
nonnormative bodies and nonnormative desires might move freely and safely. Bringing the full potential of this project to fruition, however, will require engaging a broader range of feminist scholars whose diverse areas of expertise and experience can be brought to bear on affirming a variety of intersectional gendered and sexual identities.

References


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