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The Theoretical and Psychological Foundations of Care in Environmental Ethics

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THE THEORETICAL AND PSYCHOLOGICAL FOUNDATIONS OF CARE

IN ENVIRONMENTAL ETHICS

by

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Abstract

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Rachel Fedock

Advisor: Professor Sibyl Schwarzenbach

I investigate the phenomenon of care, provide some of the theoretical and psychological framework for the ethics of care, and apply this framework to environmental issues. The neglected dimensions of care I explore are: the emotions of care, care as a virtue, and the caring person, respectively, while constructing possible conceptions of in what each dimension consists. I argue for the necessity of sympathy and concern within the ethics of care, while arguing against the necessity of empathy. Next, I explore the virtue of care as an ideal, where emotions, desires, reasoning, motive, duty and action all play an important part in determining whether or not an act is caring. Furthermore, I argue that genuine care necessarily involves a second order duty, namely, a duty to want to perform one's caring duties; this second order duty elucidates in part the theoretical distinction between the ethics of care and other ethics. The caring person, I argue, is autonomous and yet, embedded in relations. I employ a conception of Aristotelian friendship as a model for this account. In addition, I argue for a deflationary conception of autonomy to alleviate the tension feminists face when attempting to promote autonomy, while recognizing the grip of oppression. Finally, I utilize these refinements to care ethics (in terms of the emotions, the virtue of care, and the caring person), in an attempt to resolve environmental dilemmas. Utilizing a care-based ethic, I argue, provides better solutions to environmental issues than utilizing non-care based ethics.

For Chris

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1 Care, Ecofeminism, and the Environment

1.1 Introduction

According to the Environmental Protection Agency, average sea levels will rise two feet by the end of this century, eliminating 10,000 square miles of land in the United States alone, due to glacial melting. Hurricane season will likely be longer and hurricanes more intense as ocean temperatures continue to rise. Rising temperatures will increase also the likelihood of floods, droughts, and heat waves, effecting the food supply world-wide and could also contribute to the further extinction of many plant and animal species. All of these effects are due to the rising temperatures of climate change caused by our greenhouse gas emitting lifestyles.[1] According to the Intergovernmental Panel on Climate Change, "Most of the observed increase in global average temperatures since the mid-20th century is very likely due to the observed increase in anthropogenic greenhouse gas concentrations."[2] Countless research has demonstrated the high likelihood of rising temperatures as being caused by greenhouse gas emissions from human consumption of fossil fuels. Our planet is clearly in trouble and we are in these dyer straights due to our own actions.

If there was ever a time for heightened concern for not only our future, but the future of all spices and our planet, the time is now. Tackling such a daunting problem is exceedingly difficult. Policies need to change around the entire world, limiting greenhouse gas emissions, but

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[1] 2014. *The United States Environmental Protection Agency.* October 31. Accessed November 2014. http://www.epa.gov/climatechange.

[2] Solomon, S., D. Qin, M. Manning, Z. Chen, M. Marquis, K.B. Averyt, M. Tignor and H.L. Miller (eds.). 2007. *Contribution of Working Group I to the Fourth Assessment Report of the Intergovernmental Panel on Climate Change.* New York: Cambridge University Press.

especially in the US, as we are one of the biggest contributors to greenhouse gas emissions and

fuel consumption.[3] But this is only one way we can begin to address such a huge and serious

problem. Changing laws and policies could bear great positive effects, but changing the attitudes

of individuals along with providing refined methods of dealing with environmental problems

may be able to achieve even greater effects. In this dissertation, I hope to contribute to changing

individuals attitudes as to why they should care about the environment and also describe "a

practice of care" as to how we might better be able to solve environmental problems (in chapter

5), drawing upon care ethics as well as ecofeminism, and refining them, to provide the

beginnings of such a practice.[4] In the last concluding chapter, I demonstrate how a care-based

method could provide better solutions to environmental problems than other non-care-based

methods.

1.2   The Dilemmas of Feminist Ethics

Although we hear buzz phrases like "going green" or "caring about the environment"

more often than we did ten years ago, some environmental movements, in particular

ecofeminism, have fallen out of the mainstream trends of today, at least in academic

philosophical circles; this may be revealed by the diminishment in the number of publications

over the last ten years or so. However, combining ecological and feminist movements makes

intuitive sense to some. The very tenets of ecofeminism claim that 1) oppression and domination

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[3]Only surpassed by China in 2008. Harrabin, Roger. 2008. "China' now top carbon polluter."
BBC News. April 14. Accessed April 2008. http://news.bbc.co.uk/2/hi/7347638.stm.
    [4]In the first five chapters, I delineate a concept and conception of care in order to set up the
basis for a care based method of solving environmental problems. A "concept" is a general idea,
where as a "conception" is a more specific understanding or take on a more generalized concept.
For instance, John Rawls defended his theory of justice as fairness as the best conception of
justice, although we may or may not agree upon what the concept specifically consist in his, *A
Theory of Justice* (Cambridge: Harvard University Press, 1971).

are the root cause of not only environmental harms and the harm of sexism, but also of racism, ageism, and other common "isms" in need of eradication and that 2) in their place, we should focus on the values and practices of care.[5] Most feminists focus on domination and oppression by men, but not all.[6] Although ecofeminists do focus on women's struggles, they also explore the interconnectedness between the domination of women and that of nature, as well as other forms of domination, such as those previously mentioned. Since, they argue, domination is interconnected, by focusing on female domination, they will subsequently also combat other forms of domination. Furthermore, ecofeminists argue that we ought to see ourselves as connected with and in relation with nature, rather than removed from it, simply a resource. Roughly, nature "takes care" of us, so we ought to "take care" of nature.[7] Rather than focusing on the history of domination and oppression, which has surely been well documented and discussed by feminists and ecofeminists, my thesis reflects instead on how a refined care-based ethics could provide better guidance and solutions to environmental issues than non-care-based theories. In particular, I first investigate the phenomenon of care, provide some of the theoretical and psychological framework for the ethics of care, and then apply this framework to environmental issues.

On the face of it, ecofeminism appears to be the umbrella movement which will keep all those whom have been oppressed or dominated in mind – as well as animals and nature.

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[5]Karen Warren broadly describes ecofeminism as such, "Ecological feminists ('ecofeminists') claim that there are important connections between the unjustified dominations of women, people of color, children, and the poor and the unjustified domination of nature," in her book, *Ecofeminist Philosophy: A Western Perspective on What It Is and Why It Matters* (Lanham: Rowman & Littlefield, 2000), 1.

[6]Val Plumwood argues that the main source of domination comes from rationalism rather than men in her article, "Nature, Self, and Gender: Feminism, Environmental Philosophy and the Critique of Rationalism." *Hypatia* 6.1 (1991): 3-27.

[7]Warren notes that many empirical examples of said interconnectedness and argues for their significance (2000, 1-44).

However, this intuitive appeal has also been to the movement's detriment; the umbrella term of "ecofeminism," and more specifically, "domination" has often been accused of being too broad, making it difficult to delineate exactly what ecofeminism *is*. "Ecofeminism" seems to mean very different things to many different people.[8] In the next chapter, I argue with the critics against ecofeminism, but extract some useful conceptions developed within it.

Not unlike ecofeminism, care ethics has faced similar accusations and sustained only *limited* attention throughout the academic literature, and it has yet to achieve the same prestigious status in ethics as Kantianism, utilitarianism or virtue ethics.[9] Care ethics – what some categorize as a subset of feminist ethics – also has been denounced for being too broad and difficult to delineate. This classic version of care ethics does not adopt a rigid normative theory, as do traditional ethical theories, but typically proposes vague guidelines and general descriptions of what "care" and "caring" are. Such unfettered methodology of care ethicists often faces opposition with those coming from the traditional ethical camps of Kantianism, utilitarianism, or virtue ethics.

For instance, utilitarians and Kantians require some kind of singular ruling maxim. On the one hand, utilitarians such as Jeremy Bentham contend that one should act on a principle of utility, aiming for the greatest good for the greatest number. On the other hand, Kantians argue that one should act out of a sense of duty, adhering to a moral norm of respecting persons. These

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[8]Please see Warren (2000 21-42) and Brennan, Andrew, and Yuek-Sze Lo. "Environmental Ethics." Edited by Edward N. Zalta. (2009). http://plato.stanford.edu/archives/win2009/entries/ethics-environmental.

[9]For Kantianism, see, Kant, Immanuel. *Groundwork of the Metaphysics of Morals.* Revised. Translated by Mary Gregor and Jens Timmermann (New York: Cambridge University Press, 2011). For utilitarianism, see Bentham, Jeremy. "The Principle of Utility." In *An Introduction to the Principles of Morals and Legislation* (Oxford: Clarendon Press, 2007). For virtue ethics, see Aristotle. *Nicomachean Ethics.* Translated by Roger Crisp (Cambridge University Press, 2000).Virtue ethicists tend to find care theory less objectionable than the other theorists.

traditions are concerned with determining right action. Contrastingly, virtue ethicists urge that one should cultivate certain virtuous character traits. Virtue, according to Aristotle, is the mean that lies between two opposing vices; for instance, the mean or virtue between the vice of cowardice and the vice of foolhardiness is courage. Virtue ethicists, hence focus on a different aim: becoming a good person, a virtuous person.

In contrast to the above approaches, care ethicists, generally speaking, do not advocate such a concise and agreed-upon maxim nor focus simply on right action or being good persons; they claim that our moral life is more complicated than other ethical theories purport. Care ethics can perhaps be understood best by highlighting how it differs from traditional ethics, particularly Kantian ethics and utilitarianism. First, according to care ethicists themselves, care theories emphasize the importance of interpersonal relationships, whereas traditional ethical theories value independence and autonomy of the individual. Secondly, traditional theories typically utilize universal and impartial abstract principles, but care ethics theories take a more contextual approach, examining the details of a concrete situation, where partiality may be exercised.[10] Finally, traditional ethical theories, for the most part, tend to value reason over emotion when making moral decisions;[11] care theories, by contrast, emphasizes the crucial role that emotions play when facing such dilemmas.[12] There are numerous other claimed differences between care ethics and traditional ethics, but I have only highlighted some of the most central here.

Just as care ethicists criticizes traditional ethicists for the differences mentioned above, so

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[10]These two points are emphasized in both Held, Virgina. *The Ethics of Care: Personal, Political and Global* (New York: Oxford University Press, 2006). And Tronto, Joan. *Moral Boundaries: A Political Argument for the Ethic of Care (*New York: Routledge, 1993).

[11]Except, of course, in the case of David Hume, *A Treatise of Human Nature.* Edited by David Norton and Mary Norton (New York: Oxford University Press, 2000), as well as all other sentimentalists.

[12]See Warren (2000, 111-112), and Held (2006, 10-11).

too do traditional ethicists criticize care ethicists for those differences as well. In the end, both care ethics and ecofeminists face similar difficulties. Neither theory can be summed up into a somewhat concise and generally agreed-upon maxim or "slogan," if you will, as can the competing traditional ethical theories, and the competing theories expect all theories, feminist or otherwise, to fit into their traditional molds. When feminist theories (like care ethics and ecofeminism) fail to conform, they have been looked down upon as lacking rigor and clarity. Some feminists would argue that they are simply conveying a different perspective or conceptual scheme and that neither of these perspectives is correct or incorrect; they are only different.[13] So it seems we are faced with a dilemma. Feminists want their point of view to be taken seriously, but by its very design, traditionalists take the feminist perspective to be underdeveloped and lacking in sophistication. The feminists can either reformulate their theories to fit into the traditional (and some may say, male-biased) mold, but they thereby undermine some of the central tenets of feminist theory: its novelty and rejection of male-biases. Or, feminists can continue on par for the course and give up trying to convince the traditionalists of their alternative conceptual scheme, but this latter route, again, undermines another tenet of feminist theory: being taken seriously. So where do we go from here?

1.3   A Possible Solution

For the dialogue to continue, those skeptical of a feminist perspective surely need to become more open minded to the possibility of a different conceptual scheme. If neither side can look beyond their own prejudices, no headway will ever be gained. Just as the skeptic of feminism needs to remain open minded, perhaps the feminist should be open to describing his or

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[13]For instance, Warren expresses such a view (2000, 107), but I do not mean to claim that *all* feminists think this way.

her ideas in a variety of ways, even ways which they have traditionally avoided in the last decades, believing them to be "male-biased." By describing feminist theories in ways that may be conceived by some as "male-biased," such as introducing principles, the feminist may be able to locate greater common ground between herself and those skeptical of feminism and doing so may create the possibility of further advancements in ethics for all considered.[14] Moreover, in section 5.3.1, I argue that traditional conceptions of justice and care are not as distinct as commonly purported. A large portion of this project investigates the phenomenon of care with this in mind, providing some of the theoretical and psychological framework for the ethics of care, and applies this framework to environmental issues.

At this point, the following question presents itself to the skeptic: why do we need care ethics or ecofeminism or feminist theory? At the very least, these theories deserve careful examination for reasons presented by John Stuart Mill.[15] Society can never expect to progress unless new ideas are explored; our current norms become dogma as they are never challenged, and society ultimately stagnates. Care ethicists, ecofeminists and feminists alike have all demonstrated deficiencies with other non-feminist theories and offered promising alternatives. Alternatively, some theorists have strengthened what may once have been deemed "male-biased" theories by refashioning them into decidedly feminist thought. Care theorists such as Virginia Held and Joan Tronto (along with many others) present serious challenges to traditional ethics and developed theories which are capable of providing favorable results when faced with moral dilemmas. Val Plumwood reveals issues with the non-feminist theory of deep ecology and shows

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[14]As in emphasizing the importance of abstract principles and reason, while de-emphasizing the importance of context and emotion. Conceiving of these positions as "masculine" or "feminine" may likely be due to Lawrence Kohlberg's work, which Carol Gilligan critiqued as not simply "male" but "male-biased." Gilligan, Carol. *In a Different Voice: Psychological Theory and Women's Development* (Cambridge: Harvard University Press, 1982).
[15]Mill, John Stuart. *On Liberty* (Hackett Publishing Company, 1978).

how introducing a feminist conception of the self could resolve such issues.[16] Sibyl

Schwarzenbach, and Carol Gould offer political theories with a feminist perspective, which bring

to light notions typically ignored in (male-minded) politics, such as care and friendship,

ultimately enriching theories of justice and human rights.[17] To ignore this enormous body of

work would be merely a dogmatic move, stifling any possibility of progress; hence, in the name

of progress, we are required to examine and consider the aforementioned theories carefully.

1.4   My Thesis

In the previous sections, I have described some of the central criticisms of feminist ethics,

care ethics and ecofeminism in particular, such as their tendency to be broadly defined (if at all)

and vague. In what follows, however, I propose to uncover implicit principles, already at work

within care theories in order to delineate the conception of care more clearly.[18] For instance, in

chapter 5, I argue that care implicitly assumes a limiting condition of fairness.[19] Some care

theorists avoid claiming that they utilize anything so closely resembling justice, since their

theory is presumed to contrast justice so sharply. Admittedly, some partiality is required on an

account of care, if it is to remain as such, but impartiality abounds more often than may be

obvious. For example, I would presume that care theorists would want to avoid a theory which

allowed for favoritism amongst one's own children, caring for one only in hopes of them

returning the favor, or taking partiality so far as to allow prejudice. A limiting condition of

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[16]I hope to demonstrate the utility of both care ethics and ecofeminism in the remaining chapters of this dissertation.

[17]See. Schwarzenbach, Sibyl. *On Civic Friendship: Including Women in the State* (Columbia University Press, 2009). And Gould, Carol. *Globalizing Democracy and Human Rights* (Cambridge University Press, 2004).

[18]My investigations into some of the central literature will reveal said principles.

[19]Partiality is notoriously valued in theories of care, of which I will present a robust account, incorporating fairness in chapter 5.

fairness could eliminate the possibilities of such "care," but I explain this fully in chapter 5. In sum, I hope to clarify what is meant by "care ethics," thereby strengthening the feminist conception of it, as well as describe and argue for the specific conception I intend to promote, ultimately resulting in more appealing practices and solutions to environmental problems.

To be more specific, the structure of my dissertation will proceed as follows: in chapter 2, I analyze and clarify what "care" means, arguing for a general conception of it that I present, while investigating ecofeminism in order to excavate its most useful tenets. In the following chapters, I explore the neglected dimensions of care: the emotions of care, care as a virtue, and the caring person, respectively, while constructing possible conceptions of in what each dimension consists. I argue for the necessity of sympathy and concern within the ethics of care, while arguing against the necessity of empathy in chapter 3. In chapter 4, I explore the virtue of care as an ideal, where emotions, desires, reasoning, motive, duty and action all play an important part in determining whether or not an act is caring. Furthermore, I argue that genuine care necessarily involves a second order duty, namely, a duty to want to perform one's caring duties; this second order duty elucidates in part the theoretical distinction between the ethics of care and other ethics. The caring person, I argue, is autonomous and yet, embedded in relations in chapter 5. I employ a conception of Aristotelian friendship as a model for this account. In addition, I argue for a deflationary conception of autonomy to alleviate the tension feminists face when attempting to promote autonomy, while recognizing the grip of oppression. Finally, in chapter 6, I utilize these refinements to care ethics (in terms of the virtue of care, and the principles of care), in an attempt to resolve environmental dilemmas. Utilizing a care-based ethic, I argue, provides better solutions to environmental issues than utilizing non-care-based ethics.

2   Care and Ecofeminism

2.1   Introduction

The first task of this chapter is to examine previous definitions of care and provide a

revised conception. In doing so, we must determine in what a definition consists. There are

numerous kinds of definitions, but what is sought in this project is multifaceted. First, I am

pursuing a *real* definition, revealed by an investigation of the thing or things denoted by "care."[1]

Additionally, I hope to improve upon a real definition of care, resulting in an *explicative*

definition.[2] But, I will not attempt to discover rigid boundaries of a definition, rather, I will

attempt to construct something closer to a Wittgensteinian family resemblance definition, "a

complicated network of similarities, overlapping and crisscrossing."[3] A conception of care likely

cannot be captured completely by specifying necessary and sufficient conditions, as the

complexity of its meaning and use seem to far exceed such restrictions. For instance, there are

clearly case of non-moral care, such as when non-human animals care for their young, which

may resemble (in some very limited ways) how a mother cares for her child. The former case

would not bring to bear any moral considerations (as non-human animals are not moral agents)

whereas the latter case arguably does. So although both cases may be "care" in the broad sense

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[1]Gupta, Anil. "Definitions." Edited by Edward N. Zalta. *The Stanford Encyclopedia of Philosophy* (2009). http://plato.stanford.edu/archives/spr2009/entries/definitions. Other care theorists also appear to seek this kind of definition. As we will see with Held, Noddings and Tronto, they explore what genuine moral care is.

[2]Also in Gupta. An explicative definition seeks to improve upon an imperfect definition or concept, while keeping in mind the ordinary use of the term. Michael Slote seems to seek this kind of definition, which will be revealed later in this chapter. Slote, Michael. *The Ethics of Care and Empthy* (New York: Routledge, 2007).

[3]Wittgenstein, Ludwig. *Philosophical Investigations.* Edited by G.E.M. Anscombe and R. Rhees. Translated by G.E.M. Anscombe. (Oxford: Blackwell, 1953), 66.

of resembling one another, they are markedly different kinds of care. The notion of family resemblance could allow for these similarities, yet acknowledge the differences.

Let us begin by exploring several definitions of both "care" – most notably those of Nel Noddings, Held, Schwarzenbach, Michael Slote and Tronto – as well as the notion of "ecofeminism."[4] I hope to show that some definitions of "care" may need refinement, while I utilize others in order to arrive at a preliminary conception of care and caring.[5] I then examine ecofeminism and its failures, as the ecofeminist movement was arguably the first attempt to bring together care ethics with environmental ethics. Finally, I go on to highlight which tenets of ecofeminism may help to bridge the gap between a care-based ethic and environmental ethics. A more complete definition of care will be developed in the remaining chapters.

2.2   Definitions of Ethical Care

Theories of ethical care are often criticized for lacking rigor, clear structure, definitive answers to moral dilemmas, and also, a well-defined notion of "care" itself. For instance, some care theorists claim that a traditional definition is not needed, whereas others try to define the term, but their definitions remain far too broad.[6] Tronto's well-known definition of care, whose object can be material things and the environment as well as persons, is also well-known for being too inclusive. Tronto defines care as, "everything that we do to maintain, continue, and repair our 'world' so that we can live in it as well as possible."[7] Too many, this definition seems prima facie too broad, and closer scrutiny reveals the same; the so-called definition excludes

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[4]Noddings, Nel. *Caring: A Feminist Approach to Ethics and Moral Education* (Berkeley: University of California Press, 1984). (Held 2006), (Schwarzenbach 2009), (Slote 2007), (Toronto 1993), (Plumwood 1991), and (Warren 2000).

[5]I distinguished "concept" from "conception" in the first section of chapter 1.

[6]See (Held 2006, 29) and (Tronto 1993, 103), respectively. Held admits that she has "postponed" seeking a definition of care, but now believes that "greater clarity" is needed.

[7](Tronto 1993, 103).

nothing.[8] I would argue that Tronto has failed to provide a definition at all. Cleaning one's home could certainly fall under this definition as my cleaning may help to "maintain . . . our 'world' so that we can live in it as well as possible." But, surely this is not the kind of "care" that care theorists are concerned with; they seek a moral definition, but Tronto's definition is so broad that it appears to allow all kinds of "care," even arguably non-caring activities such as fracking "for the betterment of our world." It certainly fails to delineate how moral care differs from other types of care.

Also, by including "everything that we do," Tronto does not preclude the possibility of objectionable paternalism. For instance, a governmental power could argue that freedom of the press should be abolished as it brings about much tension and fear amongst the public, resulting in a life where people are not "living as well as possible;" hence, the government must step in to protect its citizens. But as such, "caring" violates freedom of press and speech. Presumably, care theorists would want to avoid this result. Tronto specifically states, "some aspects of protection are within the realm of care," but she fails to differentiate which.[9] By allowing protection to be included as caring activity without qualification, she leaves open the possibility of paternalistic "care." Paternalistic "care" is not (always) genuine care as will be revealed in my definition of care later in this chapter.[10]

Noddings takes a phenomenological approach to describing "care," as Held notes,[11] without delineating a precise definition. For Noddings, caring is not only a feeling, but also an action, and in addition, a commitment to act.[12] If one claims to "care for" another, we would

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[8](Schwarzenbach 2009, 242).
[9](Tronto 1993, 105).
[10]Schwarzenbach notes the dangers of paternalistic care (2009, 138-39).
[11](Held 2006, 28).
[12](Noddings 1984, 10).

doubt his or her sincerity if his or her behavior or commitment failed to correspond to his or her proclamation. Secondly, Noddings claims that "engrossment" or "caring from the inside" is a central aspect of what it means "to care." Noddings explains:

> When I look at and think about how I am when I care, I realize that there is invariably this displacement of interest from my own reality to the reality of the other . . . When I am in this sort of relationship with another, when the other's reality becomes a real possibility for me, I care.[13]

Ultimately, engrossment is a necessary condition for caring.[14] She goes on to describe "the ethical ideal" by claiming, "I am closest to goodness when I accept and affirm the internal 'I must.'"[15] Goodness is cashed out in terms of natural caring, almost instinctual for Noddings, guided by emotion much more than reason.

I argue that Noddings has failed to produce an adequate definition of care, however she does not attempt or intend to do so. But even a charitable reading of her conception of care is problematic. Although the care theorists distinguish themselves from traditional ethics by conceiving of the self as relational, Noddings has gone too far. Her idea of "engrossment" could lead to burdensome care, care where the care-giver becomes *completely overwhelmed with his or her responsibilities, losing a sense of self,* possibly leading to not only bad care, but also a nervous breakdown of the care-giver. Modern care theories make attempts to guard against this problem, but I hope to take these attempts a step further by adding the importance of autonomy to my own definition, presented in section 2.3. In addition, Noddings's devaluation of reason is also a mistake, I believe. Indeed, the importance of emotion in care theory is critical, but those

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[13]Ibid., 14.
[14]Ibid., 17.
[15]Ibid., 49.

who care surely also need reason to make decisions and cannot entirely rely upon emotions.[16]

The possible dangers of "engrossment" previously mentioned are a case in point. If one allows oneself to become overwhelmed with the emotions involved in care, without the guidance of reason to evaluate the situation and possible outcomes, negative results (as those mentioned) could become unavoidable. Only through utilizing reason can emotions and situations be evaluated, changes made, and outcomes improved for all considered. Emotions themselves are not in business of evaluating or planning, although they may certainly be involved.[17]

Held considers criticisms of both Tronto's and Noddings's definitions of care, as well as many others. Although Held does conceive of care as a practice, she urges us to see "care" as a practice through the lens of caring relations, more precisely, as seeking *good* caring relations.[18] This involves evaluations of the care-givers effectiveness, often by appraising the care-receivers responsiveness, while also examining the motives of the care-giver.[19] Caring always involves attempting to form a relationship or imagining a relationship for Held.[20] By this she means that the care receiver maintains a relationship with the care-giver via his or her responsiveness, perhaps expressing gratitude with a smile or simply appearing satisfied. In cases where the care receiver is not capable of responsiveness, imagining a relationship falls on the onus of the care-

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[16]Schwarzenbach also makes this point (2009, 211).

[17]For instance, if a care-giver not only cares *for* a person, but also deeply cares *about* this person, he or she may tend to become "engrossed" in the other person, but this would most likely lead to a complete neglect of the care-givers needs, perhaps leading to fatigue and stress and ultimately bad care. The only way to temper the emotions leading to engrossment is via the use of reason. Emotions still may arise when making evaluations, but they are not doing the work as reason does, although they have influence. I will further argue for this point and discuss Harry Frankfurt's distinction between "caring for" and "caring about" in chapter 3 (but also in chapters 4 and 5). Frankfurt, Harry. *The Importance of What We Care About* (Cambridge: Cambridge University Press, 1988).

[18](Held 2006, 36).

[19]Except, of course, in cases where the care-receiver is incapable of responding in a typical way.

[20]Ibid., 36-37.

giver. In addition, care as a practice for Held "involves attentiveness, sensitivity, and responding to needs," similar to Tronto's view.[21] Held also identifies care as a value; care as a value picks "out the appropriate cluster of moral considerations, such as sensitivity, trust, and mutual concern."[22] Although Held advocates the view that an ethic of care is a distinct ethic, she does not deny the importance of other values, such as justice. She goes on to argue that different contexts require that different practices and values be implemented. A child care worker may employ the values and practices of care with more frequency than those of justice, but justice is still utilized at times, such as when discipline is administered. By the same token, the legislative process may invoke the practices and values of justice more readily than the practices and values of care, although care is certainly not forgotten in this context. Held considers the switching between values in different contexts not only legitimate, but also necessary. In the end, the practice of care is what makes flourishing possible.[23]

Held presents a more comprehensive conception of care, than both Tronto and Noddings, addressing many of the issues which are omitted from these earlier theories. Although her theory is more comprehensive, Held's account is not complete however, as she herself recognizes.[24] More importantly, for the purposes of this project, Held also does not present a clear and concise definition of what she believes care to be. In essence, she has provided more of a guide as to what a feminist conception of care should look like, but has yet to fill in the details. For instance, she does not delineate specific conditions as in what constitutes a caring person nor does she describe any particular caring principles. I do not disagree with much of her conception of care,

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[21]Ibid., 39.
[22]Ibid., 38.
[23]Ibid., 42.
[24]Held claims that care ethics needs moral theorizing to further explain care and care practices (2006, 37).

and hence incorporate Held's description of care into my own definition presented below, while at least partially filling-in some of the moral theorizing needed to complete a conception of care.

Schwarzenbach aims for a real definition of care in her development of the notion of civic friendship.[25] Although not a care theorist per se, Schwarzenbach sees care as indispensable to a feministly conceived political theory. She defines care as such:

> that intelligent and emotionally competent activity which not only aims at the concrete and general good of a person (or object or thing), but actively seeks to bring that good about.[26]

She notes that "care" is commonly associated with worry and burden, but Schwarzenbach rejects the idea that caring requires self-sacrifice and can even be rewarding. She further distinguishes between two sense of "care:" *the manner* in which one fulfills his or her duty and *the activity* one performs. A medical practitioner commonly performs caring activity but he or she may or may not perform such activity in a caring manner. Schwarzenbach's full conception of caring also incorporates Tronto's stages of caring – caring about, taking care of, care giving, and care receiving – while distinguishing care from sympathy.[27] Again, I utilize much of Schwarzenbach's conception of care in my own definition and conception of it.

Finally, Slote also presents a comprehensive theory of care. In his book, *The Ethics of Care and Empathy*, he states, "care ethics treats acts rightly or wrongly, depending on whether they exhibit a caring or uncaring attitude/motivation on the part of the agent."[28] He admits that this conception needs "clarification and expansion," but only in terms of how one's caring attitude is directed and the intricacies of relationships in which a caring person is involved. Slote

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[25](Schwarzenbach 2009, 116).
[26]Ibid., 138.
[27]Ibid., 117-20.
[28](Slote 2007, 21).

seems to presume that we already have a working definition of in what a caring attitude consists and who a caring person is. As demonstrated earlier in this chapter, many have made attempts at "defining care," indicating that care ethicists have yet to agree upon a working definition. For Slote to presume that a definition of "caring" needs no mention seems to be a mistake.

Slote does go on to clarify the above mentioned conception: "one can claim that actions are morally wrong and contrary to moral obligation if, and only if, they reflect or exhibit or express an absence (or lack) of fully developed empathic concern for (or caring about) others on the part of the agent."[29] In this formulation, Slote seems to identify "caring about" with "empathetic concern," as does Martin Hoffman.[30] He goes on to explain what he means by "empathy" in contrast to "sympathy," adopting what he thinks is the colloquial sense in which we typically use these terms. In the case of sympathy, one experiences feelings or emotions *towards* another or others, most notably concern, whereas in the case of empathy, one experiences the feelings or emotions *of* another or others.[31] Although this second formulation is clearer than the previous, it still remains vague. For instance, Slote does not indicate exactly how one should cash out "fully developed empathetic concern." He describes the various stages of the development of empathy, first proposed by Hoffman, as well as how such empathetic concern develops, but he fails to distinguish the boundaries of what "fully developed empathetic concern" consists. For instance, would "fully developed empathetic concern" require one to feel empathetic concern towards a serial killer, who was brutalized himself? Slote is unclear as to how far our empathetic concern should extend in order to fulfill our moral obligations.

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[29] Ibid., 31.
[30] Hoffman, Martin. *Empathy and Moral Development: Implications for Caring and Justice* (Cambridge: Cambridge University Press, 2000).
[31] (Slote 2007, 13).

2.3 Why We Need a Definition and an Alternative Conception of Care

Some care theorist now may argue that a definition of care is not needed. Perhaps we already have an adequate idea of what care is without needing a precise definition; I would argue otherwise. As the literature reveals, there is notable divergence between care theorists' accounts of care. If we cannot determine more precisely in what our conception of care consists, then there is no way we can improve upon the conception of care nor its practice. If one only has a vague idea about the practice and skill of snowboarding and little about its techniques, one likely could not do it all, let alone well. Similarly, the same would seem to apply to an account of care. Without a clearer conception of in what caring consists and ways in which it is best practiced, one likely could not care well. So too, providing a definition of care may provide greater common ground between the traditional ethicist and care ethicist, since traditional ethicists argue for the necessity of clear definitions over vague phenomenological accounts.

In the remainder of this chapter, I attempt to distinguish a few of these boundaries and investigate three aspects of the phenomenon of care (my conception of it). I argue that "care" is not just a sentiment, but also a virtue, and lastly describe the caring person, clarifying each aspect of care in chapters 3, 4, and 5, respectively.[32] In chapter 3, I urge that care is a sentiment, a disposition to feel various emotions such as concern and sympathy. In chapter 4, I argue that the virtue of care involves the appropriate caring feelings, desires, motives, reasoning and action. Finally, in chapter 5, I describe the caring person, one who practices care guided by caring principles, and present an alternative conception of caring autonomy and the self, clarifying how the self is enmeshed in relations. I take each of these three parts of care to be necessary to

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[32]The distinction noted by Frankfurt (1988) with respect to care, "caring about" and "caring for," will arise in the remaining chapters. Specifically, "caring about" will be addressed primarily in chapter 3 (where care as a sentiment is explored), and "caring for" will be primarily addressed in chapter 5 (when I analyze the practice of care).

explain the phenomenon of care based upon their occurrence and re-occurrence in the care

literature. Noddings, Held, and Diana Meyers all emphasize the importance of emotions in

understanding what "caring" is and its practice, so I hope to further clarify the role of emotions

in the domain of care.[33] Slote and Lawrence Blum also understand care as a virtue.[34] I aim to fill

in some of the details with respect to the moral psychology of virtuous caring persons. Held

discusses caring persons in her work, as well as care as a practice, and the role of autonomy and

relations.[35] Others, such as Sara Ruddick and Tronto, also discuss care as a practice at length.[36]

Many feminist theorists have also considered issues with respect to the self and autonomy, such

as Natalie Stoljar, Meyers, and Linda Barclay to name a few.[37]

My first attempt at a definition of *genuine caring*, from minimal to ideal care, a feminist

conception, is the following: at the very least, "care" means a) to prevent uncontroversial

impending harm,[38] typically meeting fundamental needs, but ideally to promote flourishing of

the object of moral care,[39] while b) also respecting the autonomy of both the care-giver and care-

receiver.[40] Hence minimal care, only preventing harm, is not ideal, but remains genuine care,

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[33](Noddings 1984), (Held 2006), Meyers, Diana. *Subjection and Subjectivity: Psychoanalytic Feminism and Moral Philosophy (Thinking Gender)* (New York: Routledge, 1994).

[34]Slote, Michael. *Morals From Motives* (New York: Oxford University Press, 2001). Blum, Lawrance. *Moral Perceptions and Particularity* (New York: Cambridge University Press, 1994).

[35](Held 2006).

[36]Ruddick, Sara. *Maternal Thinking: Towards a Politics of Peace* (Beacon Press, 1995), (Tronto 1993).

[37]In Mackenzie, Catriona, and Natalie Stoljar, eds. *Relational Autonomy: Feminist Perspectives on Automony, Agency, and the Social Self* (Oxford University Press, 2000).

[38]By this I only refer to cases upon which, I think, most would agree, such as preventing death, physical abuse, sexual abuse and verbal abuse. I specifically want to exclude controversial cases, such as - whether or not abortion is considered harm to a fetus - or whether some forms of free speech could be considered harmful. Defining what I mean by "harm" will be further developed in chapter 5.

[39]I will broadly define an object of moral care in chapter 5.

[40]This definition was largely inspired by the work of Tronto, Warren, Schwarzenbach, and Held. As for the autonomy clause, others also recognize its importance within a theory of care, such as Gould, Carol. "Philosophical Dichotomies and Feminist Thought: Towards a Critical

whereas care that involves the promotion of flourishing is the best and most ideal form of caring activity.[41]

By the very definition of genuine care here, I have precluded the possibility of objectionable paternalistic care via including part b), respecting autonomy. Paternalism, by its very definition, interferes with a person's or people's autonomy, (although sometimes justified such as with children) but the definition of care I have presented ensures autonomy's preservation, thereby avoiding one of the pitfalls Tronto's definition of care. Additional advantages of this definition are revealed in the subsequent chapters of this dissertation.

Keeping with the spirit of reflective equilibrium, I do not intend to claim that the definition I have presented is the end-all final concept of care needed. I would presume that as our investigations deepen, revisions will certainly be made. I have only hoped to describe a general conception of care that avoids some problems that other definitions have faced (such as paternalism and imprecision), allowing for modification, as may be likely.

2.4 Ecofeminism

First, I will review Karen Warren's and Plumwood's definitions of ecofeminism, as well as their conceptions of ecofeminism, followed by a critique. I will then proceed to map out the

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Feminism." Edited by Herta Nagl. *Feministische Philosophie, WienerReihe* (R. Oldenbourg Verlag) 4 (1990) 184-90. I further clarify the meaning of "autonomy" in chapter 5, but in brief, I want to emphasize that I advocate for a deflationary conception of autonomy. "Autonomy" ought not to be understood in a political sense, conflicting with caring values, but rather a practical sense, where both the care giver and receiver respect and are attentive to the other's wants and needs. Serene Khader argues that caring virtues, such as concrete thinking and loving attention, help to guard against paternalism. I aim to create a conception of autonomy consistent with Khader's caring virtues. Khader, Serene J. "Beyond Inadvertent Ventriloquism: Caring Virtues for Anti-paternalist Development Practice." *Hypatia* 26 (4) (2011):742-761.

[41]Consequently, this definition is intentionally broad. As I conceive of genuine care, persons can care for other persons, the environment, and non-human animals for instance. I clarify what we ought to care about in section 5.3. Furthermore, I take it that institutions and particular professions regularly practice care.

ideals of ecofeminism which I utilize in my conception of care. As I have already noted, Warren states, "ecological feminists ('ecofeminists') claim that there are important connections between the unjustified dominations of women, people of color, children, and the poor and the unjustified domination of nature." Admittedly, this definition prima facie seems too inclusive, but ecofeminists do take on many different positions in terms of the type of domination being focused upon (being poor, being persons of color, etc.), as well as the structure of the aforementioned connections.[42]

Plumwood frames her conception of ecofeminism in a similar way; "ecological feminists . . . give positive value to a connection of women with nature which was previously, in the West, given negative cultural value and which was the main ground of women's devaluation and oppression."[43] Plumwood notes, as does Warren, that the nature of said connections varies among different versions of ecofeminism.

Both Plumwood and Warren are two of the most prominent theorist of ecofeminism. Both emphasize care in their conceptions of ecofeminism more so than other ecofeminist theorists and I believe they present more clearly formed conceptions of ecofeminism, hence I will restrict my analysis to their work. The above definitions indicate that there is little disagreement about what ecofeminism consists of, generally speaking, but they do diverge in their diagnosis of the central cause of oppression. Arguably, the arguments linking all forms of oppression to one central cause may have contributed to the decline in popularity of ecofeminism; these arguments ultimately fail as I will demonstrate, yet a number of their presented notions serve well as building blocks for my conception of care and its incorporation with environmental issues.

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[42]Warren herself describes ten different ecofeminist positions in her book, though not all are philosophical in nature (2000, 21-42).

[43]Plumwood, Val. *Feminism and the Matery of Nature* (Routledge, 1993), 8.

2.5 Plumwood's Ecofeminism

Plumwood discusses rationalism throughout her work. In its most abstract form, rationalism appears to be a metaphysical and ethical perspective, which involves universalization and abstraction, such as the adherence to impartial rules. Rationalism creates sharp distinctions between differing objects, valorizing one object while inferiorizing the other; objects are taken to be completely independent from one another. For instance, Plumwood often notes that rationalism polarizes such concepts as such as reason/emotion, masculine/feminine, and human/nature.[44] She argues that rationalism is a notion rooted in Western philosophy, and the primary tool used to dominate and oppress women and nature and in part constitutes the link between these two harms.[45] The following passage recapitulates her conception of rationalism:

> Rationalism is a doctrine about reason, its place at the apex of human life, and the practice of oppositional construction in relation to its 'others', especially the body and nature, which are simultaneously relied upon but disavowed or taken for granted. Rationalism constructs dominant forms of rationality in terms of monological ways of organizing and exercising reason in the global free market that do not allow the non-human others of the earth enough access to the earth's natural wealth to survive.[46]

Rationalism is a particular kind of reason for Plumwood, namely an arrogant and insensitive kind.[47] Plumwood has no intention of eliminating reason from her account and in fact presents her own conception of ecological rationality, a different form of reason, discussed below.

I aim to show that Plumwood's theory may have misapprehended the primary tool of

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[44](Plumwood 1991, 6-7, 12), (1993, 24,168), Plumwwod, Val. *Environmental Culture: the Ecological Crisis of Reason.* (Routledge, 2002), 5, 9-10.
[45](Plumwood 1993, 11, 24), (1991, 3).
[46](Plumwood 2002, 18).
[47]Ibid., 5.

oppression, with respect to her interpretation of Kantian forms of rationalism, claiming that they have led to and share egoist tendencies, aiding in oppressive efforts. Plumwood, I argue, has polarized the reason/emotion distinction in Kant's work, conceiving of him as inferiorizing emotion when Kant does discuss the value of emotions. Moreover, Plumwood has also directly conflated Kantian deontology and his conception of the self with egoism. Although admittedly, Kant does not emphasize relations, I argue that one must interpret Kant as understanding relations to be important in order to be moral. Hence instead of Kantian ethics as constituting a substantial role in the development of rationalism, I argue that oppression is tied much more closely to egoism alone. However, I suggest that further developing Plumwood's notions of the self-in-relation and ecological rationalism may be more promising avenues of exploration.

As noted above, Plumwood frames her conception of ecofeminism as such: "ecological feminists . . . give positive value to a connection of women with nature which was previously, in the West, given negative cultural value and which was the main ground of women's devaluation and oppression."[48] Plumwood conceives of ecofeminism partly in terms of rejecting rationalistic ideals and its resulting dichotomies, as she calls them "dualisms," and proffers a relational understanding of the self to amend the misleading tensions created by dualism and rationalism.[49] She defines "dualism" as such:

> A dualistically construed dichotomy typically polarizes differences and minimizes shared characteristics, construes differences along lines of superiority/inferiority, and views the inferior side as a means to the higher ends of the superior side (the instrumental thesis). Because its nature is defined oppositionally, the task of the superior side, that in which it realizes itself and expresses its nature, is to separate from, dominate, and control the

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[48](1991, 8).
[49]Ibid., 9, (1993, 183), (2002, 20).

lower side. This has happened with both the human/nature division and with other related

dualisms such as masculine/feminine, reason/body, and reason/emotion.[50]

Hence for Plumwood, dualism is constituted by understanding two objects of comparison in a

mutually exclusive or contradictory way, where differences are exaggerated and similarities are

understated. Moreover, one object is valorized while the other is inferiorized; instrumentalism

obtains within a dualistic system when the inferior object serves as a means merely to the valued

object. Hence, both dualism and instrumentalism are central tenets of rationalism for Plumwood.

In her most recent work, she explores what she sees as the current contributors to

oppression, namely economic, scientific, and political rationalism, as well as ethical/prudential

reason, all perpetuating the human versus nature dualism.[51] However, she sees these current

contributors as evolving from the historical perspectives of rationalism, namely the Western

philosophical tradition of rationalism, described in her previous work.[52] As Plumwood

understands environmental ethics and ethics in general, rationalism is the assumed framework on

which nearly all Western and patriarchal theory is based. Rationalism has shaped not only the

concept of morality itself, but also what is emphasized in traditional moral theories. This

rationalist framework, claims Plumwood, created and perpetuates numerous objectionable

dualisms, such as those between reason and emotion, masculine and feminine, and human versus

nature, to name a few. These dualisms are maintained via adherence to the rationalist perspective

of valorization, inferiorization, and sharp distinction. Plumwood urges that traditional ethics is in

need of enrichment.[53]

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[50](1991, 17).
[51](2002, 16).
[52](1991, 4, 6), (1993, 45-47, 75-100, 166-73).
[53]The kind of enrichment Plumwood (1991) has in mind places more emphasis on emotionality and particularity, rather than completely unemotional and impartial rationality, accompanied by a notion of the self conceived in a relational manner and as having abandoned

A paradigmatic example of such rationalism, for Plumwood, is deontological ethics, when interpreted "as essentially a rational and cognitive act of understanding that certain actions are ethically obligatory."[54] Kantian ethics, she claims, not only exemplifies the reason versus emotion dualism, but she also ties Kant's conception of the self with egoism.[55] In her 1993 book, she further develops her notion of rationalism to include the work of also Plato, Aristotle, and Descartes, among others.[56] Plumwood takes Plato's emphasis on reason to be the beginnings of rationalist culture and attributes the reason versus emotion and reason versus body dualism to his work. She interprets Aristotle as rallying for the rule of reason in general, over women, nature, animals, and emotions.[57] As for Descartes, Plumwood unsurprisingly argues that he is guilty of perpetuating the mind versus body, human versus nature and human versus animal dualisms.[58] Hence, Plumwood's notion of rationalism appears to be an umbrella notion itself, including but not limited to Platonic, Aristotelian, and Kantian ethics, Descartes developments, egoism, and various modern forms of rationalism and reason. Of course, Plumwood is not alone in her critique of rationalism. Blum (1980) and Carol Gilligan (1982, 1987) among others, also offer similar critiques of rationalism.[59]

Contrarily, Plumwood argues that moral feelings, such as respect, care and concern, which are sharply contrasted with reason on the rationalist perspective just mentioned, are

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dualism (as she defines it).

[54]Also, (1991, 9).

[55]Ibid., 4, 6.

[56]For her discussions of Plato, see (1993, 45, 69-103, 72-73). For Aristotle, see (46-47, 95, 104-05). For Descartes, see (45, 70, 74, 91, 104-19).

[57](1993, 46, 169).

[58]Ibid., 45,107-17.

[59] Blum, Lawrence. *Frindship, Altruism and Morality* (Routledge & Kegan Paul, 1980). Gilligan, Carol. "Moral Orientation and Moral Development." In *Women in Moral Theory*, edited by Eva Kittay and Diana Meyers (Rowman & Littlfeild, 1987).

inseparable from reason.[60] Rationalist critiques of ethical concepts outside of the rationalist

tradition are inadequate, since their "rationalist-inspired ethical concepts are highly

ethnocentric."[61] Inevitably, rationalists view such "outside" ethical concepts as lacking an ethical

framework entirely and are incapable of a non-polarizing evaluation due to the very structure of

the rationalist framework. Hence, Plumwood urges that non-rationalist concepts such as *care*

should receive more serious attention, "at the expense of abstract, male stream concepts from the

public sphere such as rights and justice."[62]

By no means is Plumwood against the utilization of reason (as noted above) or traditional

ethical approaches.[63] She sketches her own concept of a "more rational" rationality in her 1991

article and later, as "ecological rationality" in her 2002 book. For Plumwood (2002), (ecological)

rationality is "a matter of balance, harmony, and reconcilability among an organism's identities,

faculties and ends, a harmony that has regard to the kind of being it is."[64] Ultimately, Plumwood

concludes that since we are part of nature, we need to integrate our efforts and ends with those of

nature, instead of dominating and opposing it. Plumwood's conception of the self reflects this

newfound ecological rationality, directly opposing the traditional rationalist framework and

challenging the dualisms of independence/dependence as well as human/nature.

Plumwood conceives of the self as not only relational with respect to others (in that we

are involved in relations with others), but relational also with respect to nature. These relations

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[60]For instance, Blum (1980) believes that a morally worthy action requires more than performing one's duty. In addition, one must also feel the appropriate emotions and sentiments. Plumwood (1991) cites Blum as purporting the connection between emotion and reason, which she describes and adopts (5-7).

[61](1991, 9).

[62]Ibid.

[63]For instance, she does find Aristotle's conception of friendship a useful notion in describing her idea of the self-in-relation, since Aristotle's conception of friendship rejects instrumentalism outright by claiming that friends wish each other well for their own sake (1993, 155).

[64]Ibid., 67.

ought to be "mutualistic," according to Plumwood, promoting a "durable relationship."[65] The

ideals of care ethics, which value sensitivity, understanding, concern and responsibility can

provide a basis for these relations.[66] The development and cultivation of such relations are in

direct opposition to instrumental relations for Plumwood, since instrumental relations involve

using the other as a mere means, whereas mutual relations involve care and valuing the other for

his or her own sake. This conception challenges both the autonomous and independent ideals of

rationalism, as well as the common human versus nature dualism simultaneously, which I will

explain below.

Plumwood describes the rationalist conception of the self as distinct, and disconnected

from others and nature. Under this conception, the self is disconnected from others by being seen

as completely free, rational and independent. Similarly, the self is disconnected from nature

when viewed as being "outside" of nature, and in turn, nature is something to be controlled or

mastered. Such a conception of the self does not allow for non-instrumental arguments for the

preservation of nature and its inhabitants; by this very conception, nature's relation to humans is

defined as one of purely instrumental value, merely providing for one's own needs. Even when

the self is "connected with others," the relation of the self to others is again for the satisfaction of

one's own wants and needs.[67] Ultimately, *the well-being of others is not taken into consideration*.

The ethical danger of instrumental relations lies in the possibility of harming the other being

used as a means, as well as the relation itself. Instrumentalism neither provides nor entails limits

to using the other and could quite easily lead to not only destruction of the relation, but also

destruction of the one being used.[68] That being the case, instrumental relations are inherently

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[65](2002, 142).
[66](1991, 7).
[67](1991, 19).
[68](2002, 113).

unstable, and ought to be replaced by mutualistic relations, where the self is conceived as in-

relations.

Plumwood notes that many feminists have objected to this picture of the disconnected

self, arguing that it is an unrealistic portrayal of the actual human condition.[69] We are constantly

involved in many different relationships throughout our lives: child and parent, friendships,

colleagues, lovers, etc. To conceive of the self as primarily independent and autonomous only

would be to deny much of these interactions. One cannot survive long in a completely

independent fashion, as all of us have needed to be cared for in childhood, not to mention in

many other facets of life such as in old age, sickness and even maintaining mental well-being via

communication with others; these examples directly challenge the rationalists ideal of absolute

autonomy and independence, since we all need care and/or give care at various points throughout

or lives.[70]

Plumwood hence adopts a "self-in-relation" point of view, which treads the line between

a "merged" or "indistinguishable" self and the purely "disconnected" or "autonomous" self. This

conception of the self is interdependent for Plumwood, not completely distinct, yet also not

completely merged. She describes the relational self, with respect to the natural world, as one

"which clearly recognizes the distinctness of nature but also our relationship and continuity with

it."[71] With respect to people, Plumwood goes on to say that the relational self is "embedded in a

network of essential relationships with distinct others."[72] Conceptualizing the self as related yet

distinct is an important differentiation, avoiding the self from becoming lost, but also avoiding

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[69](1991, 20). She mentions Gilligan (1987), Jaggar, Alison. *Feminist Politics and Human Nature* (Rowman & Littlefeild, 1983). Warren, Karen. "The Power and Promise of Ecological Feminism." *Environmental Ethics* 12 (2) (1990), to name only a few.
[70]Held (2006) and Sara Ruddick (1995) make this point in addition to Plumwood.
[71](1991, 20).
[72]Ibid.

both the disconnection inherent in rationalism and instrumentalism, according to Plumwood.[73]

In addition to presenting a challenge to the absolute autonomy assumed by rationalism, her conception of the relational self subsequently presents a challenge to the human versus nature dualism. Just as we are essentially connected with others, we are all also essentially connected with nature, counter the rationalist claims where the self is conceived as "outside" of nature. Although technology has allowed us (at least in the modern West) to remove ourselves from nature to a greater degree than before, we are still completely dependent on it for our daily survival, as nature provides food, materials for shelter, and numerous other resources.[74] The traditional rationalism that leads to the human versus nature dualism is in fact then irrational, according to Plumwood, as it would be absurd and arrogant to think we have been able to completely remove ourselves from nature. She describes our relation to nature to be essential rather than accidental.[75] Such a relation "would involve particularity, through connection to and friendship for particular places, forests, animals, to which one is particularly strongly related or attached and toward which one has specific and meaningful, not merely abstract, responsibilities of care."[76] In essence, Plumwood's point seems to be that nature "takes care" of us, so we should "take care" of nature. The rationalist conception of the self results in only seeing nature as a producer to take from, merely an instrument for our own purposes with no "mutuality."[77]

In essence, she argues that her reconceptualization of the self as relational is crucial to

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[73]Plumwood argues against some deep ecologists who promote the indistinguishability thesis where the self is seen as ontologically continuous with nature and the world, so when I fight to protect the rain forest, I am fighting to protect myself (Plumwood 1991, 11-4), (1993, 173-88). I will not get into her arguments here, but she claims that this view, and others like it, go too far in the opposite direction of the rationalist conception of the self.

[74](2002, 18, 24, 31-34, 67-69).

[75](1991, 20-21).

[76]Ibid., 21.

[77](2002, 142).

avoiding instrumentalism within environmental ethics. Plumwood (1991) defines

instrumentalism (more fully than above) as, "the view that the excluded sphere is appropriately

treated as a means to the ends of the higher sphere or group, that its value lies in the usefulness to

the privileged group that is, in contrast, worthwhile or significant in itself."[78] By building mutual

and caring relations with others and the environment, no member of a relation is used as merely a

means, nor is any member of the relation viewed as superior or inferior to the other, thereby

avoiding instrumentalism.

2.5.1   A Critique of Plumwood's Ecofeminism

Plumwood's conception and criticism of rationalism may go too far, I will argue, to her

own theory's detriment, although a mitigated version of her claims may hold true. As quoted

above, Plumwood urges that values such as care should be the focus of ethics *at the expense of*

"male" values such as justice. Such a stance is problematic in two ways. First, subordinating

justice to the diminutive role that Plumwood suggests would result in a number of problems, if

her goal is to overcome the oppression of women and protect the environment. Presumably, as

Plumwood is a feminist, any feminist critique of supposedly male-biased theories must utilize

some kind of principle of equality, for example. Plumwood does not address what she refers to as

"feminine" values such as care could produce such principles, hence she ought to not completely

discard notions such as justice. Care theorist, such as Ruddick (1995) and Held (2006), argue for

the importance of both justice and care in a comprehensive ethic as well. I agree with Plumwood

in as far as environmental ethics needs conceptions of care, emphasizing relations, to avoid

instrumentalism, however, environmental ethics would benefit also from the implementation of

both justice and care in its theorizing, neither at the expense of the other. Secondly, Plumwood's

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[78]Ibid., 19.

elevation of values such as care – as being more worthwhile than those such as justice – would seem to produce the very kind of dualism that she is arguing against. I will now argue that Plumwood also polarizes the differences and minimizes similarities between "feminine" and "masculine" values within Kant's work and conflates Kant's rationalism with rational egoism.[79]

Plumwood cites Kant as making "strong use of the reason/emotion dichotomy."[80] Kant undeniably values reason. Plumwood's conception of rationalism also valorizes reason, but inferiorizes emotions. Kant does appear to value reason more than emotions, but Kant's rationalism does not completely disregard the importance of emotions in ethics. Part of Plumwood's problematic interpretation may be due to her narrow reading of Kant. Kant's treatment of the emotions often seems forgotten in discussions of his ethical work, and although he undeniably emphasized the importance of reason over emotion in the *Groundwork*, Kant clearly illustrates the important role of emotions in morality in the *Metaphysics of Morals* (Part II). In the *Metaphysic of Morals*, he argues that we have an imperfect *duty* to cultivate the emotions that help us to fulfill our duties, especially "sympathy."[81]

> Sympathetic joy and sadness (sympathia moralis) are sensible feelings of pleasure or displeasure… at another's state of joy or pain. (MS 6:456) While it is not in itself a duty to share the sufferings (as well as the joys) of others, it is a duty to sympathize actively in their fate; and to this end it is therefore an indirect duty to cultivate the compassionate natural (aesthetic) feelings in us.[82]

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[79]Some care theorists may commit similar errors with respect to their interpretations of Kant.
[80](1991, 3, 103, 166).
[81]Ornaith O'Dowd argues that Kant's work has been misinterpreted. O'Dowd, Ornaith. 2011. "Responsibilites of Reason: Kant and Care." PhD diss., CUNY Graduate Center. Please note that what Kant refers to as "sympathy" may more closely resembles the more modern notion of empathy.
[82]MS 6:457.

By cultivating "sympathy," not only can we better understand another's needs and hence how best we can help him or her (helping others is also an imperfect duty), but "sympathy" can play a part in helping to motivate our actions. Of course for Kant, "sympathy" cannot ground motivation; duty must motivate action, but emotions such as "sympathy" may accompany such duties.[83] Recall that Plumwood's conception of rationalism inferiorizes the role of emotions (if not excludes them completely), however, Kantian rationalism does not inferiorize emotions, although emotions are not at center stage in his theory as noted in the above passage. We now have one notable distinction between Plumwood's and Kant's rationalism: the devaluation and elimination of emotion versus emotions conceived as non-central yet important.

In addition to the overstatement and polarizations of Plumwood's description above, she also appears to commit similar errors when depicting Kant's conception of the self. In her 1991 paper, she criticizes the rationalists' supposed "disconnection" from others, (also contributing to the human versus nature dualism) grouping Kantian ethics under the same umbrella of rationalism qua egoism: surely a mistake.[84] Consider that Plumwood may be conflating deontological and Kantian forms of rationalism with egoist conceptions of rationalism, lacking values of care. For instance, Kant argues in the *Groundwork* that we have an imperfect duty to help others in need, a rule that egoists explicitly reject, as noted by Plumwood's own description of egoism.[85] Plumwood (2002), however, conveys the idea that deontological rationalism inherently involves an isolated "uncaring" self, noted in her rationalism descriptions.[86] Egoists

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[83]O'Dowd also makes this point (2011, 86); Marcia Baron interprets Kant in this way, allowing moral actions to be accompanied by emotions, as long as the emotions are not the sole basis for the action. Baron, Marcia. *Kantian Ethics Almost without Apology* (Cambridge University Press, 1995), 148-49.

[84]She describes rationalism as including Kantian ethics (1991, 4) and then egoism on p. 6. Plumwood makes this connection again in her 1993 book (146, 170).

[85](Kant, Illustrations, 4), (Plumwood 1993, 144-146).

[86]Ibid., 16.

claim that self-interest is the primary standard of morality, leaving selfless acts of care completely out of the moral picture. Plumwood notes that egoistic ideals, as well as instrumentalism and dualism, are part of rationalism in several places, one might say, within the penumbra of rationalism.[87] Hence, Kant's argument for helping others, as well as his treatment of the emotions, appear to conflict with Plumwood's conception of rationalism. This is another notable distinction between Plumwood's and Kant's rationalism: valuing independence and self-interest versus promoting one to help others.

In sum, Kant's rationalism emphasizes the importance of reason more so than emotions, yet emotions are still encouraged on his moral picture. In addition, Kant requires that we help others. Plumwood's rationalism conceives of the emotions as having no value or very little, omitted from morality. Furthermore, her conception of rationalism, like egoism, values only the independent and isolated self, only in relation to others for instrumental reasons and benefit. Hence, to liken Kant's rationalism with Plumwood's rationalism (akin to egoism) is a conflation and a mistake.

Moreover, Kant in *The Groundwork*, clearly rejects egoism, as all persons are to be treated as ends in themselves and *never* merely as a means.[88] Reflecting upon this principle, the self cannot be seen as isolated, independent and completely autonomous (in Plumwood's sense). If people are to be treated as ends in themselves, surely one is not permitted to always ignore others in need.[89] By always ignoring those suffering, when one is able to help, one avoids treating those suffering as a means merely, however, one will fail to treat those others as ends in themselves by not counting for his or her ends in one's own life plans. Of course, one cannot

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[87](1991, 6), (1993 180, 184)**,** **(**2002, 137).

[88]8:428.

[89]Kant specifically forbids doing so, i.e. his imperfect duty of helping others.

help everyone in need, but if one does not do so at least occasionally when capable of doing so, this would demonstrate that one is not treating others as ends in themselves – this would be egoism. Kant admittedly does not focus on relationships and building relations in particular, but doing so appears to be an implicit principle in his theory if the above notions are taken seriously.[90] Egoism directly contradicts these Kantian ideals, since using people as a means is not only permissible, but encouraged within an egoist framework. To make the last distinction between Plumwood's rationalism and Kant's rationalism more explicit, we can say that Plumwood's accepts egoism whereas Kant's rejects egoism.

So again, Plumwood appears to be overstating the case, polarizing the differences between "feminine" and "masculine" conceptions of the self, (if masculine is Kantian), thereby creating new objectionable dualism in her own theory. Additionally, she created a similar dualism in her interpretation of Kant's treatment of emotions. To be clear, I do not deny that Kant creates an inhospitable climate for emotions in the *Groundwork*. I have only hoped to show that conceiving of Kant's ethical rationalism as within the same realm as Plumwood's rationalism, which includes egoism and instrumentalism, is a conflation and hence a mistake.

That being said, Plumwood does demonstrate that egoist conceptions of the self are prevalent in Western culture (although not due to Kant); hence, it is still important that we emphasize the relational self to avoid instrumentalism. Arguably, the other tools of oppression she mentions in her 2002 book, namely economic, scientific, and political rationalism, as well as ethical/prudential reason, at the very least have ties with egoism. Egoism may be the most likely origin of each, since all involve the utilization of "rationality" ultimately for the purposes of self-interest; all are instrumental. Although Plumwood creates new objectionable dualism in her own

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[90]O'Dowd also points out that Kant's notion of respect for persons does not make sense outside the domain of relations, (2011, 97).

theory that is not to say that I propose we should completely disregard her account of dualism; it appears to be a useful notion when evaluating theories in order to avoid falling into such objectionable dichotomies, even within Plumwood's own theory, for instance. And finally, another valuable point of Plumwood's is her argument against the human versus nature dualism and adopting the idea of the self as in relation; denying our dependency on nature is irrational. I utilize Plumwood's notion of the self-in-relation in chapter 5, enriching her conception of it by describing how selves are embedded in relations.

2.6   Warren's Ecofeminism

Warren by contrast tends to focus on different issues in her conception of ecofeminism. Where Plumwood embraced care ethical ideals, but not a particular care theory, Warren describes her own version of care ethics, or rather, what she calls a "care sensitive ethics."[91] Warren does not take "care" to be a distinct ethic, but a crucial ethical tool, nonetheless. She utilizes the metaphor of a "fruit bowl" to illustrate how she conceives of the practice of ethics. Just as one should pick the appropriate fruit for the appropriate situation (bananas for banana cream pie), one should also pick the appropriate ethical apparatus for the appropriate situation. An ethical theory is a candidate for Warren's "fruit bowl" only if it meets the "ability to care condition" and "the condition of situated universalism," which will be explained momentarily. Principles from within deontology, consequentialism and virtue ethics are all possible candidates as long as they fulfill the aforementioned requirements.

As previously mentioned, both Plumwood and Warren agree that the central tenet of ecofeminism lies in its ties between the domination of women and nature, but Warren diagnoses the mechanism of domination differently, describing what she calls the "logic of domination."

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[91]Ibid., 107-9.

First, I will explain Warren's care sensitive ethics in greater detail, and then her concept of "the logic of domination," followed by an analysis and critique of her claims.

For Warren, care-sensitive ethics consists of three features: the ability to care, situated universals, and care practices. The ability to care condition not only involves the feeling of "caring about" but also the attitude that the cared-about are deserving of respect.[92] Warren describes the ability to care (for others and oneself) as providing moral motivation and as aiding in moral reasoning. These features of care are closely tied to emotion for Warren. She argues that emotional intelligence is crucial to all rationality, but especially to moral reasoning. Her arguments rely upon psychological research of Daniel Goleman and in particular, the case study of Elliot performed by Damasio.[93] Elliot was a corporate lawyer who had surgery in order to remove a brain tumor. The surgery required disconnecting the part of the brain associated with rational decision-making and the part of the brain associated with emotion. Although the tumor was removed successfully, his emotional intelligence suffered debilitating effects. His memory, retention and IQ remained the same after surgery, but he was incapable of making any simple decisions and consequently, also moral decisions. For instance, if asked when he wanted to come in for a follow up appointment, he could list the pros and cons of the different time options, but could not decide on which one to choose. Ultimately, he was unable to assign values to his choices. Likewise, Elliot faced the same difficulties when attempting to make moral decisions.[94] Goleman attributes this failure to the lack of interaction between the emotional and rational parts of the brain. For Goleman, there is no such thing as a purely rational decision; we have some feelings about every decision we make and Elliot's case demonstrates that emotions are

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[92]Ibid., 110.
[93]See Goleman, Daniel. *Emotional Intelligence: Why It Can Matter More Than IQ* (New York: Bantam Books, 1995).
[94]He eventually lost his job and his marriage ended as well.

necessary for making these decisions. Hence, for Warren, "the ability to care about oneself and others is a necessary (but not sufficient) condition of moral motivation and reasoning."[95] In other words, emotional intelligence is necessary for moral reasoning.

Warren's second feature of care-sensitive ethics – situated universals – are distinguished from traditional universals by lacking transcendent and abstract qualities; her conception of universals is grounded in a distinct context, where particularity is key.[96] For instance, many of us will feel the same emotions as others or identify with a song or movie because that movie or song reminds us of our own concrete experience which resembles the song or movie. More specifically, a movie or song may arouse emotions in us that we felt during a previous experience and others may feel *the very same emotions*, but from their own personal experience. Hence, the universal shared experience (of say anger or grief) is grounded in our particular concrete experiences. By no means does Warren deny that there are any traditional ethical universals, but she does reconceive them as such:

> Where "universal principles" are understood as guidelines – rules of thumb, useful generalizations, heuristic devices that are always morally relevant, even if not actually morally well suited to a given context – there are universal ethical principles. They are *situated universals.* They are "situated" in that they grow out of and reflect historically particular, real-life experiences and practices; they are "universal" in that they express generalizations common to and reflective of lives of diverse peoples situated in different historical circumstances.[97]

Situated universals allow us, claims Warren, the flexibility required to deal with the complexity

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[95](Warren 2000, 111).
[96]Ibid., 108-13.
[97]Ibid., 114.

that moral problems often possess. On the face of it, this appears to be a possible solution to one of the tensions between rationalists and ecofeminists. Principles and universals are still central to her theory, yet reconceived in a feminist fashion.[98]

Care practices, the last feature of Warren's care-sensitive ethics, ascertain which ethical principles or practices to use in a particular context.[99] Warren defines care practices as "practices that either maintain, promote, or enhance (well-being, flourishing) of relevant parties, or at least do not cause unnecessary harm to the health (well-being, flourishing) of relevant parties."[100] She goes on to say, "The care-practices condition functions as a situated universal principle for choosing among ethical principles (in the fruit bowl) and for helping resolve moral conflicts." To further clarify what is meant by "care practices," Warren describes first what such practices exclude: violations of rights, torture, exploitation, oppression, and the causing of unnecessary and avoidable harm.

The next feature of Warren's ecofeminism I wish to examine is her diagnosis of "domination," which she claims is an "oppressive conceptual framework," the most important feature of which she considers to be "the logic of domination." An "oppressive conceptual framework" for Warren is "one that functions to explain, maintain, and 'justify' relationships of unjustified domination and subordination."[101] As mentioned previously, Warren disagrees with Plumwood's analysis of domination as being due to rationalism. Warren describes the "oppressive conceptual framework" as comprising five key features, but I will only focus upon

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[98]Warren's understanding of universals is not exclusively feminist, as both Hegel and Aristotle conceived of universals in a similar way, though their conceptions are not identical to Warren's, of course. Carol Gould also develops a similar notion of "concrete universals" in chapter 2 of her book, *Globalizing Democracy and Human Rights*, which I attend to in chapter 5.

[99]Just as a recipe would instruct one as to which fruit to use from the fruit bowl, care practices will guide us in choosing which moral principles to use in a particular situation.

[100]Ibid., 115.

[101]Ibid., 46.

her description of "the logic of domination."[102] I intend to focus only on Warren's concept of

"the logic of domination" because it is one of the most distinct and well-known concepts of her

ecofeminist theory, but also because the other features of an "oppressive conceptual framework"

necessarily require "the logic of domination" to be in fact oppressive. The other features are not

intrinsically oppressive on their own, according to Warren.

"The logic of domination" is the most essential feature of what she calls an "oppressive

conceptual framework." To restate more fully, the logic of domination is "a logical structure of

argumentation that 'justifies' domination and subordination. A logic of domination assumes that

superiority justifies subordination"[103] In addition, Warren provides four reasons why she believes

that "the logic of domination" is explanatorily basic to an oppressive conceptual framework.

First, she takes "the logic of domination" to be more than a logical structure; the logic of

domination explains and justifies domination, but also involves a value system.[104] Such a system

provides the distinctions required to evaluate one group as more valuable than another group,

thereby giving reasons or grounds for the more highly valued group to subordinate or dominate

the lesser valued group. This hierarchical value system arises out of what Warren calls "a moral

premise" within "the logic of domination," the second clause quoted above, "that superiority

justifies subordination." Hence, "the logic of domination thereby operates as both a premise and

as a process whereby others are constructed (or thought of) as inferior."

Secondly, "the logic of domination" is necessary for domination when similarities and

differences between groups are described *for the purpose of domination.* Without "the logic of

domination," descriptions of similarities and differences between groups would only be mere

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[102]Ibid., 46-48.
[103]Ibid., 47.
[104]Ibid., 48.

descriptions; such descriptions cannot bring about subordination or domination without "the logic of domination."[105] Thirdly, as the vast literature on ecofeminism attempts to demonstrate, Western oppressive conceptual frameworks, which have dominated and subordinated both women and nature, have historically been patriarchal. "The logic of domination" supports this historical view by means of *identifying women with nature* and thereby counting this identification as a justification for subordination. In addition, "the logic of domination" also serves as a justification for dominating women and nature on the basis of superiority.[106] Finally, "the logic of domination" is explanatorily basic for Warren because it links the domination of women and nature to the oppression of women and animals. The difference between oppression and domination for Warren lies in an object's capacity to make choices or have options. If an object cannot make choices, like a tree for instance, then, it cannot be oppressed, although it can be dominated. An object that can make choices, such as a human being or an animal, can be both oppressed and dominated. All oppression involves domination, but not all domination involves oppression. Ultimately, Warren takes "the logic of domination" to be the link between objects that are capable of making choices and those that lack such a capacity.

At this stage of Warren's argument, she diverges from Plumwood's point of view in a significant way. For Warren, the reasons why "the logic of domination" is explanatorily basic illustrates that dualisms (which Plumwood takes to be inherently problematic) are not intrinsically negative on their own. Warren argues that such distinctions can be useful in domains such as science for classification and for organizational purposes. So when are such dualisms permissible and when are they not for Warren? Dualisms are unjustified only if the logic of domination accompanies them.

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[105]Ibid., 49.
[106]Ibid., 50.

2.6.1   A Critique of Warren's Ecofeminism

Domination often involves (although not always) justifications for such domination, otherwise, it can be more difficult to succeed at dominating. So it seems somewhat uninformative to say that oppression and domination consist of justifications of dominations. *The Stanford Encyclopedia of Philosophy* broadly defines domination as "unjust or oppressive power-over relations."[107] What Warren's "logic of domination" adds to this definition is mysterious. Even with her four reasons why "the logic of domination" is explanatorily basic, Warren does not clarify how her "logic of domination" is more explanatory than our colloquial sense of "domination." Why is mere "domination" itself not explanatorily basic to some presumed value system? The problematic character of oppressive descriptions, of patriarchy, or of domination's connection to oppression remains unclear on her account. It seems that our colloquial notion of domination could explain all four of the features of an oppressive conceptual framework Warren describes without employing Warren's "logic of domination." Thus, Warren's "logic of domination" is ineffectual; she has provided a deeper analysis of typical components of the phenomenon of domination and how it is relates to other objectionable practices, but as for developing a "new" "logic" or theory, Warren does not appeared to have created one.

Regarding Warren's account of a "care sensitive ethics," this aspect of her theory appears to have the most promise in terms of complimenting the current project, providing better solutions to environmental problems than a non-care based ethic. In chapter 5, I utilize her notions of situated universals in further developing a conception of care practices. In addition, I explore Warren's "ability to care condition" in chapter 3, arguing for the necessity of emotions when reasoning morally, expanding upon this point in chapter 4.

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[107]Allen, Amy. "Feminist Perspectives on Power." Edited by Edward N. Zalta. *The Stanford Encyclopedia of Philosophy* (2011).

2.7   What We Have Learned From Ecofeminism

Both Plumwood and Warren have undoubtedly made invaluable contributions to ecofeminism and environmentalism. Plumwood's attribution of oppression to rationalism (as she conceives it) appears problematic, as I argued in section 2.5.1. Although, Plumwood seems to create objectionable dualisms within her own theory, her idea of dualism was shown to be a useful tool in evaluating theories, even her own. In addition, although Plumwood may have overstated the differences between a rationalist conception of the self as opposed to a relational one, the importance of her conception of a relational self culminates in chapter 5, where I aim to articulate a clearer understanding of caring persons.

As for Warren, her theory of "the logic of domination" as the culprit of oppression of women and nature was shown to be problematic in section 2.6.1. However, Warren presents a clearer picture of care's role in ecofeminism and environmental ethics (at least clearer than Plumwood). Warren's theory of a "care sensitive ethics" enhances the development of the remaining chapters of this dissertation, ultimately aiding in the refinement of a conception of care, which will provide better moral solutions to environmental problems than other non-care-based theories.

2.8   Conclusion

In this chapter, I have reviewed a number of definitions of care by care theorists, other feminists theorists, and ecofeminists, critiquing some and elaborating on others in order to formulate a more refined and complete conception of care. The definition of care I present focuses on the practice of care, like others but also emphasizes the importance of respecting the autonomy of the care giver and cared-for in its conception, so as to avoid issues of paternalism that previous definitions of care have faced. I turned to ecofeminism in search of a theory which combined caring values with environmental concerns, but theories of ecofeminism as a whole

may fail. They are too inclusive and broad in trying to link all forms of oppression to one central cause, and in attempting to achieve this misguided aim, they inevitably fail to identify the one cause because there is not merely one. Likely, many causes contribute to the oppression of women, various peoples, non-human animals, and the environment, contrary to the main ecofeminists' claim. However, ecofeminism has produced a number of fruitful notions, most notably Plumwood's self-in-relation and Warren's care-sensitive ethic. In the remaining chapters of this dissertation, I deepen and elaborate upon these ecofeminist notions as well as the previously presented definition of care. My hope and aim is provide the beginnings of a more comprehensive conception of care, emphasizing and investigating the emotions of care, the virtue of care, and a conception of caring persons, respectively with the goal of applying these alternative conceptions to environmental issues.

3   Care as a Sentiment

3.1   Introduction

Held and Slote give much attention to care as a virtue and as a practice, as has much of the literature, but few have done more than mention care as involving feelings or emotions.[1] Many, including Held, Noddings, and Tronto, emphasize the importance of emotions in an ethic of care, but say little as to exactly what role emotions play, the relationship between emotions and care, or in what a feeling of care consists.[2] When people say "I care" or "I don't care," they often seem to refer to their feelings exclusively, and not to the other aspects of care often discussed by care theorists. We need an analysis.[3] This is the first aspect of the phenomenon and conception of care I explore: care as a sentiment. First, I argue that emotions play a critical role in moral development and reasoning; those who lack normal emotional capacities do not fully grasp moral rules and also have difficulty making decisions. Next, I explore which emotions are involved in the sentiment of care, most importantly, sympathy and concern, but conclude by arguing *against* the importance of empathy. In addition, I argue that the sentiment of care is of primary importance, as it serves to be a catalyst in producing other important moral emotions, and moreover that the emotions commonly considered essential to prosocial behavior are linked together by the sentiment of care.[4] Finally, I consider the problem of distinguishing care in moral

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[1](Held 2006). Slote presents one of the most comprehensive studies of empathy and care, arguing for an empathy based version of care ethics (2007). Diana Meyers takes a psychoanalytic feminist approach to moral reasoning based on empathy (1994). Pettersen, Tove. *Comprehending Care: Problems and Possibilities in the Ethic of Care* (Lexington Books, 2008).

[2](Held, 2006), (Noddings, 1984), (Tronto, 1993).

[3]This point has also been stressed by Schwarzenbach (2009, 145).

[4]Gould proposes somewhat similar connections (2004, 144-45). She suggests that human rights emerge from concern for and caring about others' well-being. Similarly, I argue that the emotions of care give rise to the emotions often involved in justice, like anger.

versus non-moral contexts.

3.2   Moral Reasoning and Development: the Importance of Emotions

To begin this section, I brief review some leading work in both philosophy and psychology with respect to the role of emotions in morality, but also in politics. Hoffman and Daniel Goleman make their case for the importance of emotions within the field of psychology.[5] While Hoffman addresses the importance of empathy in both the moral development of children and in moral reasoning, Goleman makes the more general claim that emotions are essential for *all* decision making, including moral decisions. Meyers and Slote both claim that empathy is the key to morality; Gould takes empathy and care to be essential components in the development of solidarity and believes that they carry implications for theories of democracy; Meyers's, Slote's and Gould's discussions all reside in philosophical domains.[6] Jesse Prinz combines both philosophy and psychology, more so than the previous philosophers mentioned; he relies heavily upon psychological research for his sentimentalist based arguments regarding the nature of morality.[7]

Hoffman argues for the importance of empathy, not only in the moral development of children, but also with respect to moral reasoning in general, based upon empirical research. He proposes five stages in the development of what he calls "empathetic distress." This he defines as, "an affective response more appropriate to another's situation than one's own . . . where one

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[5](Hoffman 2000, 3), (Goleman, 1995).

[6](Meyers 1994), (Slote 2007), (Gould 2004) and her article, Gould, Carol. "Transnational Solidarities." Edited by Carol Gould and Sally Schultz. *Journal of Social Philosophy* 38 (2007) 146–62.

[7]Prinz, Jesse. *The Emotional Construction of Morals* (New York: Oxford University Press, 2007). When I mention 'sentimentalism', I am referring to the Humean meta-ethical notion that morality is grounded in emotions rather than reason and rationality (2000).

feels distressed on observing someone in actual distress."[8] For Hoffman, empathetic distress is

critical (although not always sufficient) in making moral decisions and in motivating action.[9] He

presents numerous reasons why empathy cannot do all of the moral work and that moral

principles – specifically care and justice – are required to guide our empathetic inclinations. One

noted problem with a purely empathy based ethical theory is that it can lead to biases and hence

unfavorable moral positions, such as racism.[10] In addition, a person can become overwhelmed by

empathetic distress, and instead of helping those in need, an overwhelmed empathizer may

withdraw and only comfort him or herself. Many other problems with empathy are noted by

Hoffman. I only highlight these criticisms now, as more difficulties are addressed in section 3.5

below.

     To recall, Goleman argues for an even broader and larger claim: not only are emotions

necessary in making moral decisions, but emotions are necessary in making *any* decision.[11] For

these claims, Goleman relies upon research conducted upon a brain damaged patient named

"Elliot." Elliot experienced no deficiencies in his reasoning abilities, but as the emotional part of

his brain was completely impaired, not only would he fail to make good moral decisions, but he

had trouble even deciding when to come in for his next appointment.[12] Goleman explains that

although emotions themselves are not in business of evaluating or planning, they are certainly

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[8](Hoffman 2000, 4).

[9]Ibid., 16.

[10]Prinz also takes up this problematic aspect of empathy. Prinz, Jesse. "Against Empathy."
Southern Journal of Philosophy 49 (2011).
Prinz, Jesse. "Is Empathy Necessary for Morality." In *Empathy: Philosophical and
Psychological Perspectives*, edited by Amy Coplan and Peter Goldie. Oxford University Press,
2011.

[11]Salovey and Mayer were the first to construct the concept of emotional intelligence, in
which reasoning with emotions is part of its definition in their paper, "Emotional Intelligence."
Imagination, Cognition, and Personality 9 (1990) 185-211.

[12]I discussed more about the "Elliot" case in section 2.6.

involved by giving rise to preferences, thereby motivating our decisions.

Meyers discusses the importance of emotions in morality at great length. But, as I will argue, her theory is problematic. Meyers discusses both sympathy and empathy, defining them as follows: sympathy is the sharing of another's feelings and empathy is the imaginative reconstruction of another's feelings.[13] She rejects the metaphor of 'putting yourself in another's shoes' because, Meyers believes, one cannot assume that one would feel the same as another in the same circumstances. Much of the central idea behind Meyers's theory is summarized in this passage:

> I believe that the concern that animates empathy, on the one hand, and the vividness of the imaginative reconstructions of other people's viewpoints, on the other, often interact synergistically to offset harmful moral tropisms. If I am not mistaken, empathy with members of socially excluded groups would help to resolve the dilemma of difference by dislodging egocentric categories that either eclipse difference or revile it.[14]

Meyers does not argue for her conception of empathy. Her inclusion of concern, for the one we empathize with, in her conception of empathy has been questioned by both psychologists and philosophers, yet Meyers does not justify or explain the purported connection between concern and empathy.[15] Some theorists do recognize that empathy can at times be coupled with concern, but this is generally not taken to be the paradigmatic case of empathy nor is concern conceived as necessary for empathy, as with Meyers.[16] If one could imaginatively reconstruct another's feelings, it may be possible not to feel concern for the person. For instance, one may not feel

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[13](Meyers 1994, 33).
[14]Ibid., 34.
[15]Darwall, Stephen. "Empathy, Sympathy, and Care." *Philosophical Studies* 89 (1998) 261–282. Eisenberg, Nancy. "Empathy and Sympathy." In *Handbook of Emotions*, edited by M. Lewis and J.M. (Haviland-Jones. Guilford Press, 2000) 677-691 and Prinz (2011, a and b).
[16](Darwall 1998).

concern for a person who partakes in human trafficking, but may be able to imaginatively reconstruct their sadness at the loss of a loved one, depending upon what "imaginatively constructs" cognitively requires. However, Meyers fails to illuminate in what "imaginatively reconstruct(ing) another's feelings" consists. For instance, would this require that one needs to know the details about a particular situation a person is in, or would one need to be familiar with the person's entire psychological and experiential history? If one were to *reconstruct* a model of the Eifel Tower, presumably, much precision is required. Hence, it seems that Meyers may require great precision in reconstructing another's feeling, which is at best exceedingly difficult, but at worst impossible. "Reconstruction," generally speaking, seems to be a rather demanding concept, as noted in the above example. Imagining another's feelings or viewpoint with great precision is at least exceedingly difficult due to person's different life experiences and hence conceptual schemes, emotional patterns, neuro biological chemistry, and so forth, hence her conception of empathy may fail on practical grounds. Perhaps Meyers does not require such a high and strict criteria for empathy, but her description fails to specify these details. Hence, Meyers's understanding of empathy remains unclear.

Finally, as Marilyn Friedman and others argue, empathy may not be the ideal emotion for defeating prejudices.[17] Empathizing with those who are very different from ourselves is a noted difficulty, even by Meyers herself. This being the case, prejudice is often directed at those who are different from us, and hence 'different others' are often the most difficult to empathize with. Hence, if the most difficult case of empathizing is with those who are different from ourselves, and those who are different from ourselves are often discriminated against, then empathy appears

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[17]Friedman, M. Book Review: Subjection and Subjectivity: Psychoanalytic Feminism and Moral Philosophy. Diana Tietjens Meyers. *Ethics* 106 (1996) 860. (Darwall 1998), (Prinz 2011b).

not to be the best emotion to combat prejudice or to serve as the foundation of a moral theory. In sum, Meyers does not provide sufficient reasons for accepting her conception of empathy (which is unclear and questionably includes concern) nor does she adequately deal with the various problems associated with empathy (such as too much partiality and possible prejudices). These problems, I think, demonstrate the need for further analysis of the emotions involved in morality and care.

In her book, *Globalizing Democracy and Human Rights*, Gould claims that democracy and empathy are conceptually connected; the political form of democracy is listening to others empathetically.[18] When discussing the terrorist attacks on the World Trade Center, Gould points out that not only were the attacks clear violations of human rights, but they also showed a "wholesale lack of human fellow-feeling, an absence of caring about or empathy with the potential victims on the part of the terrorists."[19] In addition, Gould often describes a lack of empathy as lacking the ability to *imagine* another's standpoint – somewhat like Meyers's conception of empathy. Gould specifies what she means by empathy:

> it should not be take, even in extended form, to require actually knowing what goes on in the mind of all others (something that would be impossible) . . . it entails listening to others and responsibly (as well as responsively) reconstructing their views for oneself, and doing so with fellow-feeling.[20]

Like Meyers, for Gould, empathy also involves *reconstructing* others' views, however, she clearly rules out the strict standard of empathy that Meyers's account may require, rendering a

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[18](Gould 2004, 252).
[19]Ibid., 250.
[20]Ibid., 252. Granted, Gould's conception differs from Meyers's in that it can extend to all humanity, creating solidarity, but the two thinkers share a core understanding of empathy as *imagining*.

clearer understanding of the concept.

Gould modifies her view in her later work, arguing for the importance of solidarity in transnational contexts, understood as social empathy, rather than "simple care or empathy."[21] I will, however, only focus upon her conception of "simple" empathy as that is my focus here. In her 2007 paper, Gould notes and seems to adopt the typical feminist conception of empathy, which "signifies an imaginative understanding of the perspective, situation, and needs of others, as a basis for moral action in response to them."[22] Here, Gould talks of "understanding," which may further clarify what she means by empathy. "Understanding" appears to be a much less demanding notion than "reconstruction;" understanding may only requiring a general grasp of one's circumstances and feelings, whereas "reconstruction" might require more precise knowledge. A "general grasp" of another's feelings appears to be an achievable and less demanding cognitive goal. However, I will argue in section 3.5 that empathy ought not to act as a primary basis, but could act as a possible partial basis for moral action, proving useful in building relations. It plays a contingent role, I argue, with respect to moral caring. Therefore, Gould avoids the unclarity in Meyers's conception of empathy, however, both Gould and Meyers face the problem that empathy may not be the best emotional device to combat prejudices when trying to empathize with those different from us, as this is notoriously difficult.

Slote argues that care is the primary ethical motive and focuses on the role of empathy in care, heavily relying upon Hoffman's research and theory. As such, Slote defines his theory of right action: "Care ethics treat acts as right or wrong, depending on whether they exhibit a caring or uncaring attitude/motivation on the part of the agent."[23] He even goes so far as to say that our

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[21]"Transnational Solidarities." Edited by Carol Gould and Sally Schultz. *Journal of Social Philosophy* 38 (2007): 148-64.
[22]Ibid.
[23](Slote 2007, 21).

natural empathetic tendencies reveal our obligations. Slote claims that normally we would feel more empathy towards those suffering within close proximately to us rather than with those in distant foreign lands, and the strength of our empathetic feelings *explains* why we have a stronger obligation to those within close proximity. He does claim that we still have obligations to those in distant lands, but he believes empathy is not the driving force behind these obligations. Again, Slote relies too heavily on empathy, running into similar problems faced by Meyers and Gould, and noted by Hoffman and Prinz: namely prejudice.

According to Prinz, emotions are essential to moral judgments. He argues from within the sentimentalist camp, as does Slote, but Prinz takes a very different approach. Prinz focuses on negative emotions – emotions such as shame, guilt, and disgust – in order to reveal our moral inclinations. He argues vigorously against moral theories based upon empathy: warning against the possible dangers entailed by such a framework.[24] Prinz centrally relies upon psychological research for the basis of his theory, such as the work of James Blair, who focuses in particular on the emotional deficiencies of psychopaths – a group who presumably demonstrate severe moral deficiencies.[25] For Prinz, sympathy is "a negative emotional response to the suffering of others" because the one experiencing sympathy feels badly for someone else.[26] Empathy is feeling "the same emotion that someone else is feeling, i.e. putting ourselves in another's shoes."[27] Psychopaths often demonstrate serious deficiencies in expressions of sympathy as well as in many other emotions (such as concern, fear, and sadness) that may be critical to developing an adequate moral sense.[28] Interestingly, psychopaths *prima facie* appear to understand many moral

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[24](Prinz 2011, a and b).
[25]Blair, R. J. R. "Moral reaosning and the Child with Psychopathic Tendancies." *Personality and Individual Differences* 26 (1997): 731-9.
[26](Prinz 2007, 82).
[27]Ibid.
[28]Ibid., 42-47.

rules, but extensive testing reveals that they treat moral rules on a par with conventional rules (such as manners).[29] This may indicate that they truly do not grasp rules of morality the way that you and I might and this may well be the result of their emotional deficiencies.[30] Such psychological research provides evidence that emotions are critical and an important foundation for morality. The aforementioned theories are not without difficulties, as I have noted, but I provide these theories as small demonstration of the work being done on the importance of emotions in ethics.

Although Prinz emphasizes the importance of emotions in ethics, Prinz himself contends that care "does not typically manifest itself in moral emotions."[31] Presumably, he comes to this conclusion due to an assumption that *if* care as a sentiment appears so often in non-moral domains, then it is not a common nor an important feature within moral domains. I have argued, however, that care as sentiment can be exhibited in both moral and non-moral domains and thus we need not assume that if care appears in non-moral domains (such as in animal behavior), then it is lacks significance or is uncommon in moral domains. Prinz admits that little attention has been paid to the "positive emotions," such as care, which I hope to bring to the foreground and highlight. I also contend that care is not straightforwardly a positive emotion. It has negative and positive components, which I explore in section 3.3.1 below.[32]

Finally, Warren also argues for the importance of emotions in morality based upon Goleman's research. As part of her "care-sensitive ethics" described in 2.5, the "ability to care

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[29](Blair 1997).

[30](Prinz 2007, 45-46).

[31]Ibid., 86.

[32]For instance, one may experience the sentiment of care while enjoying the company of one whom he or she cares about. The feelings experienced in this case may include emotions such as happiness and joy, positive emotions, which are pleasant. On the other hand, one may experience the sentiment of care while thinking of a loved one in a dangerous situation. In this case, one may experience emotions such as fear and concern, negative emotions, which are unpleasant.

condition" is the first of two conditions an ethical principle must meet in order to be considered

an eligible candidate for the ethical "fruit bowl" in which one picks the appropriate principle, i.e.

fruit for the appropriate situation or recipe. (The second condition, recall, is the "situated

universalism" condition.) By "the ability to care" Warren means: the ability to care about oneself

and others as "an essential aspect of our moral reasoning and motivation."[33] She too notes the

case of Elliot as evidence for the importance of emotions in moral reasoning and in reasoning

generally. Again, if one lacks normal emotional capacities, it seems one cannot reason morally

(also noted by Prinz (2007)). Warren defines caring about thusly: "'caring about' another is the

expression of a cognitive capacity, an attitude toward the cared-about as deserving respectful

treatment, whether or not one has any particular positive feelings for the cared-about."[34] For

instance, one may not be dearly fond of all of one's family members, but one may still believe

those family members deserve respectful treatment. In addition, without the ability to care "one

is not motivated to act morally or engage in moral reasoning at all."[35] Hence Warren takes the

ability to care to be an essential element of emotional intelligence. She concludes that the ability

to care is necessary for moral reasoning.

3.2.1   Kohlberg and Gilligan

Although Prinz and Slote adopt a sentimentalist approach to morality, Lawrence

Kohlberg takes the rationalist route, (influenced by Piaget), and theorized that there are six stages

of moral development.[36] The first two stages are dubbed "preconventional;" they involve an

orientation towards obedience, the avoidance of punishment. The next two stages are referred to

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[33](Warren 2000, 108).
[34]Ibid., 110.
[35]Ibid.
[36] Kohlberg, Lawrance. *The Psychology of Moral Development: Moral Stages and Life Cycles*
(Harper & Row, 1984). Piaget, J. *The Moral Judgement of a Child* (Routledge, 1997).

as "conventional," whereby subjects seek approval, develop a sense of duty, and desire social order. The highest two stages, termed "post-conventional," resemble both utilitarian and deontological thinking; they operate primarily in terms of universal principles of justice. I do not deny the significance of Kohlberg's work,[37] but I do believe he goes astray in his evaluation of the stages and also in how they are related, along with Gilligan.

My own view is that although care may appear at an earlier stage of moral development (perhaps the conventional stage), this does not imply that care and the emotions involved with it are unimportant to moral reasoning and development. In fact, they are an integral part of one's moral development for Kohlberg. The earlier stages may even be *more* important, as Kohlberg's research presumably shows that many of us do not attain the highest forms of moral reasoning, the postconventional stage.[38] Although Kohlberg emphasized the importance of a Kantian-like universal reasoning for the highest stages of morality, Prinz argues that Kohlberg's work *could* lend support to an emotion based theory. Prinz points out that emotions are appealed to in all of the first four stages.[39] Emotions are more distinctly removed from the highest stages, but since many of us never reach these stages, this *could* provide further evidence that emotions are an integral part of typical moral thinking.[40]

Agreeing with Gilligan, I take the implications of Kohlberg's work – that women are morally deficient (since they rarely surpass the conventional stage) – to be deeply misguided. Gilligan was arguably the primary catalyst in bringing our attention back to the emotions in morality, along with the notion of care, as opposed to the idea that morality is completely ruled

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[37]Influencing many such as, Hoffman.
[38]Prinz also makes this point, (2007, 33). I only intend to present this point as a possibility, and not as a knock-down argument.
[39]Ibid., 34.
[40]Ibid., 35.

by reason. At the same time, however, I disagree with Gilligan's construal of moral conflict; for her, conflict is often seen as either a conflict within the justice perspective *or* as a conflict within the care perspective, but not both.[41] Gilligan, I believe, has presented us with a false dichotomy. Both perspectives can and should be seen simultaneously when faced with moral conflict. Briefly, if one only considers either norms of justice or norms of care, the best possible solution for a particular moral conflict may be ignored. For instance, in chapter 5 I argue that fairness (a norm commonly associated with justice) should be conceived of as a limiting condition for caring principles. In addition, the US legal system provides counter examples to Gilligan's proposed dichotomy. When custody battles ensue over children, the court considers what is in "the best interest of the child." Such interest could arguably be considered a value of care.

As more recent work in ethics and psychology has shown, specifically the work I have mentioned earlier in this chapter, the evidence for the importance of emotions in moral development *and* in reasoning appears to outweigh both Gilligan's and Kohlberg's conclusions; on the one hand, there is the pure care perspective, and on the other, that emotions lack importance at the highest level of moral reasoning. Siding with either Kohlberg's or Gilligan's conclusions is difficult in light of the mounting research.

Kant (Kohlberg's inspiration) too regards emotions as having a place in the moral landscape, claiming that we have a *duty* to cultivate the emotions that help us to fulfill our duties, especially sympathy.[42] Of course, Kant is diametrically opposed to the sentimentalist tradition of grounding morality in the emotions, as he grounds morality in reason, but both traditions at least recognize that emotions play an important role in morality.

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[41](Gilligan 1987, 19, 30).
[42]Kant, Immanuel. *The Metaphysics of Morals.* Edited by Mary Gregor. (Cambridge University Press, 1996, 6:457).

At this point, I have attempted to show that the emotions are a vital component of both moral development and of moral reasoning. Although emotions are surely foundational to morality for the sentimentalists, like Slote and Prinz, emotions still play a role in our moral psychology for the rationalists (like Kant) as well, although a secondary role. Up to this point, I have hoped to build a strong case that emotions are a critical part of the moral landscape, for rationalists, sentimentalists, and psychologists. In the next section, I urge that we look deeper into the role of other emotions in morality, specifically those relating to the notion of care.

3.3 Care as a Sentiment

In this section, I argue that the emotions commonly considered essential to moral reasoning and prosocial behavior are linked together by the sentiment of care. First, one must distinguish an emotion from a sentiment.[43] I will rely upon Prinz's distinction between an emotion and a sentiment, as well as aspects of his embodied appraisal theory of emotions in later sections.[44] Examples of emotions are surprise and disgust. By contrast, a sentiment is a disposition to experience various emotions or a cluster of emotions.[45]

Prinz presents the example of "liking" as a sentiment. "Liking may make you envious (she has what I like!), frightened (I may lose what I like!), or hopeful (I may get what I like!)."[46] I next wish to argue that care is a sentiment, exploring which specific emotions may be involved in the sentiment of care such as concern, worry, sympathy, and empathy. In the end, I argue

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[43]I shall remain agnostic as to the cognitivist versus non-cognitivist debate with respect to emotions, although the emotions I will examine rely upon a conception of emotions as being, at least partially cognitive in some sense.

[44](Prinz 2007). I cannot foresee, at this point, that any particular theory of emotions would preclude what I intend to argue for: that emotions are essential for moral reasoning, development and judgments, especially emotions involved with care, and also, in what a sentiment of care consists.

[45]Ibid., 82-86.

[46]Ibid., 84.

against the necessity of empathy, which theorists like Slote, Hoffman, and Meyers have all taken

to be the paramount moral emotion. I discuss briefly the role empathy may play, although it is a

much subordinated role in comparison to these other thinkers. In addition, I investigate which of

the "basic" emotions may also be involved in care, such as happiness, sadness, anger, and fear.[47]

Each emotion, which falls under the umbrella of care's cluster of emotions, can be experienced

either individually or simultaneously. But before taking on an analysis of care as a sentiment

directly, a review some work in what care as a sentiment consists may prove useful. Granted,

other theorists have not discussed, care as a sentiment per se (aside from Prinz), but a few have

presented thoughts on "caring about," which I understand as comprising the beginnings of the

literature on care as a sentiment.

Harry Frankfurt describes a person who "cares about" something quite clearly and in this

passage:

> A person who cares about something is . . . invested in it . . . he makes himself vulnerable
>
> to losses and susceptible to benefits depending upon whether what he cares about is
>
> diminished or enhanced. Thus he concerns himself with what concerns it, giving
>
> particular attention to such things and directing his behavior accordingly.[48]

So by Frankfurt's account, "caring about" can bring about sadness if the one cared about is

diminished and happiness when the one cared about is enhanced. Also, "caring about" another is

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[47]These emotions were proposed as basic by Ekman, Paul. "Universal and Cultural
Differences in Facial Expressions of Emotion." In *Nebraska Symposium on Motivation*, edited by
J. Cole. (Lincoln: University of Nebraska Press, 1972). Although this theory has been challenged
by Prinz in his "Which Emotions are Basic." In *Emotion, Evolution, and Rationality*, edited by
D, Evans and D. Cruse. (Oxford University Press, 2004) as well as others, I will refer to his
divisions for the sake of simplicity, as admittedly, a rough and ready analysis of care and the
emotions it involves.
[48](Frankfurt 1988, 260).

constituted by sharing the concerns of the other, which can in turn motivate one's behavior. His

account lends support to my claim that care is a sentiment (and Prinz's): a disposition to feel

various emotions.

Stephen Darwall also discusses ways in which one "cares about" another, namely by

sympathizing with the one cared about, which he sometimes refers to as "sympathetic

concern."[49] He claims that empathy need not involve concern; imagining what another feels

could be consistent with indifference or even sadism. One could conceivably empathize, and yet

not sympathize, or a sadist may enjoy the pain he is imagining or mirroring. Sympathetic

concern involves concern for x's well-being for Darwall. His central thesis in the aforementioned

paper is that we have the concept of well-being (or good) *because* we are capable of care and

sympathy.[50] Such a thesis brings the importance of concern and sympathy to the forefront of

ethical theory, since it appears that all ethical theories in some way or another aim at promoting a

person's good or well-being. Thus, Darwall's pursuit may also lend support to the importance of

pursuing a clearer analysis of care as a sentiment. Both Frankfurt and Darwall have provided the

beginnings of an account of what "caring about" consists.

What I am about to present I would like to describe as a rough-and-ready, non-empirical,

but *conceptual test* for which emotions are involved in the sentiment of care: for those emotions

which may be necessary, and which not. More specifically, I hope to illustrate some of the

emotions one would expect one caring to feel for another *in particular circumstances*, i.e. the

emotions that are necessary to "caring about", while also illustrating which emotions

demonstrate care, i.e. which emotions are sufficient for demonstrating the sentiment of care in

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[49](Darwall 1998, 261).

[50]Ibid., 262. This corroborates my point as to the interconnectedness of sympathy and care, as
well as the disconnect between empathy and care.

particular circumstances. By "sufficient for demonstrating the sentiment of care in particular circumstances," I mean that if feeling x is sufficient for demonstrating care in particular circumstances, then one experiencing x is also likely disposed to feel y and z in other circumstances, where y and z are other caring emotions.[51] I shall refer to this test as the "care cancellability test," inspired by Paul Grice's test for conversational implicature.[52] Note that the examples I present are context specific. For instance, although one may feel concern for another when caring about, it is not the case that one always feels concern for another when caring about in all circumstances.

To briefly review Grice's test, Grice proposed that we could detect whether a sentence contained an implicature by attempting to cancel the supposed implicature. If the implicature is cancellable without contradiction, then it is a genuine conversational implicature deriving its meaning pragmatically. For instance, if Lucy asks John, "Are you going to the party?" and John responds, "I have to work," we would take John to have implied that he will not attend the party, although he did not literally say he would not attend the party. If this is a case of conversational implicature, we should be able to cancel the implicature without contradiction. So, if John instead responded by saying, "I have to work, but I'll stop by later in the evening," the additional clause would cancel the presumed implicature and no contradiction results; it is surely not a contradiction to work in the early evening and attend a party at a later time. However, if the

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[51]I do not intend to claim that emotions of care exhaust all possible components of care. I argue elsewhere in my dissertation that genuine care also involves appropriate desires, motives, and practices, so sufficiency is restricted to the domain of emotions.

[52] Grice, H. P. *Studies in the Way of Words.* (Harvard University Press, 1989). Many have argued that his cancellability test is not perfect, but it seems to be one of the better tests available hence, I do not claim that this test will yield conclusive results. I only hope it will provide some evidence for the necessity or (non-necessity) of particular emotions with respect to care and "caring about." Also, Grice's test required a contradiction for failure, but I will require only incoherence.

supposed implicature does not turn out to be cancellable and a contradiction results, then it is not a conversational implicature and derives its meaning semantically.

My version of the test will consist in two formulations, the first being:

1) A feels x for/with B that/because y, but A does not care about B.

Understood as:

A feels x for/with B that/because y, (the literal clause)

(A cares about B, the implied clause)

but A does not care about B. (the canceling clause)

x is a variable for an emotion (or a sentiment) and y is a variable for an action or situation. If the proposed proposition is incoherent, then the implicature that A cares about B is not cancellable and hence the emotion or sentiment occurring in situation y, *is sufficient* for demonstrating "caring about" (at *a minimal level,* I argue). More specifically, I mean that if an emotion shows or expresses that one cares, then it would follow that such a demonstration/expression is constitutive of caring about. (I will argue that the core emotion of which other caring emotions arise is concern below.) If the proposed proposition is coherent, then the implicature that A cares for B is cancellable, and hence the emotion or sentiment occurring in situation y, *is not sufficient* for demonstrating "caring about."

The second formulation is:

2) A cares about B, but A does not feel x for/with B because of y.

Understood as:

A cares about B, (the literal clause)

(A ought to feel x for/with B because of y, the implied clause)

but A does not feel x for/with B because of y. (the canceling clause)

If the proposed proposition is incoherent, then the implicature that A ought to feel x for/with B because of y is not cancellable and hence the emotion or sentiment occurring in situation y, *is necessary* to "caring about." If the proposed proposition is coherent, then the implicature that A ought to feel x for/with B because of y is cancellable, and hence the emotion or sentiment occurring in situation y, *is not necessary* to "caring about." In this way, those emotions (or sentiment) which are irrelevant to care – and those which are essential to care – will be exposed. Moreover, the foundational nature of the sentiment of care will be revealed.[53]

3.3.1   Caring About and the Basic Emotions

Let us first look at one emotion from Paul Ekman's work which may not appear to be relevant to "caring about:" disgust. Care prime facie seems to be irrelevant to experiencing disgust, and the care cancellability test will corroborate this intuition; I shall begin with formulation 1 and then 2 below for the remainder of this section.

1) Elizabeth is disgusted that Jessica touched rotten food, but Elizabeth doesn't care about Jessica.

Whether or not Elizabeth cares about Jessica seems irrelevant to whether or not Jessica can induce disgust in Elizabeth in the above example. Those we do not care about surely can arouse disgust in us. For example, whether or not one cares for a dog has no bearing on whether or not one is disgusted by that dog eating a dead rodent. The above proposition is coherent, so disgust does not seem to be *sufficient* to demonstrate "caring about" in such a context.

2) Elizabeth cares about Jessica, but Elizabeth is not disgusted that Jessica touched rotten

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[53]These cases restrict the possible objects of care to people for simplicity's sake; caring about people prime facie seems to be the most paradigmatic case of caring, as noted by care ethicists, as well as Darwall. In chapters 5 and 6, I argue that one can care about other objects in a morally relevant way, such as animals and the environment.

food.

Likewise, feeling disgust in this scenario prime facie does not seem necessary to "caring about," since the proposition above remains coherent, although it may sound peculiar. The peculiarity seems to arise from the fact that disgust and "caring about" are not conceptually connected. The test will hopefully be more illuminating when applied to Ekman's basic emotions of anger and happiness.

    1) James is angry at the person who hurt Amanda, but James does not care about Amanda.

    Feeling anger towards a wrong-doer would seem unlikely unless one cared about the victim in some way. If the victim is near and dear, anger is likely to be strong; if the victim is a stranger, anger is often still aroused in us, such as when we hear of an assault case on the news, although we are likely to feel less angry than in the previous case. Someone may ask: in what sense can one care about a stranger? This may still fall under the sentiment of care, although admittedly a kind of minimal baseline of care. If minimal care is understood as care for fellow human beings in general, as deserving respect and freedom from harm, then feeling anger plausibly demonstrates this minimal level of care.[54] Such a reaction may be difficult to comprehend without the one feeling anger to also care at this minimal level. Hence, feeling anger is arguably sufficient for demonstrating "caring about" in this context. Feeling anger without a minimal level of care seems incoherent.

    2) James cares about Amanda, but James is not angry that someone hurt Amanda.

    Could one truly be said to care about another if one did not become angry if he or she

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[54]Hume (2000) and Gould (2004) describes a similar idea of "fellow-feeling," as does Schwarzenbach (2009) in her understanding of civic friendship, although not in terms of care. Schwarzenbach, Sibyl. "Democracy and Friendship." *Journal of Social Philosophy* 36 (2005): 233-54.

were intentionally hurt by another? The above proposition appears incoherent. Others would presumably question the sincerity of such so-called "care," hence anger seems necessary to "caring about" another in this case.

1) Suzie is happy for Zoe's success, but Suzie does not care about Zoe.

This scenario, involving happiness, also appears to be incoherent, perhaps even more so than the previous cases. Feeling happiness for another may seem more common for those near and dear to us, but upon closer scrutiny, it seems that we can feel happiness for distant others as well, such as when the Berlin Wall came down.[55] This could include cases of people one is not acquainted with as well. If Sally mentioned to Cindy that a friend, (whom Cindy had never met) was graduating from school and Cindy replied "I am so happy for her!" this exclamation would seem peculiar, although perhaps not incomprehensible. Perhaps, Cindy may feel *some,* albeit a low-level of happiness in that Cindy would feel this level of happiness towards anyone's success who was deserving of respect, but such low level of happiness may indicate that minimal care is present (like in the case of caring about humanity in general above). More intense experiences of happiness appear to be reserved for cases of deeper care, such as a loved one experiencing success or even a humanitarian cause one holds dear achieving success. Hence, being "happy for" a person or cause whom one does not care about might be impossible, so happiness may then be sufficient for demonstrating "caring about" in this case.

2) Suzie cares about Zoe, but Suzie is not happy for Zoe's success.

Perhaps Suzie is Zoe's colleague. Zoe is promoted, but Suzie is not happy for Zoe, perhaps even resentful. In this case, the most likely explanation of Suzie's feelings might be that Zoe is not a person whom Suzie cares about, so a lack of feeling happiness for another could be

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[55]Thanks to Schwarzenbach for the presented example here.

an indicator of lack of care. However, it at least seems possible that Suzie could feel resentment

towards Zoe, albeit, perhaps in the short term as an initial reaction, and yet care about her at least

in a minimal sense. Perhaps, resentment may be sustained in cases where one cares less so for

the one being promoted. Ultimately, happiness may not be necessary to care about another in this

context, however, recall that happiness may be sufficient for demonstrating "caring about."

Happiness may be an important indication of "caring about," and the more dear the person or

group is, the possibility of more intense happiness arises, however, one could plausibly feel

resentment rather than happiness towards one cared about.[56]

The investigations above would seem to provide *the beginnings* of a care sentiment

account: which emotions are necessary to "caring about" and which emotions sufficient for

demonstrating "caring about." Feeling anger *in the described* case (2) seems *necessary to* care

about another.[57] Recall that feeling happiness may not be necessary when "caring about" in

particular context described above in formulation 1. The demonstration of anger or happiness

may be sufficient for demonstrating "caring about" in the given cases (the first formulations),

although further investigation of these emotions may be required to make a conclusive

determination. Anger and happiness are linked by the sentiment of care because both seem to

demonstrate "caring about" in the presented cases. Happiness for another may reveal one of the

highest degrees of "caring about" whereas anger may indicate a minimal level of care. Even if

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[56]To be clear, my analysis here considers only each of these emotions when felt *for* or
towards another. Schwarzenbach noted that I may feel happiness that X won the race because I
made a bet and will now receive a large sum of money. This case may indicate that I care about
myself – I am happy for my good fortune, but this is not a case of feeling happiness *for* the
winner, and hence "caring about." I am happy *that* X won because I will now receive a sum of
money and I am not actually happy for X.

[57]By no means do I take these investigations to be conclusive with respect to "caring about"
and the emotions involved. I have only hoped to present a possible method of analysis thus far,
as I take each example to be plausible only in the context described. Less specific and more
generalized counter examples are possible.

we claim to not "care about" someone, we may at least care that he or she continues to live and we would experience some sadness if this person died. Granted, this is a very minimal, perhaps the most minimal degree of care one could feel for another. Therefore, anger and happiness demonstrate care, and hence experiencing anger or happiness seems to be constitutive to "caring about." While anger may be necessary to "caring about" in the presented scenario, happiness was not found to be necessary.

3.3.2   A Case for Concern and Sympathy, but Against Empathy

At this point, I will implement the care cancellability test to analyze the emotions of sympathy, concern, and the sentiment of empathy. Let us consider sympathy first, followed by concern and empathy.

1) Paulina feels sympathy for Franklin because of the loss of his loved one, but Paulina does not care about Franklin.

The sympathy example does seem odd, but might it be possible to feel sad for a person's loss and not care about that particular person? Perhaps this could be possible in the following way: imagine that you have an acquaintance that you are not fond of, but you do not hate this person. If this person lost a loved one, it may be coherent to sympathize with his or her loss in perhaps a shallow sense in that you may be disposed to feel sad for anyone who lost a close loved one, but your sympathy may not be felt strongly.

I would argue, however, that some "caring about" is present even in this case. Although the sympathy felt is admittedly minimal, care too is present although minimal. Sympathy in this case appears to be a broad sympathy in that one may be disposed to feel towards any fellow human being who lost a loved one. This sense of sympathy indicates a minimal level of care for man/womankind and may be nowhere near the level one may feel towards friends and loved

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ones, but to feel any sympathy for a person, one must care on at least a minimal level.[58] Such a

minimal level of care may look something like this: not wishing x success, and perhaps even

some minimal loss or suffering (such as not being promoted), but not extensive loss or suffering,

such as losing a close loved one or losing one's own life. If one wishes extensive suffering upon

another, I think we can safely conclude that no care is present in this case. Hence, sympathy may

be sufficient to demonstrate "caring about" another, as the above example seems to indicate;

feeling sympathy is thus constitutive of "caring about." Imagining sympathy felt towards another

without caring (at least minimally) about the other seems incoherent.

      2) Paulina cares about Franklin, but Paulina does not feel sympathy for Franklin

      because of the loss of his loved one.

Likewise, if one did not feel sympathy towards one supposedly "cared about," many would

likely question the sincerity of such so-called care, hence sympathy could also be necessary to

"caring about" in this case. To be clear, I am not supposing that sympathy is necessary to "caring

about" in all contexts where the cared-about suffers a misfortune. If the cared-about person,

brought the misfortune upon his or herself due to self-destructive behavior, the one caring may in

fact become angry because the one cared-about appears to not feel as much concern for his/her

own well-being as the one caring, I would speculate. Recall that the examples I present are meant

to be context specific – on to concern.

      1) Josephine feels concern for Agnes because she engages in risky behavior, but

      Josephine does not care about Agnes.

      The emotion of concern, I will argue, is the most paradigmatic case of an emotion of

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[58](Darwall 1998, 261).

care.[59] Not only does the example of concern seem incoherent when put to the test, but it may even be contradictory, so perhaps concern is the most crucial and essential emotion involved when caring about; it may be the emotion in which other emotions explored here arise. Can concern ever be felt without care or care without concern? Such a case seems impossible to imagine.[60] Just as it is impossible to imagine a married bachelor, it is just as impossible to imagine concern for one without caring about one.[61] Hence, concern is sufficient for demonstrating care and feeling concern is constitutive of "caring about."

> 2) Josephine cares about Agnes, but Josephine does not feel concern for Agnes because she engages in risky behavior.

Could Josephine truly be said to care about Agnes if Josephine does not feel concern for Agnes when she engages in risky behavior? Again, it would appear not; hence, concern is necessary to "caring about" (in some contexts) and concern necessarily involves at least a minimal level of care, being sufficient for demonstrating care. This is not to say that concern and care are always coupled together; if the one caring learns of a great success of the one cared-about, happiness would likely be aroused in the one caring; feeling concern would seem out of place in this case. Thus far, the sentiment of care appears to be the connecting factor between the emotions of sympathy and concern in addition to anger and happiness.

> Empathy has been assumed by many to be at least an important moral sentiment,

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[59]Eisenberg N. et. al. discuss the importance of concern in promoting prosocial behavior in their paper, Eisenberg, Nancy, Richard A. Fabes, Paul A. Miller, Jim Fultz, Rita Shell, Robin M. Mathy, and Ray R. Reno. "Relation of sympathy and personal distress to prosocial behavior: A multimethod study." *Journal of Personality and Social Psychology* 57 (1989): 55-66.

[60](Darwall 1998), (Frankfurt 1988), and (Prinz 2007) all take note of concern in their accounts of "caring about."

[61]I am not claiming that care can be reduced to concern, only that concern is the most paradigmatic emotion of care or "caring about."

sometimes necessary, and at most considered to be the basis for all morality.[62] Empathy and care have become quite popular tools for both ethical and political theorists more recently, such as Gould, Meyers, and Slote. However, I hope to demonstrate that empathy may not be necessary to "care about" another nor may empathy be sufficient to demonstrate "caring about," and as Prinz and others point out, it may even be harmful.[63]

1) Ryan empathizes with Stephanie because she lost her loved one, but Ryan does not care about Stephanie.

Making such a statement may be socially strange or considered insensitive, but there is nothing inherently incoherent about making such a statement. One could certainly empathize with another's pain at losing a loved one i.e. feel his or her feelings, but despise the person experiencing the loss.[64] So empathy is not sufficient to demonstrate care, i.e. empathy is not constitutive of care.

2) Ryan cares about Stephanie, but Ryan does not empathize with Stephanie because she lost her loved one.

Can one care for someone and not empathize with the person? This surely seems plausible as well. If a loved one had a negative experience unlike one had ever experienced, one may not be able to empathize, as one cannot *imagine* how one would feel in such a situation, although one may instead feel worry, sympathy or concern. In this case, empathy also does not appear to be necessary to "care about." Hence, not only does empathy fail to be necessary to care about another in this case, but empathy is not sufficient to demonstrate "caring about" and hence, empathy is not constitutive of caring.

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[62](Gould 2004), (Meyers 1994), (Slote 2007), and (Hoffman 2000), respectively.
[63](Prinz 2011 a and b).
[64]I shall elaborate on a further example below.

Perhaps, one may argue that I have only conceived of empathy as distinct from care when they are, in reality, commonly interconnected. I do not intend to claim that empathy and care are not connected nor commonly interconnected, only that empathy is not necessary for "caring about" in many contexts and that empathy is not constitutive of "caring about." In other words, the connection between care and empathy is contingent. Although I doubt empathy is necessary to care ethics generally, I would speculate that it has tremendous value in the building and maintaining of interpersonal caring relationships or may be a useful tool in moral education. Evidence does show that it can promote prosocial behavior, which is undoubtedly valuable, but empathy does not seem to help in the harder cases where care is needed most: cases where others differ from ourselves, often distant others.[65] It seems too demanding of an emotional cognitive requirement; I can feel sympathy for those starving in Africa, and although I may never be able to empathize with such horror, I can still care.

To consider another example when one may empathize, but not care, the victim of a violent crime may not be bothered if his or her perpetrator is victimized in the same way. The victim could surely feel the feelings of his or her perpetrator being victimized, as he or she has gone through the same experience, but not only may the victim *not* care about the victimizer's pain or the victimizer as a person, the victim may even be happy that the perpetrator is having the same experience, "getting what he or she deserves." So empathy fails to be necessary to "caring about;" empathy is not constitutive of caring.

3.4 Prinz's Possible Rebuttal

Prinz would likely disagree with some of my claims; he may argue that I place too much emphasis on concern, like both Hume. For instance, Prinz notes that S. L. Neuberg's research,

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[65](Darwall 1998), (Prinz 2011a, 10).

which shows that sympathy (what I take to be closely related to concern) is not a strong moral motivator. Although I am pinning care as the underlying sentiment, intricately tied with concern, I do not intend to imply that care is more important to morality than anger or guilt. I would speculate that anger and guilt may be two of the strongest moral *motivators*, even more so than positive emotions like happiness.[66] So, both concern and anger may be equally important: concern for others may be foundational in that we are disposed to feel anger towards one who harms those we are concerned about, but the anger we feel towards the aggressor may do more or most of the work in promoting prosocial behavior. The negative emotions, like anger (or perhaps guilt), may be more closely linked to accepting norms of justice, whereas fearing for another or feeling happiness towards another may be more closely associated with care.

Still, Prinz may be dissatisfied with such an analysis; he argues that "guilt and anger seem to be sufficient for moral motivation in the absence of sympathy."[67] I maintain that concern and the sentiment of care are the underlying emotions/sentiments that spark the anger or guilt felt in the scenarios which Prinz cites as support for his claim. He claims that when you yourself have been the victim of a crime, you do not sympathize with yourself, and hence, Prinz concludes, sympathy is not the underlying emotion at play. But, as I understand sympathy and concern to be closely related, if one feels anger towards one's aggressor, I would argue, then one must feel some self-concern (caring about oneself) to feel anger towards one's aggressor. There are cases where the victim of a crime may not feel anger or be conscious of his or her anger towards the aggressor, such as is common in many cases of domestic violence against women.[68] The women often will blame themselves for being beaten and excuse their partners' behavior, making claims

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[66]Ibid.
[67]Ibid.
[68]Walker, L. E. A. *The Battered Woman Syndrome* (New York: Springer, 2000), 325-39.

such as, "I shouldn't have made him angry." Hence, I would speculate that women in these situations do not feel anger towards their partners/batterers in such situations because of a severe deficiency of self-care/concern/self-esteem – in turn pointing to the foundational nature of concern. Furthermore, anger often does not occur in isolation when an injustice occurs. Anger towards an aggressor is often coupled with sympathy for the victim. Hence, it is unclear whether or not anger is a sufficient motivator since it is often coupled with sympathy and moreover, as my analysis indicates, anger may need sympathy/concern/care to get off the ground. Hence, care may be albeit an indirect moral motivator, but nonetheless a critical foundation for motivating other emotions.

Prinz also notes the difficulty with feeling sympathy towards everyone and that we commonly feel sympathy more towards the near and dear, leading to possible biases. With regards to his first claim, again, I would urge that we *do* feel a general concern for our fellow human beings,[69] if we are angered by seeing injustices, (and perhaps such wide concern grows out of our concern for those near and dear to us). We may have a difficult time explaining why we feel anger in these cases without caring. However, I would not deny Prinz's second claim that concern could lead to biases. Concern could undoubtedly lead to objectionable biases, but I am not claiming that the emotion of concern can do all of the moral work, only that concern is a foundational emotion leading to other emotions, more morally motivating emotions like anger. Although I argue that concern and care are the spring board for other emotions, I would agree that such emotions/sentiments need "temperance" to avoid prejudices and other unjust biases.

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[69](Hume 2000.) Such general concern is argued on the basis of civic friendship in Schwarzenbach's, 2009 chapter 4, and 2005.

3.5 Doubts about the Role of Empathy in Morality

Both Darwall and Prinz also take note of the disconnect between care and empathy. First, I will examine Darwall's perspective, followed by Prinz's, lending further support to the conclusions of my investigations. Empathy could be consistent with indifference or even sadism, similar to the example I illustrated above.[70] Another noted problem with empathy arises if we do not think that a person's feelings are warranted, then empathizing becomes difficult.[71] If one does not understand another's feelings or reaction and hence finds such a reaction unwarranted, then one may not be able to empathize with another. For instance, if Lucy failed to pick up her socks from the floor, and Lucy's partner exploded in anger as a result, Lucy would take her partner's feelings/reaction to be unwarranted. She does not understand her partner's feelings, hence she cannot empathize with her partner in this scenario.[72] If empathy is emphasized as a critical sentiment to promoting prosocial behavior, such common scenarios as the one described would become problematic, as seeing someone as "different" from yourself, we are less likely to help or behave in a prosocial way. But sympathy and concern may not share the same fate in this context; one may not share or understand another's feelings given the particular circumstances, but one may feel sad that the other is going through this experience and/or concern, which in turn could motivate one to help the other.[73] Hence, sympathy and concern appear to be more paradigmatic to care than empathy.

Darwall examines numerous research studies in support of his claims, but I will look

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[70](Darwall 1998, 261), corroborating my point as to the interconnectedness of sympathy and care, as well as the disconnect between empathy and care.

[71]Ibid., 269.

[72]Although she surely cares about her partner. Therefore, care does not entail empathy.

[73]In the socks case, Lucy may not empathize with her partner, but realize that because her partner's reaction appears unwarranted that perhaps there is something else underlying the reaction (such as stress at work let's say) and hence she could instead sympathize with her partner.

more closely at his analysis of C. D. Batson's work. Batson performed a study where students listened to an audio tape of "Carol," a fellow student who would miss one month of school due to hospitalization. Some students were in a "difficult to escape" condition where they would see Carol in a week; others were in an "easy to escape" condition, where they would not encounter Carol. Subjects of the study who imagined Carol's feelings (heightening empathy) were 71% more likely to help her, even in the "easy to escape" condition.[74] Batson claims that these results are due to the subjects wanting to help Carol, to increase her welfare, and not from wanting to relieve personal (vicarious) distress,[75] but Darwall offers the alternative explanation, speculating that this behavior is due to sympathy, arising out of empathy. Empathizing with Carol, brought about personal distress, then shifted to distress directed at Carol, generating concern for her and hence sympathy towards her. Ultimately, sympathy may be doing the work of creating the helping/prosocial behavior.[76]

Darwall further understands sympathy as a form of concern "for a person for his own sake."[77] In other words, sympathy arises out of concern for another's well-being. Moreover, Darwall believes that care is the desire that the person of concern "fares well."[78] Hence, Darwall seems to conceive of care, concern, sympathy and the concept of well-being to be deeply interconnected, similar to my claims that care underlies the emotions of sympathy and concern. Prinz also considers the importance of concern, while arguing against the importance of

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[74](Darwall 1998, 273).

[75]Personal (vicarious) distress involves feeling (or "catching") another's feelings, and then wanting to relieve (or comfort) oneself of those feelings.

[76]Ibid., 274. Prinz argues that concern and not empathy is doing the real work in Batson's studies 2011b.

[77]Ibid. Similarly, Schwarzenbach also understands Aristotelian friendship in part as "wishing each other well, for the other's sake" (2005, 234 and 2009, 44).

[78]Darwall, Stephen. *Welfare and Rational Care* (Princeton: Princeton University Press, 2003).

empathy.[79]

In his paper, "Against Empathy," Prinz argues that empathy is not foundational to morality, but rather emotions such as anger, disgust, guilt and admiration are – arguing against Slote's account of care and empathy.[80] Prinz takes note that the empirical research of Rozin et al., supports arguments that such negative emotions are involved in moral judgments, specifically disapprobation.[81] Based upon the cancellability test, I concur that such emotions are involved in judgments of disapprobation, but I have argued, based upon this test, that one will feel these negative emotions only if one cares (on a very minimal level) about the victim, as in at least a general concern for human welfare. Prinz directly questions the Humean idea of empathizing with "mankind," as would I, but as I have suggested here, I think concern for "mankind" is not only possible, but necessary for experiencing the negative emotions of disapprobation.[82]

In his closing remarks, Prinz reflects on the promise of concern as an important motivating emotion, much more so than empathy, since concern often involves fear and anger. In addition, he claims that similarity and proximity are not as important for feeling concern, as they are with feeling empathy, thereby avoiding empathy's pitfalls. Finally, concern can be felt for both groups and the environment, whereas, proponents of empathy such as Slote may have difficulty explaining how we could empathize with a group (rather than individuals) or with the destruction of the rain forest.[83]

So for both Darwall and Prinz, empathy is not an essential sentiment to the realm of morality, and in the worst case, may be harmful, whereas the emotions of sympathy and concern

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[79](Prinz 2011a).
[80]Ibid.
[81]Ibid., 5.
[82](Prinz 2011a, 6).
[83]Ibid., 14.

look promising in terms of their contributions to morality. My investigations buttress these claims, linking sympathy and concern together by the sentiment of care.

3.6   Implications for Gould's, Slote's, and Meyers's Theories

Section 3.5, if correct, has far reaching implications for Gould's, Meyers's and Slote's theories, namely, that each has misidentified the most important moral (or political) sentiment as empathy. For instance, Gould speculates that terrorists lack political empathy.[84] Indeed, this is likely true, but it is not the whole story. As I noted in section 3.2, research has shown that those lacking the ability to empathize are also emotionally deficient in other ways: such as their capacities for fear and sadness. Additionally, I argued above that the emotional capacities for fear and concern may be the most important in promoting prosocial behavior, as opposed to empathy, hence Gould may have misidentified the most critical sentiment as empathy. The emotion of concern may be able to do some of the work that empathy does on Gould's theory, possibly avoiding the noted problems to some degree, particularly the difficulty in empathizing with those different from us and the danger of empathy encouraging too much partiality; instead of empathizing with the viewpoints of others', we could be concerned or concern ourselves with others' viewpoints.[85] Additionally, recognition of rights could grow out of concern for others (perhaps more easily), than attempting to cultivate social empathy (solidarity) with others.[86]

To the degree that I have provided evidence, as well as others, against the centrality of empathy to morality, Meyers's and Slote's theories may fail in the end. Both clearly distinguish between the importance of empathy from sympathy, arguing for the necessity of empathy, hence

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[84](Gould 2004, 254).

[85]But not people, of course, as concern for terrorists themselves may be more difficult to come by than concern for their concerns and beliefs.

[86](Gould 2004, 257 and 2007).

one may presume that simply replacing empathy with sympathy or concern in either of their theories would yield inconsistencies or at least incompleteness, but closer scrutiny could reveal a different outcome. Again, I would speculate that concern could possibly do at least some of the work of empathy on these theories. Meyers and Slote both take concern to be a necessary aspect of empathy, so concern is already an integral part of their theories. Perhaps concern (or even sympathy) are already doing much of the work in their theories and they have fallen into the same conflation as others in combining sympathy, concern, and empathy.[87] And where concern may be inadequate, perhaps sympathy could pick up some of the slack. For example, rather than empathizing with another's feelings, we should sympathize with them, based upon a general concern for others. Such a reconstrual, may then leave their theories intact, but of course this would require much further investigation.

3.7   Care: Moral or Non-moral?

Finally, as noted in section 3.2, Prinz assumed that care, and the emotions involved with it, lay outside of the moral realm; this assumption is important to notice as similar assumptions could account for why care and its ethics has enjoyed less attention in philosophy, relative to other moral traditions. Although I have hoped to show that care is certainly involved in moral domains, I do not intend to draw the line as to where *exactly* we cross into the non-moral domain. I will argue that the problem of drawing the distinction between moral and non-moral is pervasive and not unique to care ethics and hence needs to be dealt with separately from my investigations.[88]

In his book, *The Emotional Construction of Morals*, Prinz describes how he distinguishes

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[87]Psychologists such as Batson, for instance.
[88]Schwarzenbach distinguishes a necessary requirement for moral care, that care partake in reason, but she does not delineate a sufficiency requirement, (2009, 112-13).

between moral and conventional rules and considers possible objections to this distinction. He claims, "specific etiquette violations are immoral to the extent that they are violations of some more fundamental norm," like respect for persons.[89] More specifically, "a norm is moral if it is a grounding norm or if it derived from a grounding norm without necessary appeal to a premise about customs. A norm is conventional if it depends on appeal to customs."[90] A grounding norm typically needs no explanation, according to Prinz.

Although this may be the beginning of a moral versus conventional distinction, it may not yet be able to delineate the more complex and difficult cases. I will present a few case which may pose problems for Prinz's distinction, where the moral/conventional distinction blurs with respect to Kantian ethics and consequentialism, hence showing that drawing this distinction is not unique problem within care ethics.[91] If determining which situations are moral and which are not is pervasively problematic, then determining which care may be considered moral or non-moral cases of care will also turn out to be difficult.[92]

The example: I get angry when someone cuts in front of me in line, but many may not consider this a moral transgression, only a conventional one; the person who cut in front of me is not immoral, only rude. Anger may be aroused because I perceive the transgressor as violating norms of fairness, indicating that it is at least partly a moral rule to not cut in line. However, I would speculate that the unacceptability of line-cutting is only a custom and not a universal

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[89](Prinz 2007, 126-27).

[90]Ibid., 127.

[91]Or, as I have phrased the problem previously in section 3.2, distinguishing moral care from non-moral care.

[92]Kelly, Daniel; Stich, Stephen; Haley, Kevin J.; Eng, Serena J. & Fessler, Daniel M. T. "Harm, Affect, and the Moral/Conventional Distinction." *Mind and Language* 22 (2) (2007):117–131 also cast doubt on the moral/conventional distinction.

norm, as studies have shown that not all cultures practice line-formation.[93] So is "no line-cutting"

a rule of etiquette, since it may appeal to custom, or is it moral, derived from a grounding norm

of fairness for Prinz? At this point, the answer may be difficult to determine. Hence, Prinz's

distinction could run into trouble in determining whether the rule "no line-cutting" lies in the

moral or conventional domain, thereby demonstrating vagueness within his own distinction.

Interpreted in a Kantian fashion, universalizing line-cutting as a norm may not turn out to

be irrational in itself, however, one could not rationally will a world where line-cutting was the

norm. So for Kantians, line-cutting appears to be a moral transgression. Under consequentialism,

I may have been harmed by someone cutting in front of me (for the purposes of his or her own

convenience), albeit in a small way, in that I now have to wait longer and the harm I face could

outweigh the gains of the line-cutter. Again, for the consequentialist, line-cutting could be a

moral transgression. However, as noted above, research suggests that norms of line-cutting are

rules of etiquette rather than of morality, even though construed in Kantian or consequentialist

terms, line-cutting may turn out to be a moral discretion. Therefore, drawing the

moral/conventional distinction is unclear in this case. Drawing the distinction seems problematic

for both Kantians and consequentialists. Ultimately, care theory is hardly the only ethical theory

which does not distinguish clear moral/conventional distinctions.

The next case may be problematic for Prinz's distinction also. If someone cuts in front of

me in traffic and causes an accident because I had to slam on my breaks, would this act be

immoral? If so, what if an accident didn't result, would the act be immoral? These are still

instances of line-cutting, but the ramifications are much greater; many of us may be inclined to

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[93]For instance, people do not customarily form a queue at bus stops in Jerusalem. Leon,
Mann. "The Effect of Stimulus Queues on Queue-Joining Behavior." *Journal of Perosnality and
Social Psychology* 35 (1977): 437-42.

say that these actions are immoral, but Prinz's distinction might not allow such a construal if "no line-cutting" is determined to be partly grounded in custom. These cases *may* illustrate that distinguishing moral from conventional offenses is difficult to determine in general, not only within Kantian ethics, and consequentialism, but also within a meta-ethical framework, such as Prinz's.

The last example has already alluded to the depth of this issue, but other cases of line-cutting may be more obviously immoral, and for which Prinz could have difficulty accounting. If I cut in line waiting for an organ donation because I am in a position of money and power, would this case be immoral? Presumably, most would be inclined to say that this is a moral discretion, but again Prinz may have to reject this interpretation if line-cutting is a cultural custom. Where exactly to draw the moral/non-moral line between the first case of line-cutting and this case is unclear at best. What if one cut in line to receive a number at school drawings in hopes of registering one's child at a better school? No one will die in this case; is this case of line cutting immoral? All of these cases seem to have in common *a violation of fairness*, but all seem to vary in the degree of gravity, so again, where do we draw the line between conventional and moral and how do we do so in a non-arbitrary way? Fairness may be the grounding norm in each example, but arguably, line-cutting could be customary. My point here is that drawing the distinction between moral and conventional rules is problematic within other ethical theories besides care ethics, as well as with Prinz's own meta-ethical distinction. This problem is not a unique problem to the ethics of care, as Prinz seems to suggest.

3.8   Conclusion

In this chapter, I have set out to begin describing one aspect of the phenomenon of care: the emotions of care, which I commonly refer to as "caring about." I first established the

importance of emotions in ethics, regardless of one's meta-ethical leanings (rationalist or

sentimentalists). I then began my investigation into the sentiment of care, reviewing previous

literature first and then went on to develop a conceptual test to determine the emotions and

sentiments necessary to caring and sufficient for demonstrating care. The cancelability test, as I

referred to it, found anger, sympathy and concern to be necessary to caring while, happiness was

discovered to be sufficient for demonstrating care but not necessary. The test further revealed

that empathy is neither necessary to caring nor sufficient for demonstrating care, while Prinz and

Darwall corroborate this claim. I also consider and respond to some possible objections to my

claims that concern and care are foundational to other moral emotions. I then go on to draw out

the implications of my conclusions regarding empathy with respect to theorist who have situated

empathy at the center of their theories. Finally, I consider and respond to the possible objection

that care may not be morally relevant as it is a non-moral concept as well. Much more analysis

and investigation into these matters is surely needed but I have only hoped to begin sketching a

clearer account of the sentiment of care from a care ethical perspective. However, in the next

chapter, I go on to consider so related questions. Might feeling caring emotions always be

necessary when caring? What role do emotions play in ethical reasoning and action? These are

only a couple of the questions I take up in the next chapter, "Care as a Virtue."

4   Care as a Virtue

4.1   Introduction

As I argued in the last chapter, "Care as a Sentiment," emotions are a critical component of any ethical theory. The sentiment of care, however, may be the most foundational of all the emotions and sentiments of ethics. The second aspect of the phenomenon of care that I shall now investigate is care considered as a virtue. As I understand care as a virtue, it consists of a disposition to act in a caring way.[1] By "acting in a caring way," I mean acting in the way in which I described genuine care in chapter 2. To recall, I proposed a preliminary definition of *genuine caring* (acting in a caring way) whereby, "care" means a) at least to prevent uncontroversial impending harm, typically meeting fundamental needs, but also, ideally promoting flourishing for the sake of the one cared for, including, when possible, promoting autonomy (when persons are objects of care), while b) also respecting the autonomy of both the care-giver and care-receiver.[2]

First, I need to qualify what I mean by 'virtue' for my similarities with Held end at considering virtue as a disposition.[3] According to virtue theorists, virtuous dispositions are related to virtuous acts. Many agree that virtuous dispositions tend to produce virtuous acts, accompanied by the appropriate virtuous feelings, emotions, motives and desires. However, virtue theorists disagree about the nature of this relation. The dispositional view (the dominant

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[1]Held also understands virtue as a disposition, a disposition of individuals (2006, 51).

[2]By "promoting" autonomy, I mean to encourage the autonomy of the cared for, while by "respecting" autonomy, I mean that one ought not to interfere or limit autonomy of other's they are in relations with.

[3]Much of my investigation will consider Held's views on care as a virtue as she has discussed it (2006, 35, 51-53).

view among virtue theorists) takes dispositions to be primary.[4] On the dispositional view, *virtuous acts can only be produced by a virtuous person* with a stable virtuous character. Held seems to understand virtue in this way.[5] However, *the occurrent-state view takes acts as primary* and conceives the virtuousness of acts as not necessarily deriving from a virtuous disposition.[6] Thus, occurrent-state view theorists identify virtuous persons by their tendency to produce virtuous acts and allow that persons lacking stable virtuous character can nonetheless perform virtuous acts.[7] I am inclined to adopt the latter, rather than the former view of virtue, contrary to Held. One reason to adopt the occurrent state view is that it is more consistent with our everyday moral discourse. Thomas Hurka describes the following example.

> Imagine that your companion stops to give $20 to a homeless person, apparently from concern for that person for her own sake. Do you say, 'That was generous of you' or 'That was generous of you on condition that it issued from a stable disposition to act from similar motives in similar circumstances'? Again, surely you say the former.[8]

Ultimately, we do not refer to stable dispositions of character when attributing virtue or vice to persons in everyday discourse, rather we attribute virtue or vice to persons based upon occurrent motives and actions. Virtuous motives, emotions and desires still obtain for virtuous acts on the occurrent state view, the differencing being that these are not *necessarily* the result of stable

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[4]Hurka, Thomas."Virtuous Actions, Virtuous Dispositions." *Analysis* 66 (2006):69. The dispositional view is also the classic Aristotelian view.

[5]Annas, Julia. "Virtue Ethics." In *Oxford Handbook of Ethical Theory*, edited by D. Copp. (Oxford: Clarendon Press, 2005). Hursthouse, R. *On Virtue Ethics* (Oxford: Clarendon Press, 1999). Watson, Gary. "On the Primacy of Character." In *Identity, Character, and Morality: Essays in Moral Psychology*, edited by O. Flanigan and A. O. Rorty. (Cambridge: MIT Press, 1990). (Held 2006), and (Slote 2001).

[6](Hurka 2006, 70).

[7]Ibid.

[8]Ibid., 71.

character traits.[9] The performance of a virtuous act is, however, not sufficient for demonstrating that a person is virtuous overall. In order to determine if one is virtuous on the occurrent state view, all actions of the agent need evaluation.

I will elaborate on the advantages of the occurrent-state view, in section 4.2 below, and then clarify further what an account of the virtue of care involves broadly, first in terms of caring actions, and then I will extend the account to apply to persons. The virtue of care, like other virtues, involves the appropriate emotions, desires, motives, and reason. I will address each of these components individually in detail.

In short, I argue that care as a virtue involves experiencing caring emotions (discussed in chapter 3) and desires (at least in part). I take these emotions to be learned by both direct instruction (as did Aristotle) and indirectly, via experience. More specifically, I argue that care as a virtue involves wanting or desiring to do your caring duties for the sake of the one cared for,[10] which I shall further argue is a necessary component of one's motivation to act, if one genuinely cares. So too, I argue that the virtue of care involves reasoning, deciding when, and how best to practice care and following through on one's caring deliberations – that is, acting accordingly. Virtue theory offers a useful framework from which I shall borrow and I attempt to describe the theoretical framework of an ethic of care, again filling in a partial explanation of what the ethics of care consists.[11] Finally, virtue theory also emphasizes the notion of an ideal at which to aim, another useful and arguably implicit conception present within care ethics. For presumably, one

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[9]There remains an epistemological question as to how we can determine others' motives or even our own, but such a question is beyond the scope of this project. Furthermore, such a question may presuppose the existence of virtues, a claim in which I remain neutral.

[10]Caring duties are delineated by the definition of care I proposed, preventing harm, meeting needs, promoting flourishing, etc. I elaborate further on caring duties in the next chapter.

[11]Some terminology I utilize does depart from the typical use in virtue ethics, however, specifically with respect to my use of 'continence,' elaborated upon below.

who genuinely cares *ought to aim at the best care possible* and not merely minimal care, but I do go one to argue the less-than-ideal care remains care.[12] By elaborating upon what the virtue of care consists, an ideal can be established at which to aim. However, to be clear and to limit my claims, I do not intend to argue for the metaphysical claim that dispositional virtues are genuine psychological states which can predict behavior. I argue that one can care in the best way possible by clarifying in what the ideal of care consists. Held too argues that care is an ideal which consists in clusters of practices and values.[13] My aim here is to clarify some of the component clusters of caring.

4.2   Care as a Virtue: A Conceptual Analysis

First, I describe Slote's (2001) detailed account of care as a virtue, which I argue is ultimately mistaken. Slote argues for an agent based account of virtue, which he explains as follows:

> An agent-based approach to virtue ethics treats the moral or ethical status of acts as entirely derivative from independent and fundamental *aretaic* (as opposed to deontic) ethical characterizations of motives, character traits, or individuals.[14]

In other words, whether one performs a virtuous act is entirely determined by one's (non-occurrent) motive, which determines one's stable character. Like many virtue theorists, Slote takes dispositions to be primary in his agent based approach, although he discusses "inner strength" rather than dispositions.[15] In short, Slote argues that the presence or lack of long-standing stable caring motives determines the virtuousness or goodness of an act. Slote explicitly

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[12]Contrary to the common virtue ethical conception of deficiency and continence.
[13](Held 2006, 36, 40).
[14]Ibid., 5
[15]Ibid., 19.

rejects evaluations based upon singular occurrent motives and urges that actions should be evaluated based upon their relation to "an agent's total overall motivation."[16] This passage reveals Slote's commitment to a dispositional view, a view I reject for reasons mentioned above (4.1), but I also provide further reasons below.

As mentioned, Held too rejects Slote's account of care as a virtue and prefers to understand care as a value in part.[17] In fact, she finds all virtue based accounts unappealing for several reasons. First, she argues that virtue ethical accounts are too centered on the individual and contrastingly urges that *caring relations should be seen as primary in practice*. Held worries that the focus on individual dispositions or motives loses sight of one of the most important aspects of care, care as practice between persons.[18] Ultimately, it seems that Held wants to guard against the possibility of being able to have the virtue of care (a caring disposition, acting from caring motives), yet not in effect practice care or not practice care well in relations. That is, care must be revealed in actions between persons, however Slote's account fails to appreciate and emphasize this critical aspect of an ethic of care. Held suggests that care is "the characterization of a social relation . . . and social relations are not reducible to individual states."[19] For instance, two individuals may both exemplify virtuous dispositions, but within the context of their relationship the relation may be hostile and wrought with conflict.[20] Slote's view cannot account for the distinction between virtuous caring individuals and virtuous caring relations. Care as a value for Held consists in valuing caring persons and attitudes, hence, she does not discount all aspects of dispositional virtue, rather she urges that *the focus should lie in relations, rather than*

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[16]Ibid., 33.
[17](Held 2006, 35, 51-53).
[18]Ibid., 55.
[19]Ibid., 42.
[20]Ibid., 53.

individuals. Finally, Held agrees that theoretically, a caring motive is necessary for one to be a caring person, as does the virtue theorist, but she disagrees with Slote that a caring motive is sufficient for being a caring person because being a caring person also involves caring practice and caring emotions.[21]

I sympathize with Held's reservations regarding a conception of care as a virtue on the dispositional account, but I believe that not only does an occurrent state view eschew her worries, but that such an analysis can provide *a better understanding of care* – a project Held herself suggests we need.[22] First, I address below the issue of which ought to be taken as primary in practice: caring persons or caring relations. Instead of arguing for the primacy of either, I urge that caring persons (autonomous persons) and caring relations are equally important and that neither ought to be seen as primary. I disagree with Held here; by putting our relations first in practice, one may not recognize bad relations, either paternalistic or even abusive.[23] For instance, the one caring may lose light of his or her own self and autonomy, sacrificing his or her self-care for the sake of the relation as a whole, and in the worst case, continue to do so when the relation becomes abusive. Conversely, individuals ought not to take precedence over relations because the focus and aim of care is the development of caring relations (on Held's view and my own). By only focusing on the individual, we could lose sight of this aim, and here I agree with Held. Furthermore, persons can only become autonomous individuals via receiving care as children, so again, by taking individuals as primary, we would discount the importance of relations.[24] I argue

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[21]Ibid., 51.
[22]Ibid., 37.
[23]As I will argue in chapter 5, by implementing self-care checks and continuous re-evaluation, one can avoid falling into bad relations but only by appreciating and paying mind to one's own individuality and autonomy.
[24](Held 1993, 195), Biaer, Annette. *Moral Prejudices: Essays on Ethics* (Harvard University Press, 1994). Clement, Grace. *Care, Autonomy, and Justice: Feminism and the Ethic of Care* (Westview Press, 1996).

in the next chapter for the promotion of caring relations, but *not* at the expense of one's own individual self-care. Thus, by taking either caring persons or caring relations as primary, difficulties result. Relations and individuals should be seen as equally important and neither is primary over the other, practically speaking.

Held also has reservations regarding care as a virtue, understood as a disposition, theoretically speaking. Again, I agree with Held in her criticism of dispositional views of virtue, but I now argue that an occurrent state view avoids these worries (contra Slote's dispositional view), while further supporting the importance of caring practices generally. Since the occurrent state view takes acts as primary rather than dispositions, Held's worry that virtue accounts loses site of the importance of action and practice is circumvented. Individuals and their overall, longstanding dispositions or motives are not the focus, fundamentally, and by attending to acts primarily, such a view keeps one of Held's main concerns at the center: practical actions. On the occurrent state view, the singular, occurrent motive is the subject of analysis for each act, as opposed to Slote's view where the person as a whole is the subject of consideration. So a person lacking a stable disposition (or motives) could perform a virtuous act on the occurrent state view, as long as the person acts from appropriate motives on that particular occasion. Both views agree that virtuous persons tend to produce virtuous acts, but on the dispositional view, only virtuous persons can perform virtuous acts. Although motives remain (in part) the subject of evaluation (in terms of whether an act is virtuously caring), whether the act was caring (care done well) is a further subject of evaluation. This should not pose a problem for Held since I only take this explication of virtue as a partial filling in of the theorizing of care. Habituated motives surely do not tell the whole story as Slote claims. Caring practices are a critical aspect of an ethic of care, but so too are emotions, reasoning and desires.

Held may likely still object to understanding care as a virtue via an occurrent state view, by arguing that such a view reduces social relations to states (quoted above). Again, however, I would urge otherwise. Occurrent states are only *one aspect* of care and caring relations. Considerations of autonomy and caring practices themselves, as we shall see, also play a critical role. The richness of social relations cannot be captured fully in terms of virtue and their occurrent states, but I think, they reveal an important aspect of the conception of care. So I agree with Held that a completely reductive account of care in terms of states would be mistaken, however, I think that exploring virtuous and caring occurrent states holds explanatory value in terms of developing a more comprehensive account of in what caring consists. Furthermore, individuals are the very constituents of social relations, hence my aim is to gain a better understanding of caring individuals situated in relations. By the end of this chapter, I hope to show that analyzing care in this way will give a clearer picture of in what care consists. Sections 4.3 and 4.4 explore the nature of caring persons and caring attitudes, further developing the moral theorizing of care.

4.3   Virtuous Action and Virtuous Caring Action

The account I am presenting relies on a number of fairly standard notions of in what virtuous *acts* consist *generally* from Kristine Korsgaard, Hurka, William David Ross, and Aristotle.[25] First, I sketch an account of virtuous acts generally, and then build an account of caring virtuous acts from this basis.[26] Many agree on much of what a virtuous act involves theoretically and psychologically. Below I have listed and described the generally agreed upon

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[25]Barring the requirement for stable character traits.

[26]I only intend this account to be the beginnings of a full-fledged account of the virtue of care, sketching the basic structure and suggesting directions in which the details may go, but the development of a complete account is beyond the scope of this dissertation.

components of a virtuous act, but I have also included some novel aspects, which I develop with respect to virtuous care.

Virtuous actions involve: 1) appropriate emotions and feelings, 2) appropriate desires, 3) appropriate motives, 4) reasoning and reflection, and finally, 5) the action itself.

1) *Appropriate emotions* (i.e. sympathy) occur as reactions to stimuli, for instance, seeing someone in need, and sympathizing with him or her. A*ppropriate feelings* (i.e. pleasure or pain) may accompany the action taken, i.e. taking pleasure in helping.

2) *Appropriate desires* consist in wanting to perform a specific action, i.e. help pick up papers for someone. I refer to this kind of desire as a 'supporting desire' for the account I develop, distinct from the desires delineated below.

3) *The appropriate motive for action* can be cashed out in different ways, traditionally, in terms of either beliefs (Kantians) or desires (Humeans). I argue for a desire based account below and refer to this kind of desire as a 'primary desire,' the vehicle of action. I argue also that motives are complex, jointly consisting in beliefs, desires (always primary, sometimes supporting), as well as emotions and feelings, while rejecting the belief-desire model of psychology.[27]

    1. The appropriate content of a virtuously caring desire (I will argue) consist in desiring to fulfill one's caring duties for the sake of the one cared for.

4) *Reasoning and reflection* consist in the psychological methodology involved in deciding upon which of the possible actions under consideration is virtuous.

5) *The action itself* is the behavior performed, the action taken towards the one cared for and

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[27]Korsgaard, Kristine. *The Constitution of Agency* (Oxford University Press, 2008, Chapter 7), Ross, W. D. *The Right and the Good* (Oxford: Clarendon Press, 1930) and Aristotle (NE).

evaluation of the action.[28]

Aristotle and Korsgaard discuss each of these components with respect to virtuous action, while Ross focuses upon the role of desires and motives.[29] For instance, the virtuous person takes pleasure in doing the right thing, according to Aristotle, while Korsgaard would concur. Desire is also a component of virtue for each theorists, although the centrality of its role varies among them. For instance, desire is central to Ross's account as desires are the source of motives. Desires are only of peripheral importance on Korsgaard's account, as reasons, namely beliefs about what is moral – derived from the categorical imperative – are the source of motives on her account.

By contrast, a continent act consists in the performance of an act that resembles a virtuous action, but the agent struggles to do so, lacking the appropriate desires and/or emotions and instead experiences conflicting desires. So both virtuous and continent actions consist in helping behavior. However, the agent performing the continent act struggles psychologically to help, whereas the virtuous agent takes pleasure in performing the action or is at least not pained by it.[30]

For example, let us say that Agnes observes a woman drop her papers, while walking down the sidewalk. Agnes feels sympathy for this person (fulfilling 1) and wants to help pick up her papers (fulfilling 2). She briefly reflects (fulfilling 4) and is motived (fulfilling 3) by either a)

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[28]Tronto (1996) argues that the care giver ought to reflect upon the results of caring action and the care receiver's response. As Tronto (and others) have developed this stage of caring, I focus on the previous components delineated above.

[29]I will describe a caring action in section 4.4 and care as a practice in chapter 5.

[30]Aristotle makes the point that the virtuous person need not always take pleasure in acting virtuously, as some actions may be characteristically unpleasant. However, the virtuous person feels very little or no pain in doing so (NE, Book II, Chapter 3, (1104b3–13)). Kraut, Richard. "Aristotle's Ethics." Edited by Edward N. Zalta. *The Stanford Encyclopedia Philosophy* (2012) http://plato.stanford.edu/archives/win2012/entries/aristotle-ethics.

a desire to do her duty for the sake of the woman who dropped her papers (a possible explanation Hurka or Ross[31] may offer) or b) a belief that it is her duty to help for its own sake (a possible explanation Korsgaard[32] may offer). Agnes then helps the woman pick up her papers (fulfilling 5). Agnes has performed a virtuous act in this case since she has fulfilled all 5 requirements. Lucy also helped the woman who dropped her papers (5), reflected (4) and was motivated (3) by a desire to do her duty or believes it is her duty to help for its own sake. However, Lucy is in a foul mood. She did not feel sympathy for the person (or perhaps felt it only weakly) (lacking 1), and she did not want to help at first (lacking 2), but upon reflection (4) she wanted to or believed (3) it was her duty. Since Lucy only fulfilled requirements 3 and 4, her duty action was continent and helpful but not virtuous. Continence falls short of virtue. Even if Lucy did feel sympathy weakly (fulfilling 1), but she still did not want to help initially because she was in a foul mood (failing 2), struggling to help, her action remains continent and helpful only, rather than virtuous.[33] I surely have not exhausted all of the possibilities with respect to the various elements of a virtuous act (1-4), which obtain in this example, but illustrate further examples throughout this section to clarify the distinctions between 1-4.

Aristotle also draws the distinction between incontinent acts and vicious acts, neither of which are virtuous nor do they resemble virtuous action. In the former case of incontinent acts, the agent gives in to his or her passions upon deliberation, but contrary to what practical reason dictates, or the agent may fail to deliberate altogether, acting solely on impulse or urges. In the latter case of vicious action, the agent fails to value virtuous activity and instead values vices, which guides his or her actions.[34] These latter distinctions of Aristotle, however retain peripheral

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[31](Hurka 2006); (Ross 1930).
[32](Korsgaard 2008, Chapter 7).
[33]Aristotle introduces the distinction between the virtuous and the continent in NE, Book VII.
[34]Ibid.

relevance to my account of care as a virtue, hence they will be discussed only briefly below.

Whether or not this is an empirically accurate picture of the way virtuous "caring people" actually think and feel is a different question, but I would hope that my account might be modestly accurate in terms of a "deep structure" of how caring people actually do think and what they think about. I now briefly address each component of virtuous action (1-4) as to the plausibility of each obtaining when a virtuous caring person acts.

The necessity of emotions to our thinking and acting, particularly when caring about something or someone, has been argued for explicitly in chapter 3, so we have reason to accept that caring persons *do experience caring emotions*, (1). Also, taking pleasure in performing a virtuous action, prime facie may obtain with respect to a caring person's psychology. Blum, Held and others indicate that care ethics requires more of us than is required by deontological ethics.[35] For instance, although encouraged, Kant does not *require* that one take pleasure in performing one's duty in order for such action to be morally praiseworthy.[36] When conceiving of care in its most ideal form, it seems that *an ideal care giver would take pleasure in performing caring actions*, those not categorically unpleasant, at least. A care giver who dislikes care work or feels neutral about or numbed by care work, even when not categorically unpleasant, constitutes less ideal care (continent care), presumably.[37] Such feelings may be likely when caring for others is intense and/or constant.

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[35](Blum 1980), (Tove 2008, 61), (Held 2006).

[36]*The Groundwork.* In *Doctrine of the Virtue,* Kant does require agents to take pleasure in performing virtuous acts.

[37]Whereas Aristotle would not consider a continent act caring, I depart from this understanding of continence. The history of care literature continuously emphasizes the difficulty of performing care work and labor and argues that it is commonly undervalued by traditional ethical theories and society in general. Hence, to remain consistent with these tenets of care, I consider continent caring acts to remain a form of care, albeit it a less ideal form, which retains value.

Closely related to caring emotions and taking pleasure in performing care work (1), if one is an ideal caring person, such a person would desire to do the care work (fulfilling 2); we may have some reason to think someone like Mother Teresa had such desires – the desire to feed the hungry. Consider for a moment that she did not want to feed the hungry and was simply acting from duty. Might we have a different view of Mother Teresa if it was the case that she did not want to feed the hungry, but acted solely from duty? Even if not, it would seem prime facie that a Mother Teresa, who both wanted to feed the hungry and acted from duty, achieves a higher ideal than one who acts solely from duty without such a desire.[38]

I doubt that 4 (reasoning and reflection) obtains constantly in a caring person's psychology, perhaps even rarely, and only when faced with difficult cases. A virtuous caring person may not always reflect (so 4 may fail to obtain), however, I will argue that he or she always must act from a virtuous motive (3) below. A caring person may not always reflect and reason through various possible actions, such as in the case of Mother Teresa, and instead carry out actions in an almost automatic way or by what Aristotle called a 'second nature.' Mother Teresa may not have reflected on each opportunity to help others in need but rather, just did it. However, a virtuous caring person necessarily reflects and reasons, when appropriate, in novel and complex situations. So constituent 4 (reasoning) of a virtuous caring action may not be necessary in every instance. Most obviously, an action must be performed (fulfilling 5).

Next, I construct an account of both a virtuous caring act, as well as a caring person. Just

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[38]Again, the point here is acting solely from duty, without the aforementioned desires, is sufficient for performing a morally praiseworthy act on Kant's account, whereas I am claiming that caring requires the appropriate desires and emotions in addition to the appropriate motives. Of course, Kant *encourages and promotes* the cultivation of such desires yet they are not required on his account. Kant does require empirical desires for action, which are generated by our duties. Below I delineate the distinction between Kant's moral psychology and the moral psychology of care ethics.

as a virtuous act requires 1) appropriate emotions (to a situation) and feelings (taking pleasure in performing a virtuous act), 2) appropriate desires (wanting to perform virtuous act x: the supporting desire), 3) appropriate motive (based on desire to want to do one's duty: the primary desire), 4) reasoning and reflection (a method of deliberation), so too, a virtuous caring act will also meet these requirements, albeit with a specified content of caring duties.

As noted, appropriate caring emotions were discussed at length in chapter 3, and they vary greatly depending on the context. However, concern and sympathy, it was argued, are two of the most paradigmatic emotions of care. Thus, in a number of cases, we may be able to say that feeling concern or sympathy is an appropriate emotion, which can facilitate a virtuous caring action and is often a necessary aspect of the virtue of care. However, the emotions deemed appropriate will ultimately be determined by the context as explored in chapter 3. The appropriate feelings are also required to be virtuous, hence one is required to take pleasure in performing a virtuous action or at least not be pained in doing so. In chapter X 5 and N.E. 1153a 20-22, Aristotle notes that our pleasures may compete with one another such that satisfying one may preclude satisfying the other, but the virtuous person will endure low intensity 'pain' in order to attain higher pleasures in the future or intellectual or ethical ones. He also notes that some activities may be categorically *unpleasant* and taking pleasure in such an activity is considered a perversion, such as cleaning a bed pan, cleaning up after one's dog, etc. I bring up these points because such conflicts, I take it, can be frequent also when aiming at the virtue of care.

I now address the controversial aspect of a virtuous caring action, motive, as I will argue such motives are desires (3), the primary desire, while discussing motives in conjunction with the appropriate (supporting) caring desires (2). Although many do agree that 3 (motive) is necessarily part of the landscape of virtue, controversy remains in how one cashes out 3, in what

the motive consists. The debate can be captured by the following question: did Lucy do x because she wanted to do x or did Lucy do x because Lucy believed that if she did x then she would fulfill her goal of y? To take a brief example, one could argue that Lucy cleans up after her dog because it is the law (and she believes she should obey the law). This case may appear to support a Kantian interpretation as it seems that the agent acts from duty in this case. However, although Amy never wants to clean up after her dog, she may in fact *want to* do her duty or want to live in a clean community, in which case she is motivated by a desire. This example is only meant to demonstrate that the answer to whether we act based upon our desires or upon beliefs is not determined easily. Occurrent state theorists (such as Hurka and Ross) claim the case of Amy illustrates the proper conception of motive (a Humean view) whereas Kantians (such as Korsgaard) claim the case of Lucy illustrates the proper conception of motive. In other words, occurrent state theorists claim that persons are motivated by desires – to perform a duty for instance – whereas Kantian inspired theorists claim that persons are motivated by beliefs, such as the belief that performing x will fulfill duty y. I am inclined to accept (a modified version of) the occurrent state theorist's perspective.[39] This debate can surely not be settled here; I only hope to offer some plausible reasons in favor of a desire-based account.

I attempt to demonstrate that an ethic of care, as well as contemporary neuroscience, points towards a desire-based account rather than a belief-based account. First, I explain in what sense Kant's ethical theory is a belief-based account. Let us recall that historically, the ethics of care was in part a reaction against Kantian based ethics where agents are primarily motivated by duty, beliefs that he or she has particular duties and that the performance of particular actions

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[39]Other theorists also interpret desires as essential to motives with respect to virtue. Brewer, Talbot. "Three Dogmas of Desire." In *Values and Virtues: Aristotelianism in Contemporary Ethics*, edited by T. D. J. Chappell. (Oxford University Press, 2006).

will fulfill these duties. Care ethicists claim that Kant's theory fails fully to appreciate the

richness of ethical action, particularly the role of emotions and caring motives. Granted, care

ethicists may present a rather narrow reading of Kant, but their claim that Kant's theory fails to

fully appreciate the richness of ethical action, I maintain, holds true. Care ethicists often cite the

Groundwork, where Kant argues that one must act solely from duty in order to act morally.

However, Kant discusses the role of desire and moral feelings extensively in the *Metaphysics of*

Morals.

With respect to moral feelings and emotions, "moral feeling, conscience, love of one's

neighbor, and self-respect . . . lie at the basis of morality, as *subjective* conditions of

receptiveness to the concept of duty."[40] In other words, one must be capable of such emotions,

feelings, and dispositions in order to be moral, to respect the moral law, and act from duty.

Furthermore, Kant notes that we have a duty to cultivate such feelings, such as sympathy.[41]

Thus, Kant's moral psychology does not completely disregard the role of emotions, feelings, and

desires, as some care ethicists interpret him. However, the role of affect appears diminished upon

closer scrutiny. For instance, Kant claims that one must

> bring all his capacities and inclinations under his (reason's) control and so to rule over
>
> himself, which goes beyond forbidding him to let himself be governed by his feelings and
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> inclinations (duty of apathy); for unless reason holds the reins of government in his own
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> hands, a human being's feelings and inclinations play the master over him.[42]

In my view, as well as other care ethicists, one's emotions and desires ought not to be

"controlled" and "mastered" by reason,[43] rather emotions and desires can and should work in

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[40]MM 6:399.
[41]MM 6:457, 6:400.
[42]MM 6:408.
[43]Perhaps "guided" would be preferable.

tandem with reason in motivating and determining moral action. Furthermore, one should note in the above passage that Kant promotes a duty of moral apathy, the absence of affect in determining one's moral actions.[44] Again, I believe this duty is contrary to what care ethicists aim to promote – *our moral actions ought to be influenced and partly determined by our emotions.* Contrastingly, Kant asserts that no feeling or emotion can *ground* any part of morality.[45] Some care ethicists have overemphasized the role of emotions, such as Noddings, but others, like Held advocate a moderate ethical approach that involves the appropriate emotions, motives, and reasoning, and which I am urging for here. Hence, Kant's moral psychology remains rather inhospitable towards the role of moral emotions. Although they play a role in Kant's ethics, they cannot serve as even a partial grounding for morality, contrary to at least some interpretations of care ethics.

With respect to desire, Kant claims that desires to act in accordance with the moral law are generated by our recognition of the moral law, leading to action.[46] In other words, recognition of the law *precedes* one's desires to obey the moral law. Hence, Kant puts forth a belief-based account because the initial motive is a belief and the desire to do one's duty arises only from the belief that one has such duties. So then, is the account of virtuous care I propose, where the appropriate primary motive is a desire to do one's caring duty, distinct from Kant's? I argue that the two are distinct, *due to the source of the desire*. Desires are generated via a *recognition of the moral law*, believing we have duties, for Kant, however, I believe that the appropriate caring desires are generated based on *the value of the person or thing cared for or*

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[44]MM 6:409.

[45]Others also interpret Kant this way, Barbara Herman and Marcia Baron (1995, 148-49) for instance. Herman, Barbara. *The Practice of Moral Judgment.* (Cambridge, MA: Harvard University Press, 1993), 18-19.

[46]MM 6:213, 6:407. Frierson also interprets Kant in this way. Frierson, Patrick. "Kant's Empirical Account of Human Action." *Philosophers' Imprint* 5 (2005): 12.

cared about. Thus, where a Kantian might claim that one wants to care for x because one recognizes his or her duty to care for x, I urge that one wants to care for x because one values x.

David Velleman develops an account of love as the appraisal of the value of the one loved, which is similar to what I have in mind here.[47] According to Velleman, love is a particularized response and acknowledgment of the value of the one loved. Caring, I take it, is similar, although admittedly less particularized. Love may be a species of care, but we can care for more people and things than we can love. Caring, emotionally speaking, seems less demanding and intense than love. Departing from Velleman, caring, I have argued, constitutively involves feeling particular emotions toward the one cared about, depending on the context, sympathy, joy, fear, etc. However, Velleman conceives such emotions as effects of love, rather than constituents. Thus, desires to perform one's caring duties arise from valuing the one cared for, which constitutively involves being disposed to feeling particular emotions and likely other desires, such as wanting to spend time with the one cared about, in the case of a partner, or wanting what is best for the one cared about, in the case of a person or even an animal or the environment.[48] Thus, the different sources of desire described distinguish Kant's moral psychological account from the one I propose. Kant's account remains deficient as a belief based account because it does not fully appreciate the richness of ethical action – the role of emotions and caring motives.

These initial claims alone already indicate the insufficiency of a belief based theory on a care ethics account. The care literature supports this. Noddings for instance, briefly discusses the role of wanting when caring, more specifically, she claims that wanting to care and our

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[47]Velleman, David. "Love as a Moral Emotion." *Ethics* 109 (1999): 338-74.
[48]Helm, Bennett. "Felt Evaluations: a Theory of Pleasure and Pain." *American Philosophical Quarterly* 39 (2002): 13-30.

obligations to care often go hand in hand.[49] The general theme of care ethics espouses that care is

more demanding than fulfilling duties, although many theorists are vague about what is required.

Many note that caring feelings, emotions, and sentiments are essential to care.[50] Also, Darwall

argues that caring involves desiring something for someone's sake.[51] For Frankfurt caring,

roughly, is a strong and long-standing desire.[52] Finally, Agnieszka Jaworska, Bennett Helm,

Jeffrey Seidman also discuss the role of desire in caring.[53]

In addition, work in neuroscience also points towards a desire-based account.

Psychologists and neuroscientists have found that beliefs are insufficient motivators for behavior

with respect to not only morality, but also in general. More specifically, neuroscientists have

argued that primarily wanting, a species of desire, plays an important role in motivating

behavior, notably Kent Berridge.[54] Berridge and Terry Robinson discovered that two distinct

neural systems are responsible for wanting and liking. Wanting motivates behavior whereas

liking does not. That's not to say that wanting and liking are not commonly co-present, as they

are, but they are not intrinsically connected. Ultimately, wanting plays a central role in directing

behavior, as opposed to liking or reason. Berridge's account of liking and wanting supports my

thesis that wanting (or desiring) is the central motivational force behind the virtue of care, as

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[49](1984, 81-82).

[50](Blum 1980), (Held 2006).

[51](1998).

[52](1999), (2004).

[53] Helm, Bennett. *Emotional Reason: Deliberation, Motivation, and the Nature of Value* (Cambridge University Press, 2001). Helm, Bennett. "Emotions and Practical Reason: Rething Evaluation and Motivation." *Noûs* 35 (2001): 190-213. Jaworske, A. "Caring and Internality." *Philosophy of Phenomenological Research* 74 (2007): 529-68. Seidman, Jeffrey. "Valuing and Caring." *Theoria* 75 (2009): 272-303. These analyses of care encompass a much broader scope than ethical care, but I take their contributions to be useful in illuminating some aspects of the nature of ethical care.

[54]Berridge, Kent. "Pleasure of the Brain." *Brian and Cognition* 52 (2003): 106-28. Berridge, Kent, and Terry Robinson. "What is the Role of Dopamine in Reward: Hedonic Impact, Reward Learning, or Incentive Salience?" *Brain Research Reviews* 28 (1998): 309-69.

wanting is critical in motivating many behaviors. Hence, based upon the argument made above, as well as the support from both the care literature and neuroscience, I suggest that the care literature seems to indicate (or at least doubts) that one who never *wants* to care could be caring; by "wants to care," I mean

a) wants or desires to perform caring activities for their own sake (2, the supporting desire), *ideally*, i.e. care work, *but* necessarily

b) wants or desires to perform caring duties for the sake of the one cared for (3, the primary desire).[55]

So caring always requires wanting to perform one's caring duties for the sake of the cared for, while wanting to perform the caring activities for their own sake is ideal, yet not required for caring. Desires are necessary, but the content of the desires varies. For instance, (2) could be a case where a mother wants to cook dinner for her children (care work), an *act* that meets the needs of her children and (3) wants to fulfill her caring duties, and does so. A case which lacks (2), but (3) obtains may consist in a mother who does not want to cook dinner for her children, but only because she dislikes cooking in general, however she wants to meet the needs of her children, i.e. she wants to fulfill her caring duty for the sake of her children.

Perhaps there may be times where a mother may not want to perform her caring duties for her children, under times of extreme stress or frustration for instance, although she still performs them. In such a case, 2 and 3 fail to obtain. This scenario closely resembles what Kant had in

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[55]Many thanks to Jamie Lindsay for pointing out this distinction during the SPP discussion. In chapter 5, I explain how to understand these caring motives with respect to different kinds of caring relations. Wanting and desiring, although closely related, have been distinguished in the literature. However, wanting appears to play an integral role in most theories of desire. For the sake a simplicity and focus, I must set aside the intricacies here. Caring duties consist in preventing harm, meeting needs or promoting flourishing, etc., according to the definition previously presented. I shall further explicate to whom and what we have duties to care in the next chapter.

mind when he claimed that in order for an action to have moral worth, one must act from duty. Hence, the mother in this case may have performed a morally worthy act, however, I argue the particular act in this case is not caring, although she herself may be caring overall. That's not to say she didn't perform caring work, as she surely did, but if one performs an act or duty (even care work) in which he or she did not want to perform and is pained to perform it, such an act lacks the critical constituent of caring, the appropriate desires, minimally and the appropriate feelings and emotions, ideally. The mother in this case is simply "going through the motions" of caring labor, lacking all appropriate emotions desires and feelings. As I have claimed, caring motives (3) constitute the minimal psychological requirement for an action to be considered caring (continent care), but if an action lacks a caring motive, then the action is not caring. The action is morally praiseworthy as a duty has been fulfilled, and care work has been performed, yet the action is not caring. Again, the mother may yet be a caring person overall, but the action and occurrent motive in this particular case are not. If instead one caring failed to perform his or her caring duties, then one not only fails to care, but one also fails to be moral.

Not only has Ross put forth desire-based accounts where the content of the desire may include the performance of duty, John Rawls also suggested a similar moral-psychological framework.[56] Rawls introduces the idea of "principle-dependent desires," where the content of the desire is a principle, moral or rational.[57] A citizen, for instance, may desire to share in the burdens of his or her society. A friend may desire to reciprocate kindness. In the case of a caring relation, I have urged that one desires to perform caring activities for their own sake, ideally, but

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[56](Ross 1930); Rawls, John. *Lectures on the History of Moral Philosophy* (Cambridge: Harvard University Press, 2000). Rawls, John. *Political Liberalism* (New York: Columbia University Press, 1996).
Richardson, Henry. "Moral reasoning." Edited by Edward N. Zalta. *The Stanford Encyclopedia of Philosophy* (2013). http://plato.stanford.edu/archives/spr2013/entries/reasoning-moral.
[57](Rawls 1996, 82-83); (Rawls 2000, 46-47).

necessarily desires to perform caring duties for the sake of the one cared for, like Rawls's principle-dependent desires.

Many care theorists emphasize the importance of emotion when caring, such as Gilligan, Noddings, Held, Slote and Toronto.[58] But why bring in desire? Desires, emotions, and feelings appear to have an intimate connection. Although I have described these constituents of virtue as distinct, my purpose was only for the sake of consistency with other theorists descriptions and not meant to make suggestions as to their ontological status. On the contrary, I do not take emotions, feelings, and desire to be absolutely distinct and independent as the above mentioned theorists may presume. The constituents of virtuous action, I believe along with Helm, are interdependent to varying degrees. Helm has argued that emotions, desires, as well as pleasures and pains are "felt evaluations," where each overlaps with the other.[59] Sympathy, for instance, tends to be construed as a negative feeling, feeling pain *towards* another, when observing another in pain, and the pain felt towards the other, brings about the desire to relieve the pain by helping the other. Felt evaluations are both cognitive and non-cognitive; each is cognitive in that they involve evaluations and each is non-cognitive in that they involve phenomenological experiences and/or feelings.[60] In addition, neuro-scientific research tentatively appears to support such a view – that feelings (namely pleasure) and desires involve a complexity of neural systems, and they appear to be interdependent to varying degrees, the most distinct being between pleasure and desire.[61] I cannot here argue for the full claim of interdependence. I only intend to indicate that

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[58](Gilligan 1982); (Noddings 1984); (Held 2006, 29-43). (Slote 2007); (Tronto 1993).

[59]Helm, Bennett. "Emotions and Motivation: Reconsidering Noe-Jamsiean Accounts." In *The Oxford Handbook of Philosophy of Emotion*, edited by Peter Goldie. (Oxford University Press, 2009).

[60](Helm 2002).

[61]Katz, Leonard. "Pleasure." Edited by Edward N. Zalta. *The Stanford Encyclopedia of Philosophy* (2009). http://plato.stanford.edu/archives/fall2009/entries/pleasure/.

the distinctions I present in illustrating the various aspects of virtuous caring action are for the sake of methodological ease and do not intend to convey the ontological status of these elements.

I have claimed that the ethics of care demands more of agents than does Kantian ethics, requiring the appropriate feelings, emotions and desires, in addition to reasoning and beliefs (duties).[62] This demand seems to be one of the central motivations for the inception of an ethic of care; Kantian ethics only requires acting from duty, and diminishes the importance of emotions and desires, although the appropriate emotions and desires are encouraged. This is one way I have suggested that care theory demands more of agents; it requires not only first order *duties to care* (like Kantians or perhaps consequentialists), but also *wanting to care* in the two different senses described by 2 and 3. To qualify this claim further, I suggest that wanting to care is a necessary psychological *precondition* to perform caring action and hence to be a caring person in a caring relation. However, relations do not always begin in a "natural" caring way, where a person wants to care for another immediately upon the start of the relationship. Sometimes, caring work occurs in the absence of caring desires and hence caring relations, as I have suggested. When a caring relation is sought in these challenging cases, I suggest that one has a *second order duty* to cultivate desires to care. So not only does one have duties to care (first order), but one has a duty to cultivate the desire to care (second order). Now, having a duty to cultivate a desire may admittedly sound odd prime facie, however, Noddings claims that we are obligated to maintain an attitude of desire, while Kant encouraged the cultivation of appropriate ethically relevant emotions.[63] Cultivating the appropriate ethically relevant desires is only a small departure from this Kantian requirement, as emotions and desire are interdependent phenomena, as urged above. Kant claims further that we can develop feelings and desires of love

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[62](Pettersen 2006, 61), (Blum 1986).
[63](Noddings 1984, 84), (Kant, MM 6:456-458).

towards those we help via the practice of helping the person.[64] Thus, practicing care work itself could facilitate the development of these desires, as well as sharing and communicating with the care receiver, spending time with them, etc.

To be clear, I am not attempting to persuade one that desires are the only singular relevant ethical motives. Emotions play an integral role, as well as beliefs about what one's caring duties are (chapter 5), more specifically, principle dependent desires noted above. However, caring desires are what set care apart from Kantian ethics. I take it that there are cases where one may perform a morally praiseworthy act based on a belief only (that one ought to do one's duty), such as with Korsgaard's account; but, such cases do not constitute care, as I argued above, although such actions may still be morally praiseworthy. I have only attempted to provide some support for accepting a desire based view of motivation over a reason based view of motivation with respect to care. A much deeper examination of the issue of motive is surely required, but beyond the scope of this dissertation.

Which supporting desires are appropriate (2) will be sensitive to the context of a situation, but, generally they will consist of wanting to do x (a class of caring practices, preventing harm, meeting needs or promoting flourishing, e.g. feeding, playing, providing support, etc.); many different desires may be considered when deliberating about which action to take, hence I can only discuss a few here. Supporting desires will necessarily correspond to the primary desire. If the primary desire in a particular context is to perform the caring duty of meeting the needs of a close friend, the supporting desire would be a desire to perform an act (relevant to the context) which would fulfill one's duty, i.e. the desire to console, listen, offer advice, etc. However, conflicting desires are of course possible. One may *want to* perform one's

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[64]MM 6:402.

duty (3), yet one may *not want to* perform the particular action required to fulfill one duty (2), a *negated supporting desire*.

Consider a case where a dog owner must clean up after his or her dog. Such a case may help illustrate the possible tensions between competing desires, along with the role of feelings, i.e. pleasures and pains (1). Christy may never want to clean up after her dog (a negated supporting desire), but she wants to fulfill her duty of being courteous to others in her community (3, primary desire). In this case, she has two conflicting desires; does this mean that her act of cleaning up is not virtuous because she does not take pleasure in the activity itself of cleaning up, lacking the supporting desire? Aristotle's exposition on these matters may not warrant this conclusion.[65] For instance, if the activity is considered categorically unpleasant (even disgusting), then no one would be expected to take pleasure in such an activity (unless they were perverse) nor want to perform it (in itself). Such a 'pain' is a low intensity pain (arguably in my example). Since wanting to fulfill one's duty is a higher pleasure, then it should be pursued at the expense of experiencing pain. Thus, perhaps not all virtuous caring activities (such as cleaning bed pans and the like) may require that one take pleasure in the activity after all, nor that one desire to perform it. Rather, perhaps to do so virtuously may consist in overcoming the conflict between desires more easily. However, when considering actions that are not categorically unpleasant, taking pleasure in (1) and having a supporting desire (2) are ideal (virtuous). A lack of pleasure (1) and/or a supporting desire (2) admits of continent care, falling short of virtuous care, but remains care.

Requirement (3) requires that one is motivated by a desire, desiring to do one's duty (a caring duty). Recall that this desire is distinct from (2), which requires the appropriate supporting

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[65]In N.E. Chapter X, Book 5 and 1153a 20-22, Aristotle discusses these issues.

desires to perform care work, as illustrated above. Requirement (3) is (in part) what moves one to act, whereas (2) only makes the execution of action more difficult or easy. One may question the utility of employing the concept of duty here – what work is it doing? Might care merely require desiring to help? Caring, I believe, cannot be reduced to the appropriate emotions and desires because caring constitutively involves obligations, obligations we want to fulfill (3). Tronto's account of care necessarily attributes responsibilities and commitments to care givers, for without taking on responsibilities, it is difficult to imagine care being genuine.[66] Responsibilities and commitments are hard to conceive as desires or emotions alone. Other care theorists too argue that caring involves obligations, such as Held, Daniel Engster, and Eva Kittay.[67] It therefore seems to be the case that caring duties play a necessary role in the framework of care.

Let us now turn to the role of reason in the practice of care and to the best method of reasoning (4) in care. In the following, I briefly review a number of proposed models of moral reasoning and I suggest a method I believe most conducive to caring, reserving its full application for chapter 6. Reflection and reasoning appear to be the most neglected aspect of care in terms of its treatment in the care literature, hence the importance of the development of an adequate conception is paramount. Indeed, care theorists seek a less rigid framework of moral thinking than traditional theories, such as utilitarianism and Kantian ethics, so this parameter must be kept in mind while attempting to develop an adequate model of reasoning in terms of care with respect to what the virtue of care should look like.

Henry Richardson distinguishes three general forms of moral reasoning, maximizing reason, the middle ground approach, and a holistic approach, two of which I will focus upon:

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[66](Tronto 1993).

[67](Held 2006); Engster, Daniel. "Rethinking Care Theory: The Practice of Caring and the Obligation to Care." *Hypatia* 30 (2005): 50-74. Kittay, Eva. *Love's Labor: Essays on Women, Equality, and Dependency* (Psychology Press, 1999).

maximizing reason, and a holistic approach.[68] Kantian and Millian ethics both fall into the

category of maximizing reason on his view because both ethics argue for a "supreme" or

"ultimate" principle, both derived from reason from which all other principles may reasonably be

derived. The paradigmatic holistic approach is Rawls's method of reflective equilibrium, which

is less hierarchical than a purely Kantian or Millian form of moral reasoning. Not only may we

revise our particular judgments based upon principles by way of Rawls's holistic method, but we

may also revise our general principles based upon various powerful particular moral judgments.

Which of these methods might best coalesce with the virtue of care? Maximizing reason

is too rigid. It lacks the flexibility a care approach not only allows, but requires: it is precisely the

kind of restrictive reasoning that care theory diametrically opposes. Reflective equilibrium,

however, seems to retain the desired flexibility care theorists seek in theory: the methodological

holism allows for the revision of principles and judgments, and overlapping consensus allows for

moral reasoning, even when considerable moral disagreement is present between parties.[69]

Schwarzenbach advocates for the implementation of reflective equilibrium within caring

contexts, as does Held.[70]

Other theorists also advocate a holistic approach to practical and moral reasoning, for

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[68]Richardson, Henry. "Moral reasoning." Edited by Edward N. Zalta. *The Stanford Encyclopedia of Philosophy* (2013). http://plato.stanford.edu/archives/spr2013/entries/reasoning-moral.

[69]Overlapping consensus allows disagreeing parties to build agreement based upon any type of agreement, even irrelevant to the disagreement at hand. Once some basis of agreement is built, this allows for the possibility of agreement to grow (Richardson 2013).

[70]Schwarzenbach, Sibyl. "Valuing Ideal Theory: Reflections on Virginia Held's Critique of Rawls." *Metaphilosophy* 21 (1990): 162-78. Held, Virginia. "Care, Empathy, and Justice: Comment on Michael Slote's Moral Sentimentalism." *Analytic Philosophy* 52 (2011): 312-18. Held, Virginia. *Rights and Goods: Justifying Social Action* (Chicago: University of Chicago Press, 1989). Held, however, does not advocate all aspects of Rawls's method of reflective equilibrium. She argues that judgments can and sometimes should be based upon emotions, whereas Rawls eliminates emotion from his methodology, implementing a purely impartial perspective.

instance Jonathan Dancy, Mark Schroeder, and Velleman.[71] Velleman's holistic practical reason theory bears particular relevance to reasoning when caring is understood as a virtue. In brief, Velleman argues that practical reason consists in *a person's acting in ways that makes sense*, given one's self conception. So one's "wants, values, convictions, habits, emotions, and traits of personality" are the vehicle and guiding force of practical reason.[72] Similarly, a caring person reasons holistically based on similar considerations – emotions, desires and beliefs – acting in caring ways that make sense, all things considered, aiming to act as an ideal caring person. However, Velleman does not advocate practical reason as the driving force behind our actions, rather he argues that practical reason is like a supervisor, overseeing our actions. He describes practical reason as follows:

> According to this supervisory conception, practical reasoning is not in the driver's seat of action; it's in the passenger's seat. Better: practical reasoning is your spouse in the passenger's seat, mostly following along silently as you drive; sometimes warning you of upcoming turns; sometimes telling you to take turns that you are already taking anyway, thank you very much; sometimes pointing out that you just took a wrong turn; and just sometimes giving you just the direction you need, just when you need it. Most of the time, you drive on automatic pilot, as we say. The automatic driver is your skilled, intelligent, goal-seeking mind, which can handle the car by itself most of the time. If you have a live pilot in the passenger seat, he or she plays the same role as the human pilots in modern airliners, supervising the automated systems. If you are driving alone, then you

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[71]Dancy, J. *Ethics without Principles* (Oxford: Oxford University Press, 2004). Dancy, J. *Moral Reasons* (Oxford: Blackwell, 1993). Schroeder, M. "Holism, Weight, and Undercutting." *Noûs* 45 (2011): 328-44. Velleman, David. *How We Get Along* (Cambridge University Press, 2009), 13.
[72](Velleman 2009, 13).

play both roles, supervising your automatic driver. Unless you become unduly distracted, you supervise that automated system and intervene if necessary.[73]

His analogy is illuminating. It captures what our reasoning process is like phenomenologically. Reasoning with respect to caring, I believe, functions similarly. As mentioned previously, someone such as Mother Teresa perhaps did not constantly evaluate and reflect on what to do and how to do it. She simply acted or thought out and acted simultaneously. In her case, her 'co-pilot' likely needed to intervene little, as one would expect for those who achieve virtuous caring. Those who struggle to care, however, if properly educated, may experience and need frequent intervention from one's co-pilot, reaching the point of continent care only. I have not definitively laid out the foundation of caring practical reason here. I only aim to present a preliminary account, elaborating on the constituents of caring and an ethic of care.

In order to make the best morally caring decisions possible, given the examples I have presented, we *ought to* utilize reasons (beliefs), emotions, and desires when making decisions.[74] Thus, I have suggested that an adequate account of caring motives should consist in desires, whereas deliberation *should include* beliefs (about duties), emotions, and desires. If one wants to be moral, desires to perform one's duty (3) should always weigh more heavily than lower order desires, performing a particular action, when deliberating because our lower order desires may serve only our own interests. In order to avoid becoming overwhelmed with care as a caregiver, a caregiver needs *to reflect upon* how caring in situation x effects not only the care receiver but also him or herself, and not merely act from beliefs (one's apparent caring duties) automatically. Evaluating and reflecting upon the care giver's emotions in such cases can prove useful. Has

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[73](Velleman, "Time For Action" (Unpublished)).
[74]According to Goleman, we often do since often, especially with mundane decisions, our preferences are will be the deciding factor as often other things are equal, see chapter 3 (1995).

caring lead to anxiety or sadness, or resentment towards the care receiver, for instance? If so, these emotions may indicate that the caregiver has become overwhelmed and likely has not cared for his or herself adequately. Alternatively, the caregiver may badly *want to* (desire to) intervene in situation x (for the sake of 'caring'), but intervening in situation x may fail to be caring to his or herself or the receiver of care. If the care receiver experiences frustration or anxiety as a response to the care givers intervention, the decision to intervene may be in need of evaluation, depending on the context. If one's young child hopes to do something dangerous and becomes frustrated when the parent intervenes, this likely is not be a case of unjustified paternalistic care. However, if say a father exerts control over where his daughter attends college, considering 'what's best' for her, yet the daughter feels frustrated by such determinations, further reflection on the father's part may be required as it may be a case of negative (or unjustified) paternalistic care.

Ruddick provides a number of examples demonstrating care thinking in her *Maternal Thinking*.[75] For instance, she describes "scrutinizing" as the cognitive habit of mothers looking out for danger before it happens, yet emphasizes that this mental habit needs tempering via the virtue of humility. Humility, according to Ruddick, involves having "a profound sense of the limit of one's actions and of the unpredictability of the consequences of one's work."[76] Humility allows one to respect the independence of the cared for, otherwise, "one would become frantic in her efforts to protect."[77] So ideally, a mother ought to not simply act upon relieving her anxieties and satisfying her desire to protect her children at every opportunity. Rather, she ought to reflect on her emotions and desire to intervene, evaluate whether or not they are well-founded, and reason as to whether or not intervention is appropriate for the sake of the cared for in the

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[75](Ruddick 1995, 71-72).
[76]Ibid.
[77]Ibid.

particular situation.

A final worry is that one may perform caring acts, but from a bad motive or at least from the wrong motive. For instance, in *The Princess Bride,* the injured hero Wesley is captured by his adversaries. He is well "cared for" after sustaining injuries, but only for the sake of being healthy when he is to be tortured in the future. Such a case on the presented account would not constitute *genuine* care since the motive is malicious. Pedophiles operate in a similar way, "grooming" their victims, giving them gifts and gaining trust. These actions *appear* 'caring,' often fooling parents of their intentions as well. Unless the motive is the desire to perform one's caring duties for the sake of the one cared for, then such care is not genuine or good or virtuous care. Therefore, caring requires more than acting on *any* feeling or desire: it requires caring limits on the content of one's desires (and motives), emotions and feelings, as well as reasoning, culminating in caring action. These requirements avoid common criticism of care, and of malicious "care", and strengthen the theoretical foundation of an ethic of care.

4.4 Virtuous Caring Acts and Persons

In this next section, I will first clearly delineate what virtuous caring acts look like in comparison to acts that are continently caring, incontinent, and vicious. Then, we may more easily explain what virtuous care looks like, finally allowing us to describe the virtuous caring person. I describe and illustrate each action first and explain the details thereafter. By clarifying all of the differences between such acts (rather than only exploring virtuous and caring acts) I hope to provide a clearer picture of what virtuous (ideal) caring and caring (falling short of the ideal) consists.

	Appropriate Emotions and Feelings	Appropriate Desires/ Supporting Desire	Desire(s) to Do Something Else	Reasoning	Caring Motive/ Primary Desire	Caring Action Performed (actual or apparent)
Virtuous Care	**X**	**X**	**Weak (X v ~X)**	**X v ~X**	**X**	**X**
Continent Care	**Weak (X v ~X)**	**Weak (X v ~X)**	**X**	**X v ~X**	**X**	**X**
Weakness Incontinence	**Weak (X v ~X)**	**Weak (X v ~X)**	**X**	**X**	**Awareness**	
Impetuous Incontinence			**X**			
Vicious			**X**	**X v ~X**		**X v ~X**

Table 4.4: the Moral Psychological Framework of Virtuous Caring Acts
 Note: X=obtains, ~X= does not obtain. I am assuming in each case that the same act is under consideration and that the act X fulfills a duty of care.

I begin by describing virtuous caring action and work down the presented chart. As stated previously, a virtuous caring action requires the appropriate emotions and feelings (1), reasoning (reflective equilibrium/holistic reasoning) in novel situations (4), wanting to perform the caring action (2, the supporting desire), wanting to fulfill one's caring duties for the sake of the one cared for (3, the primary desire), and performing a caring action (5), involving at least the prevention of harm, hopefully meeting needs, but ideally promoting the flourishing of the one cared for.[78] With respect to having the appropriate desires, as mentioned above, Aristotle allows that the virtuous person may endure low intensity pains to attain higher order pleasures. I interpreted this to mean that the virtuous person may feel conflicting desires at times (perhaps he or she is tired and *weakly* desires not to perform the action), but such desires are weak. There may even be cases where the virtuous person finds difficulty in performing X at times, but the cause of the tension is crucial.[79] For instance, if one is poor and has the opportunity to make financial gains through dishonesty, but does not, conflicting desires may be expected and the

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[78]Reasoning is not required only when the virtuous care giver is presented with a familiar situation of moral relevance and caries out virtuous action in an automatic way.

[79]Foot, Philippa. *Virtues and Vices* (Oxford: Blackwell, 1978).

person in this case may be admirable and virtuous. A person is not admirable in the case where one struggles to do the right thing due to defective character, say when a wealthy person struggles not to perform a dishonest action for financial gain.

With respect to continent caring action, the appropriate emotions may or may not obtain; if they do obtain, they are likely weak, although they could possibly be strong; for instance one may feel strong sympathy towards one in need, but one may find it difficult to help if one is exhausted. Likewise, the same holds true for the appropriate supporting desires: they may obtain strongly, weakly or not at all. Just as in the above case, one may very much want to perform the particular caring action, but yet may experience conflicting desires. The crucial distinction between continent care and virtuous care is the presence of strong desires that conflict with the appropriate desires, yet both continent and virtuous caring action involve wanting to perform one's caring duties. Like virtuous care, continent caring actions involve reasoning, and acting from a caring motive, as well as caring action.

Incontinence due to weakness is nearly identical to continent care, the crucial distinction being that the agent decides to act on his or her conflicting desire rather than the caring motive and hence fails to perform a caring act. Like incontinence due to weakness, the incontinent act due to impetuousness also does not result in the performance of a caring act, but such an act also lacks any reflection or reasoning whatsoever. The agent of an impetuous incontinent act has a desire which conflicts with the appropriate caring desire and acts on the non-caring desire, failing to perform a caring act. Later, the agent may reflect and regret the action, but no reflection occurs immediately prior to action.[80]

The key element to an action's viciousness is a non-caring desire, while also lacking the

[80]Kraut, Richard. "Aristotle's Ethics." Edited by Edward N. Zalta. *The Stanford Encyclopedia of Philosophy* (2012). http://plato.stanford.edu/archives/win2012/entries/aristotle-ethics.

appropriate caring emotions. So where continent or incontinent actions may still involve wanting to help on some level, the vicious actions may involve wanting to perform a self-serving act rather than helping, or could perhaps involve a desire to harm. Vicious action may not involve reason with respect to carrying out actions and may spring from impulse, however, I am inclined to attribute the possibility of reasoning to such an agent. Vicious actions can involve much planning and/or manipulation, where an agent "reasons" as to how best implement his or her plan, which is the sense of reasoning I have in mind. Also, perhaps puzzling at first, a vicious action may or may not consist in a so-called *apparent* "caring act." Vicious agents may not only fail to perform a caring act, but may perform an uncaring or evil or harmful act, but this is not always the case. For instance, as noted above, pedophiles often "groom" their victims, performing actions that on the surface look caring. Such acts on my view are *apparent* caring acts, but not genuine caring acts, where caring motives are necessary.

This analysis applies directly to virtuously caring, continently caring, incontinent and vicious persons. Thus, a virtuously caring person's actions consist in the appropriately caring emotions, feelings, desires and reasoning, and actions overall, whereas a continently caring person's actions minimally require caring motives and actions overall. Incontinent and vicious persons both fail to act from caring motives. Incontinent agents, however fail to perform caring actions whereas, a vicious agent may or may not perform an apparent caring act.

This exercise of analysis yields a clearer understanding of what genuine care consists in terms of action, motives, desires, emotions and feelings, although admittedly it is not entirely decisive. Care as a virtue, as with virtue in general, is best understood as an ideal.[81] By understanding what we ought to aim for, and the various ways we may fall short, we can gain a

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[81]Badhwar, Neera. "The Milgram Experiments, Learned Helplessness, and Character Traits." *Journal of Ethics* (2009): 257-89.

better understanding of how to approach a caring ideal; this analysis has dissected care into a number of constituents and in so doing, one can more easily identify successes and failures of genuine caring. Therefore, this analysis   contributes to the completion of the needed theorizing within care theory.

4.5   Conclusion

To conclude, I have presented a possible conception of in what the virtue of care consists, an ideal at which to aim. Care as a virtue consists in the appropriate emotions and feelings, as well as a supporting desire, a primary desire – the caring motive, reasoning, and finally action. I have argued that caring motives partly consist in the desire to care, the desire to perform one's caring duties for the sake of the cared for. In addition, I have urged that when ideal caring falls short, one has a second order duty to cultivate the desire to care. Moreover, I have attempted to show how this ideal of care is distinct from and goes beyond what is required in other ethics, namely Kantian ethics. However, a number of questions remain unanswered. I have conceived of an ethic of care as fulfilling caring duties, but what are they specifically? And what grounds caring duties? I have also emphasized that care involves respect for autonomy, but how do we define autonomy within the context of caring and what role does autonomy play in this context? What role does autonomy play in relations? And finally, a virtue ethical account, as the one presented here, focus on the nature of the individual, the caring individual, but how ought we to conceive of caring relations? I take up these questions in the next chapter, "the Caring Person."

5   The Caring Person

5.1   Introduction

In the last chapter, I presented the beginnings of an account describing caring actions and caring persons in terms of virtue. In this chapter, I expand upon this conception of caring persons and present some basic parameters for describing the practice of the caring person, then delineating a metaphysical sketch of the caring person,[1] and finally, describing how a caring person is situated amongst various kinds of relations. With respect to the practice of the caring person, I first set the stage for grounding caring practices in what I refer to as "holistic reciprocity," largely derived from Engster. After laying the groundwork, I next present some flexible guidelines as to what the caring person ought to care about, followed by a specific delineation of caring duties. I begin my investigation of a metaphysical conception of a caring person by reflecting on feminist notions of relational autonomy. I demonstrate the inadequacies of current accounts, go on to present an alternative deflationary account of autonomy and the self, where autonomous caring persons are situated amongst others, and utilize Schwarzenbach's friendship model of relations. Finally, I present a refinement of how caring persons are situated within various types of relations, and what obligations follow from these relations.

5.2   The Situated Caring Person: Grounding Care in Holistic Reciprocity

In the last chapter, I defined virtuous caring action in part by the fulfillment of caring duties. I will delineate what these caring duties are in the next section, but first, where do these caring duties come from? What grounds caring duties? I suggest that caring duties are grounded in "holistic reciprocity." "Holistic" refers to the whole system of reciprocity, as in chains of

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[1]By "metaphysical," I mean the necessary aspects or characteristics of a caring person.

overlapping networks, where no member is in complete isolation in a web of caring relations. I do not mean "holistic" in the sense that the whole is a distinct system, greater than the sum of its parts. By "reciprocity," I have a very broad notion in mind (similar to Schwarzenbach's), where give and take may obtain over a life time, while "giving" may be as simple as a sigh of relief and "taking" the acknowledgement.[2] Furthermore, I do not argue that all individuals must partake in reciprocal action in order to benefit from a system of caring. I expand further on what I mean by "holistic reciprocity" and the nature of relations, including nonreciprocal relations, in a caring system below.

Engster argues for a similar grounding, which he refers to as "the principle of consistent dependency," but I hope to expand upon his arguments. Engster argues as follows:

> we should care for others in need when we are able to do so because we have implicitly demanded and continue to demand care from others for our own survival and development and the reproduction of society; and because denying others the care they need deprives them of the support necessary to survive and achieve the basic well-being that we all implicitly recognize as good.[3]

The importance of relations and reciprocity are implicit in his claims; I aim to bring them to the foreground, recasting his arguments with a different emphasis.

As reciprocity occurs within relations, I first address the nature of such relations and then, in turn, reciprocity. A caring relation requires action, caring action directed towards another or even toward oneself, as I argue in the final section of this chapter. These relations may be symmetric, transitive, reflexive or asymmetric. Symmetric relations are reciprocal, although they may be reciprocal in either a strict or broad sense. One may be in a friendship relation where

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[2](Schwarzenbach 2009, 48).
[3](2005, 65).

each reciprocates frequently, resulting in a near equal level of reciprocation. A parent and child, however, may only reach reciprocation, or closer to it, over the course of a complete life-time. In yet other cases, where one may be unable to care for his or her self, let alone others, expressions of gratitude may be the only way one can "give back" so to speak. We are most frequently enmeshed in symmetric relations with the near and dear (those with whom we are in close relations), but sometimes also with local others (fellow community members, most immediately within our residing city, but extensionally, our fellow citizens, and perhaps citizens of neighboring countries, etc.).

Transitive relations, contrastingly, may occur via the near and dear, local others or distant others (citizens of more distant countries), whereas a reflexive caring relation is directed towards one's self. With respect to these relations, the sense of reciprocity I have in mind here is loose, again. Transitive caring relations may occur when one cares for another (a cares for b) and since b was cared for, this then allows b to care for c, creating a "chain of care." a has in a sense passed along care or cared for c in virtue of caring for b. When caring for the self, the "give and take" is not literal, but metaphorical, a mental "checking in" and evaluation. "How am I doing?" and acting accordingly, caring when needed.

There are cases, however, where even a loose sense of reciprocation is absent, but one may be in a caring relation with the care receiver in virtue of caring for him or her. The test here is reflexivity. If one cannot care for his or herself, then one surely cannot care for others, revealing an asymmetrical relation, when one who cannot care is cared for. Failure of reciprocity, however, need not lead to the conclusion that one is not (or not to be) excluded from the caring scheme. Reciprocation is necessary to sustain the caring scheme as a whole, but not necessary within each and every relation. The caring scheme is arguably based on the basic value

placed on one's own survival, and the good life or flourishing (however conceived). Engster notes this basic value as well.[4] Roughly, he argues that for us to survive, we all must participate in the caring scheme. If we recognize the value of our own life, its survival, and flourishing and recognize this in others, then we cannot exclude others who cannot participate in the scheme without inconsistency. Furthermore, I elaborate that we all need to be cared for in our lives at various points, some more than others. To cut off one who requires continuous care from the scheme versus one who requires almost continuous care, from one who requires care half their life, etc. would be arbitrary. There is no principled basis for deciding how much care required is "too much," hence all ought to receive the care he or she needs for survival and ideally flourishing, regardless of the frequency or intensity. Hence, the recognition of valuing life, survival, and flourishing necessitates the need for sustaining the life of others, even others who are incapable of "giving back."[5]

As for "holistic" in "holistic reciprocity," the idea is that all individuals, creatures and life forms are connected via a holistic relation. Just as we are dependent upon others, we are also dependent upon the environment (and its plants and animals) for our very survival. As with Gould, similar to her conception of overlapping solidarities, I do not mean that every individual is connected to every other individual and living thing, rather all are connected via overlapping networks and chains of care.[6] Caring for people and caring for the environment, of course, require different kinds of actions. Whereas caring for others often requires intervention and

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[4]Ibid., 51.

[5]To be clear, I am not arguing that every person ought to be kept alive by any means in all circumstances. Sometimes, the caring action could be to let someone pass, but in order to determine such cases, knowledge of the particulars is necessary.

[6](Gould 2004).

positive actions, caring for the environment may not.[7] Although some environmental groups may intervene in particular habitats which are in dire straits and nurse certain species of plants or animals back to health, the average individual does not partake in such practices. Instead, individuals may work towards environmental protections, donate money to environmental causes, or purchase products from environmentally conscious companies. These actions fall under the "preventing harm" aspect of caring, arguably, rather than meeting needs or promoting flourishing. I aim simply to make clear some relevant differences between caring for others versus for the environment. But how might the environment "reciprocate" within a holistic caring scheme? Environmental reciprocation, I argue, is possible in the loose sense of reciprocation. By caring for the environment, the environment may "give back" clean air, water, and sustain food supplies. Or, in the case of wilderness and species protections, the environment may "give back" the beauty of its thriving state when protected.[8]

Thus far, I have attempted to illustrate what I mean by "holistic reciprocity" and by maintaining this holistic relation. More specifically, I want to argue that

1) we are all part of the described holistic relation, and that

2) reciprocity is key in maintaining these relations.

First, I begin by garnering support from the literature for both 1 and 2. Then, I sketch the central foundations of holistic reciprocity.

Many ecofeminists have argued for the idea that humans are deeply connected with nature and that this connection (or relation) has been vastly under appreciated. The term

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[7]That's not to say that caring is never similar with respect to persons and the environment, such as when one donates money. I will clarify these difference in the last section of this chapter, elaborating further in the concluding chapter.

[8]Schwarzenbach makes a similar claim (2009). Alternatively, one could conceive of the environment as *responding*, rather than reciprocating.

"holistic" or "holism" is sometimes used, while "unity" and "solidarity" with nature are also discussed. Regardless of the terminology, they all convey a similar idea: relatedness. Plumwood argues throughout her work that we are deeply connected with nature.[9] Warren speaks of humans, nonhuman animals, and nature as "knots in webs of relations."[10] Aldo Leopold famously argued for a holistic account of ecology, where humans are part of the eco-community.[11] Practically speaking, it seems impossible to deny our deep interconnectedness with nature in terms of our dependence upon it for our survival. Nature provides all of the basic necessities our biology requires, food, water, air, etc., and without these resources, we would perish. Both Kittay and Martha Fineman note that everyone's survival depends upon care from others at times – society would cease to exist without it.[12] Furthermore, Gould too discusses our vast interconnectedness with others, particularly as transnational solidarities or overlapping networks.[13]

Gould discusses reciprocity at great length throughout her work, particularly its importance with respect to social relations and politically relevant relations. Reciprocity is foundational to her conception of democratic discourse.[14] Her conception of reciprocity is narrower than what I have described, as is needed for political purposes. In brief, Gould claims that reciprocity is a relation limited to agents, "those with the capacity for free choice."[15] However, nothing appears prime facie inconsistent with expanding her notion to a broader one

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[9](Plumwood 1991, 1993, 2001).
[10](Warren 2000, 155).
[11] Leopold, Aldo."The Land Ethics." In *Sand County Almanac* (Oxford University Press, 2001).
[12](Kittay 1999); Fineman, Martha. *The Autonomy Myth: a Theory of Dependency* (New Press, 2004).
[13](Gould 2004, 2007).
[14]Gould, Carol. *Rethinking Demacracy: Freedom and Social Cooperation in Politics, Economy, and Society* (Cambridge: Cambridge University Press, 1988), 78.
[15]Ibid., 76.

within the context of caring, as caring can involve those who lack such a capacity. Velleman notes that reciprocity is a key norm for communities cross culturally, as does Prinz, although specific practices vary.[16] Reciprocity and cooperation promote stability and equilibrium amongst communities. Schwarzenbach too builds her theory of civic friendship starting from Aristotle's notion of *philia*, where reciprocity is a necessary component.[17] Rawls sees political and economic justice as grounded in social cooperation and reciprocity. He argues at length in chapter 8 of *A Theory of Justice* that justice as fairness accords with the reciprocity principles of moral psychology, characteristic of human beings' moral development.[18] Ultimately, the existence of a holistic relation among individuals with non-human animals, as well as with nature has strong support, as does the importance of reciprocity within social relations.

To further clarify what I mean by "holistic reciprocity," I want to be clear that I am making two distinct claims with respect to both "reciprocity" and "holistic," one metaphysical and the other normative. The metaphysical claims of "holistic reciprocity" are:

1) everything is in a holistic relation, not literally every individual entity, but rather all entities are connected via overlapping networks of care (argued for above), while

2) reciprocity supports the stability of such relations through 'mutual' give and take, helping to maintain equilibrium.

Such a method supports the holistic relation among all; if parts of the holistic chain weaken because of lack of care, this can eventually effect the entire chain, potentially leading to a partial or full collapse of relations, threatening the survival of all embedded in the overlapping network

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[16]Prinz, Jesse. "Is Morality Innate." In *Moral Psychology*, edited by W. Sinnott-Armstrong. Oxford University Press, Forthcoming. Velleman, David. *Foundations of Moral Relativism.* (Open Book Publishers, 2013).
[17](Schwarzenbach 2009).
[18](Rawls 1971, 485, 486, 494, 499).

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(supported above via Prinz's and Velleman's work). The normative claims of "holistic reciprocity" are:

1) we ought to care about parts of the whole (individuals, individual entities, and systems (ecological)) to better the whole (the caring network of relations), strengthening relations (this is loose talk mind you)[19] and

2) we ought to encourage caring reciprocity because all can benefit if all who *can* participate *do* participate.

Reciprocity improves the parts of the whole, and hence the whole system of caring relations. There is an important caveat to keep in mind, which I have mentioned previously, but it is worth emphasizing again. I am aiming for a culturally neutral account of caring, and hence reciprocal holism ought only be encouraged amongst different cultures and not forced; 'helping' can easily devolve into paternalistic practices, so when promoting reciprocal caring, one should keep this limit in mind. As noted, caring practices and practices of reciprocity do vary among cultures and communities. One or other practice need not be considered 'right,' 'wrong,' better, or worse. Communities ought to refrain from imposing their own practices onto other communities, although discussion, dialogue and communication with respect varying practices should be encouraged.

5.3   Care as a Practice: What We Should Care about and the Principles of Care

In this section, I delineate not only in what the practice of care consist via caring principles, but also what we ought to care about. In other words, I will answer the questions, what do we care about and what ought we to care about when we practice care? The extension of

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[19]I present a rough sketch of what we ought to care about more specifically in the next section.

these classes, I will argue, may be best elaborated by relying on the distinction between productive labor and ethical reproductive labor and praxis. What we in fact do care about includes both objects of production (such as material objects) and reproduction (relations) whereas, what we *ought* to care about more should be objects of reproductive labor and praxis, as suggested by Schwarzenbach.[20] If this distinction is maintained, then perhaps the proper object of care may be, not material things, prestige or career, but closer to that of establishing a genuine friend, Schwarzenbach's transformed conception of *philia* from Aristotle, which includes people, animals and even the environment. A number of care theorists have discussed the particulars of what is required for caring practice: trust, receptivity, responsiveness, etc., hence I will focus next on the less addressed question: what should we care about?[21] I will then attempt to specify the duties of care, the guiding force behind our practices, while simultaneously arguing that these duties require a limiting condition – fairness.

In order to have a clearer understanding of what we ought to care about, I first examine what we do care about, making use of Frankfurt's conception of "caring about." Frankfurt understands "caring about" to be closely related to what we take to be important.[22] Although we may fail to care about what is important to us, we often do care about what is important to us.[23] To review briefly Frankfurt's treatment of care I presented in chapter 3, he claims a person who cares about X is "invested in it" and "identifies himself with what he cares about," susceptible to its losses and benefits, and concerns himself with it.[24] Care is lasting and guides behavior, according to Frankfurt. If so called "care" is not action guiding, this reveals a preference or

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[20](Schwarzenbach 2009, chapter 2).
[21](Tronto 1993), (Held 2006), (Kittay 1998).
[22](Frankfurt 1988, 259).
[23]Ibid., 269.
[24]Ibid., 260.

liking or fondness, rather than genuine care. Ultimately, cares are the guiding force in our lives.[25]

In chapter 3, I argued that caring involves a complex of emotions and emotional dispositions, contrary to Frankfurt's account. Thus, although Frankfurt's account is incomplete, it is here only taken as a starting point.[26]

People care about practically anything and everything: their family, cars, computers, social cause, collections, art, pets, politics and any number of imaginable things. Not only may they feel the relevant caring emotions, such as concern, but they prevent harm or damage, maintain such objects, restore them to their former glory or seek to promote the object's "flourishing." Personal projects may be included in this class as well, as noted by Frankfurt.[27] The important things we care about, relevant to morality, are arguably families, pets, and the environment to name a few. Devising a complete list of what we ought to care about would be impossible and also pointless. Creating such a list would be impossible because if we can care about anything, then the list would need to include anything, meaning everything, which would approach infinity (as the mind is arguably infinite). Creating such a list is pointless as well because, as I will argue at the end of this chapter, there should be flexibility in terms of what one ought to care about. Hence, my purpose here is only to describe roughly and in general terms what we ought to care about.

Although people surely do care about (and for) the objects mentioned, the relevant

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[25]Ibid.

[26]Helm, Seidman, and Jaworska argue also that Frankfurt's account is mistaken because caring cannot be reduced to a belief-desire model of moral psychology. Further, I want to emphasize that Frankfurt's account is only a starting point in the moral investigation of care. He clearly does not aim at a moral analysis of the concept of care, however, I believe his non-moral description sets the groundwork for formulating a moral concept of care. It calls to some basic commonalities among many sometimes divergent theories of care, such as genuine care being understood as action guiding, as opposed to mere likeness or fondness for something, one of the tenets of the account presented here.

[27](Frankfurt 1988, 258).

question is: what ought we to care about? In other words, what ought we to value?

Schwarzenbach recapitulates Aristotle's distinction between production and ethical reproduction

(*praxis*), which provides *a useful guide as to what we do and ought to care about.*[28] In the case

of production on the one hand, "the product is the *telos* or end of activity," and the activity is but

a means.[29] Such activity is identified with *techne* (art, craft, skill) by Aristotle. This category

encompasses a substantial substrate of what people care about, the ends of production, cars,

televisions, or clothing for instance, but further includes the craft of the baker of skill of the

tennis player. Action or *praxis*, on the other hand, is activity performed for "its own end, done

for its own sake."[30] Ethical reproductive praxis, moreover, involves "all those rational and moral

activities which aim at "reproducing" a concrete set of human relationships – in the best case,

relationships as pure ends in themselves."[31]

　　To be clear, I am not claiming that we ought to not care about production, particularly

production that is associated with human flourishing, like the arts for instance. I am only

claiming that production should take a back seat to reproductive praxis in terms of the action's

moral worth, and particularly in the case of care. Why? Because care is arguably *the basis* of

human flourishing. If one's basic needs are not met then art likely cannot be produced or

appreciated (much). So in the case where people struggle to survive, caring for the sake of

human survival ought to take precedent over the protection or production of arts. But when basic

needs are met, production associated with the arts holds tremendous value in promoting

flourishing. Although Schwarzenbach's discussion focuses upon the ethical reproduction of

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[28]I do not intend Schwarzenbach's conception of ethical reproduction to replace care, rather, I
think it proves an insightful and principled way of determining what we ought and ought not to
care about in a moral sense – a central aim of this section.
　[29](Schwarzenbach 2009, 38).
　[30]Ibid., 39.
　[31]Ibid., 36.

human relations, she also include(s)

> all those reproductive activities which aim at the good of the other for that other's own
> sake, whether the "other" is animal, vegetable, or mineral, . . . tending to the feathered
> wild – whether farm animals or birds and beasts of the woods, including the care of
> streams and forests themselves.[32]

Clearly, the ethical reproduction of other non-human relations are included in her conception of reproductive *praxis*. I here leave aside many questions about her notion of reproductive *praxis*, but again, my aim is not to specify a definitive list of what we ought to care about. I only hope to draw the rough boundaries of what I believe we ought to care about. Below, the specifics are delineated via the principles and duties of care.

Held, Tronto, Friedman, Noddings, Robert Goodin, Engster, and Tove Pettersen, to name a few, all speak of our responsibilities and of possible caring obligations.[33] The four general principles of care I propose, comprised of various duties, are largely drawn from Engster's and Pettersen's delineated obligations to care, specifying in greater detail for whom and what we ought to care about. I understand "principle" here as a broad and general rational guideline, whereas duties are more specific, requiring or forbidding particular kinds of actions. I understand these principles as situated universals, a concept of Warren's I introduced in chapter 2. To recall:

> They are "situated" in that they grow out of and reflect historically particular, real-
> life experiences and practices; they are "universal" in that they express
> generalizations common to and reflective of lives of diverse peoples situated in

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[32]Ibid., 154.

[33](Held 2006), (Tronto 1993), (Friedman 1993), (Noddings 1982), (Pettersen 2008), (Engster 2005). Goodin, Robert. *Protecting the Vulnerable: a Re-Analysis of our Soical Responsibilites* (Chicago: University of Chicago Press, 1985).

different historical circumstances.[34]

As noted, these principles are derived from the care literature which has largely drawn on the experiences of women, reflecting common practices of caring. Ultimately, these are the principles and duties that guide the practice of care.

All the above thinkers emphasize and recognize that we have special obligations to those with whom we are in close personal relations, those with whom we are in a special position to care for, such as family, friends, colleagues and neighbors. Pettersen refers to these kinds of relations as instances of "thick care."[35] She clarifies these relations thusly: "one's knowledge of the other is detailed and discriminating."[36] Engster claims our primary duties to care in part are devoted to others with whom we are in special relations or are in a special position to care for.[37] These combined notions formulate my first presented principle of care

1) We ought to care for those with whom we are in special relations, and those we are in a special position to help, particularly family and friends, but also including neighbors and colleagues. As noted in my previously presented definition of caring, care often involves preventing harm and meeting needs, but ideally promoting flourishing, while respecting the autonomy of the care recipient - the positive duties of care; furthermore, we ought not harm or disrespect the cared for, avoiding vicious and incontinent acts – the negative duties of care.[38]

Caring for the self was a largely under developed idea in the early years of care theory,

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[34](Warren 2000, 114).
[35](Pettersen 2008 114).
[36]Ibid.
[37](Engster 2005, 66).
[38]Negative duties roughly are non-interference duties, meaning that one may not interfere with another's legitimate ends (also perfect duties). Positive duties are roughly positive action duties, meaning that were are required to do something (also imperfect duties).

however, both Engster and Pettersen emphasize the importance of self-care, describing what it involves specifically. Pettersen sees good care as a virtue between the vices of selfishness and of selflessness. So although care for others is important, so too is care of the self.[39] Engster understands care for the self as the other half of one's primary duties to care. He claims we have a duty to care for ourselves because we are in the best position to meet our own needs and this in turn helps to sustain caring for others.[40] The inclusion of a duty to care for oneself is imperative for a comprehensive ethic of care, so as to avoid the possibility of extensive self-sacrifice, a common criticism presented against care theory.

2) We ought to care for ourselves, often preventing harm and meeting needs, but ideally promoting our own flourishing (positive duties to care); furthermore, we ought to avoid harming ourselves (a negative duty); pursuing one's passions is an integral part of flourishing and caring for the self, if life circumstances make doing so possible.[41]

Care ethicists also recognize that care ought to be extended beyond those we are in special relations with, including strangers, those within our own communities and nations, as well as more distant others in other countries. Pettersen classifies such caring relations as "thin care," those we do not know well or at all.[42] Engster would divide Pettersen's category of thin care into two categories: those within close proximately to us, sharing some kind of social relation (fellow citizens for instance), and all others, such as those in distant countries from our own.[43] Both Engster and Pettersen describe these duties as secondary caring duties, left up to the

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[39](Pettersen 2008, 125).
[40](Engster 2005, 66).
[41]As we have duties to care for ourselves because we are part of the holistic relation, I will argue below that we may have particular duties to care for those who cannot care for themselves to maintain the holistic relation.
[42](Pettersen 2008, 114).
[43](Engster 2005, 67).

discretion of the care giver, *when one is able.*

3) We ought to care for local and distant others, a positive duty, preventing harm as much as possible within reason;[44] meeting needs and promoting flourishing are not required for some, encouraged for others, but also required for some, *depending upon one's own life circumstances and resources*;[45] negative duties involve avoiding harm as much as possible, as well as vicious and incontinent action.

Finally, the last principle of care I propose is not typically addressed in the care literature. Schwarzenbach, however, recognizes the importance of caring for animals, as well as the environment, as do ecofeminists. This work gives rise to the final caring principle I propose.

4) We ought to care for the environment, including but not limited to non-human animals, plants, and ecosystems. Environmental care typically consists in negative duties, not to harm or harm as little as possible at least within reason. One ought to pollute as little as possible for instance, avoiding vicious and incontinent actions,[46] while meeting needs and promoting flourishing (the positive duties) are required only when one is able.[47]

Principles 1-4, I suggest, should all be balanced by the principle of fairness, which I will say more about below. In brief, the principle of fairness from Engster "states that all individuals are

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[44]This is admittedly vague. By "within reason," I mean that it is likely impossible to avoid all harm. Due to one's life circumstances, one may not have the economic luxury of purchasing fair trade and socially conscious goods, for instance. Furthermore, it may be impossible to avoid doing so in each and every case, even if one is well off, simply due to the time required to make such determinations. Hence, I only urge that caring requires to "do the best you can."

[45]If one has more than adequate resources to care and support his or herself and ones in close relation, then one is required to care for local and distant others. If one's resources exceed what is needed to care for oneself and those with whom one is in close relation, then caring for distant others is encouraged. If one only has enough resources to care for oneself and those with whom they are in close relations, then one is not required to care for local and distant others.

[46]Again, the same application of "within reason" applies here as above.

[47]The notion of positive duties I implore here diverges from Kant's in that positive duties are universally required but the extent of their performance is left up to the agent. As with all of the proposed caring principles, one is only required if one is able.

obligated to contribute their fair share to the maintenance of any cooperative scheme that mutually benefits them."[48] So depending upon one's life circumstances and resources, one may only be required to care for his or herself (in dire circumstances) or only for those he/she is in special relations with, when resources are limited, or perhaps also local for distant others and or the environment, resources permitting. Care for oneself has gone too far if such caring leads to vicious or incontinent acts towards others, discussed in chapter 4, violating other caring negative duties. Similarly, if one has the means to provide care for others, but mostly fails to do so, self-care has gone too far. These cases violate the principle of fairness.

Principles 3 and 4 are in need of further elaboration. Principle 3 may require simply being mindful as to where one's money goes, how workers are treated at such companies, considering distant rather than local others. However, care for neighbors and fellow citizens also falls under this category; meeting needs may be a requirement in certain circumstances – when one is able. Principle 4 may also require being mindful as to where one's money goes in terms of a company's environmental practices, but I shall leave this duty vague intentionally. Torture, less controversially, is a harm to any animal, but the issue of causing an animal a quick death as morally permissible, I will leave open, as I aim to keep these duties as culturally neutral as possible.

It is evident that these obligations can and often do conflict. Also, an agent may place too much emphasis on one duty over others. To alleviate some of these tensions, I suggest fairness as the liming condition for each principle and subsequent duties, balancing each principle against the others, along with practical considerations. Ruddick and Held too emphasize the importance

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[48](Engster 2005, 62).

of fairness when caring.[49] To be clear, *I am not claiming that a principle of fairness will provide a clear algorithmic way of resolving all conflicts within a caring scheme*, rather, *fairness will serve as a starting point and rough guide* for resolving conflicts between an overemphasis on particular principles and duties. Unanswered questions ought to be expected because I aim at a culturally neutral concept of caring and fairness.

Engster's principle of fairness may be too narrow for my aims here. (He too finds the principle problematic, as participation in a cooperative scheme could exclude those unable to care.) However, a colloquial conception of fairness could avoid these negative consequences. Surprisingly, fairness appears to be a little analyzed concept in the ethics literature. Of course, justice is famously analyzed in terms of fairness by Rawls, but fairness itself seems to be understood as a basic or primitive concept. His conception of fairness does not harmonize perfectly with caring practices amongst individual relations. Granted, Rawls's aims are political and because of this, he conceives of fairness as requiring fair institutions and that "one has voluntarily accepted the benefits of the arrangement or taken advantage of the opportunities it offers to further one's interests."[50] Caring relations, ideally ought to be fair, but may not be (reciprocation may not be equal), while they are often not voluntary. Although fairness needs further analysis, at present a colloquial conception "people getting what they are due and required to do their part" will suffice to maintain a flexible and culturally neutral notion of caring.

Certainly, disagreements will arise amongst differing cultural and political communities as to what others are "due" and what "doing their part" consists in, however, Rawls provides us

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[49](Held 2006, 40). Ruddick, Sara. "Injustice in Families: Assault and Domination." In *Justice and Care*, edited by V. Held. (Westview Press, 1995).
[50](Rawls 1971, 111-112, 96).

with the procedural framework of fairness via his notion of the original position, starting with the veil of ignorance.[51] Although the original position aims to determine principles of justice amongst citizens, a modified version could alternatively aim to determine what constitutes fair caring between oneself and various overlapping networks of care. Adopting Rawls's notion of the veil may be helpful here as well. The veil provides an impartial and unbiased hypothetical perspective for citizens to adopt when determining the principles of a just society. For our purposes, individuals could adopt this perspective to determine "what people are due" and in what "doing their part" consists with respect to care and caring responsibilities. According to Rawls, parties are unaware of their position in society, race, gender, income, age, etc. In determining fair care, individuals could adopt this perspective as well. Below, I run through a couple of possibilities in an attempt to clarify further in what fair caring consists, checking each principle against the other from the perspective of a modified version of the original position behind the veil of ignorance. I want to emphasize that this is but *a rough and ready sketch of how to balance each principle against the others, always constrained by fairness, while leaving room for flexibility and revisions.*

Conflicts between caring for oneself and caring for those we are in special relations with may be some of the most common conflicts amongst caring relations. However, conflicts can surely arise when considering distant others, as well as the environment. According to our colloquial definition, each person or entity should get what is due to him or her or it and also do their part in turn when able. Caring may inherently involve near constant conflict. In meeting another's needs, one may sacrifice some flourishing or needs of his or her own self. Self-preservation is an underdeveloped aspect of caring, hence one ought not to care to the point of

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[51](Rawls 1971).

harm or detriment to oneself (in normal circumstances) and this is recognized in the original

position; such a limit may be reasonable. Demanding others to care to the point of self-harm

appears unreasonable as presumably those deliberating the point would be reluctant to care to

that point themselves, based on valuing their own survival and health. Sacrificing one gourmet

coffee per week in order to donate money to environmental causes for distant others clearly does

not constitute a harm, but whether Westerner's may be permitted to enjoy coffee at all while

others suffer is a more complex matter. As Engster notes, so as to allow for multiple conceptions

of care and the good life, many of these question may need to be left unanswered at least for our

purposes here.[52]

 A mother may frequently need to sacrifice her own personal flourishing to ensure her

child's needs are met, however, she ought not sacrifice to the point where her own mental and

physical health are at risk. She would not receive her due – at the very least, having her basic

needs met. The child too would suffer in the end as the quality of care would diminish along with

the health of the mother. Ultimately, some self-sacrifice is to be expected and required at times,

but not at the expense of the caregivers overall wellbeing, terms that caregivers and those in need

of care could reasonably agree to.[53] Hence, sustaining one's own basic needs may be what is

"due" to ourselves, which *more or less* may constitute what is due to each person. So roughly,

we may say that being required to sacrifice one's basic needs, not just occasionally, but

consistently, causing serious detriment to the oneself, for the sake of those we are in special

relations with, or for distant others, or for the environment would be unfair.[54]

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[52](Engster 2005, 52-53).

[53]Such a requirement is likely contrary to current parental practices where mothers bear a disproportionate burden of child care duties. This suggests and further supports the idea that social institutions need to be implemented to provide adequate and fair care for all.

[54]New mothers caring for infants are often in this very predicament, sacrificing their own needs to meet the needs of their child. I am not suggesting that mothers should abandon their

But what is due to the near and dear, more specifically? The answer to this question again will vary drastically depending upon the relations, one's circumstances and cultural practices. Children and others unable to care for themselves, it may be agreed upon in the original position require having their basic needs met, and this is their due. Since individuals are unaware of their abilities behind the veil, it would seem unreasonable to deny that satisfaction of basic needs is due to the near and dear, as the individual could ultimately deny their own needs in doing so. That's not to say that the one caring bears sole responsibility for the needs of the near and dear throughout all of his or her life, rather the responsibilities will vary drastically amongst relations, but especially within political structures and social circumstances.

Although it may be fair to sacrifice some flourishing for the sake of one's children or for those who cannot care for themselves, it would not seem fair to sacrifice flourishing to meet the needs of another, who is fully capable of caring for him or herself. Again, from the original position, this appears a reasonable conclusion; others behind the veil will likely not agree to such demands of care placed on them by others. Such sacrifices may be permissible when caring at times, but not required as the wellbeing of oneself ought to be preserved. In other words, giving up one's leisure time consistently to make dinner for an able bodied spouse would not be fair, if it leads to a lack of flourishing or harm to the caregiver. Of course one may enjoy cooking, and such a case would not necessarily constitute harm or detriment. So again, those with whom we are in close relations may be due to have their basic needs met, but only insofar as doing so is not detrimental to the self. Again, I am not intending to make claims about who in particular is responsible for the meeting of needs here. Institutions ought to play a much bigger role in care

infants, rather mothers ought to be cared for by others as well or at least others must contribute to the care of the infant to allow the mother to care for herself.

giving than they do at present, as Schwarzenbach and Held argue.[55] I am only claiming that it

may be fair to sacrifice one's flourishing and or needs for the sake of the near and dear at times,

as long as caring is not detrimental to oneself.

As for local and distant others, perhaps sacrificing one's own needs may not be fair as

relations are weaker in this case than in the case of close relations, but sacrificing flourishing

may still be fair from the perspective of the original position. Thus, sacrificing at least some

gourmet coffee for the sake of local of distant others, *prime facie* is fair, but sacrificing your own

basic needs (or those with whom we are in close relations) for food or shelter for the sake of

local or distant others may not be fair. Engster brings to bear the practical considerations of

caring, noted by other theorists: caring is best performed within "close" relations either

proximately or emotionally conceived or both.[56] Caring across distances may be possible, as I

will discuss in the last section of this chapter, but it is not ideal. Nonetheless, the wealthy seem to

be in a special position, as they possess more resources than most, hence sacrificing some luxury

or flourishing may be demanded in such cases.

Further conflicts are possible when considering those with whom we are in close

relations versus local or distant others. For instance, is it fair for a wealthy Western child to

receive the best of education, music lessons and further enrichment while other children suffer

and starve? Again, broad sweeping claims to answer such dilemmas will fail here, since we are

not limiting conceptions of the good. However, perhaps the sacrifice of some flourishing could

be fair in such cases, but I am hesitant to delve into such dilemmas as they only arise due to the

massive economic inequalities structured within global society, which requires dissolution for

many reasons. Perhaps it is unfair for the wealthy Westerner to invest so much into his or her

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[55](Schwarzenbach 2009), (Held 2006).
[56](Engster 2005, 67).

own child, but this misses the point that political change is required here and fixing global poverty (or even local poverty) is not the responsibility of only the few. Such would require the development of caring national and international institutions, but an adequate description of such institutions is beyond the scope of this dissertation. Many other theorists have suggested institutions along these lines including Tronto, Held, Schwarzenbach, and Fiona Robinson to name but a few.[57]

Similar limits of fairness may apply to caring for the environment. Sacrificing one's own well-being for the sake of the polar bear may not be fair, but sacrificing a luxury or aspect of flourishing may be. Instead, the conflict may be between caring for those we are in close relations with or distant others and the environment. Engster provides good guidance here, I believe. He notes that care is best performed by those in close proximity so this is where our strongest obligations lie. Spending considerable amounts of time with family and friends or even local others at the expense of having less time to devote to researching the best environmental charity or donate less money, practically speaking, may be the most reasonable course of action in some circumstances. However, if one is enmeshed in few close relations, one may devote more time to such efforts. So in addition to fairness, practical considerations are another constraint on caring principles. But what is the environment due? We may "meet the needs" of the environment in less direct ways – then meeting the needs of persons – by not harming, preventing harm, or reversing harm (such as pollution).

Finally, choosing between distant others and the environment, particularly when choosing between charities, may occur. However, these conflicts generally may be rarer. One may care for

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[57](Tronto 1994), (Held 2006), (Schwarzenbach 2009), Robinson, Fiona. *The Ethics of Care: A Feminist Approach to Human Security (Global Ethics and Politics)* (Temple University Press, 2011).

the environment and distant others simply by being mindful of product sources, working

conditions and corporate practice of brands purchased, etc. I discuss more examples illustrating

how fairness may balance each principle, especially with respect to the fourth principle, in the

final chapter.

5.3.1 A Digression: Relations Accounts versus Individuals Accounts and the Care/Justice Dichotomy

In the last section, I discussed what we ought to care about and delineated the principles

of care. In particular, I described how *individuals* ought to act towards other individuals, groups,

and the environment, when caring is required, and when it is not. Although I take these rules to

apply to individuals within various kinds of relations, I focused on the behavior and duties

toward individuals, rather than duties of relations purposefully. Although the focus on relations

within care theory is dully welcome and needed, I will argue that the importance of relations

have been overemphasized by care theorists. Adding to my arguments in 4.2, I believe that

individuals and relations are of equal importance. But, I want to take my claims a step further

here and argue that the concept of cultivating relations does not make sense without an account

of individual considerations, aiming at the good of the individual in the relation. The

overemphasis on relations is symptomatic of another point I want to argue: that justice and care

are not *as* distinct as purported by some care theorists.[58] Justice and care, I claim are

interdependent concepts in their development toward a complete ethic, two sides of the same

coin, where one makes little sense in isolations from the other, such as with the concepts of

individuals and relations. That is to say: care and justice are different, but closely related features

of morality. Care and justice have often been conceived of as not only sharply distinct, but

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[58]For instance, (Held 2006), (Gilligan 1987) and (Noddings 1984).

divergent concepts, since the inception of care theory. I refer to this conception as the "care/justice dichotomy." The "individual/relation dichotomy" is just one example of several concepts clustered either within an ethic of care (i.e. relations) or an ethic of justice (i.e. individuals), seen as opposed to one another.

According to Simon Keller's individualist view of partiality, special relationships *enable* reasons for acting partiality to those with whom we are in special relations, but based upon the value of the individual.[59] More specifically, the *individuals* themselves, with whom we are in relations, their value, *justify* our actions (treating them differently than others), while the value of the individual also *motivates* our actions toward the individual. In other words, the fact that one shares a special relationship with X enables X's value to generate reasons. Thus for Keller, relationships are not valuable for their own sakes.[60] For what value does a relation have that is not beneficial to the individuals involved? To be clear, relations are important as they enable reasons for partiality toward those with whom we are in special relations, and special relations can provide numerous benefits to individuals, but they do not bear value beyond their benefits. Otherwise, we would be committed to valuing bad relationships or continuing relationships which are not beneficial to those involved.

Keller's conception of individuals as the source of value in relations flies in the face of the common care conception of relations, where relations are seen as the primary bearers of value, what ought to motivate action, and generally the central focus.[61] However, there are reasons for doubting that elations bear the primary value, explained above. Furthermore, acting for the sake of the relation seems off base phenomenologically, as Keller explains.[62] An adapted

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[59]Keller, Simon. *Partiality* (Princeton University Press, 135).
[60]Ibid., 50-64.
[61](Held 2006) and (Gilligan 1982) for instance.
[62](Keller 2013, 63).

example: if Jude and Lucy are in a caring relationship, and Jude is suffering, would we take Lucy to be acting well (or caring) if she were motivated to help by acting for the sake of the relation instead of Jude, the individual? Acting for the sake of the relation prime facie seems selfish. To push the point, let's say Jude is drowning and Lucy is moved to save Jude in order to save the relation. This case may more clearly indicate that Lucy's motives seem misguided. It seems that the appropriate motive for Lucy is to save Jude because of Jude's value as an individual – not for the sake of the relation. Through similar types of examples, Keller concludes that we often are not motivated by relations to act; we simply do not tend to respond to the value of relations. Persons likely would not want to be in relations with one who was moved by the relation. So it seems that the individualist view of partiality may do a better job of explaining the phenomenology of reasons for action than a relationship based view.

Keller notes that we are in a special position to care for some people, rather than others, and hence we have reason to care for those we are in a better position to care for, explaining why relations enable reasons for partiality toward some individuals and not others. He admits that the justification for partiality ends at his primitive view: the fact that you share a relationship enables X's value to generate reasons for acting. He cannot explain further why we have special reasons, regarding individuals with whom we share special relations. But, the individualist view is at least no worse than the relationship view, which claims that relations are the source of reasons of partiality. Hence, Keller provides some good reasons (I think) for emphasizing the role of individuals in relations and their value: they are the source of value and reasons for our acts of partiality, both justifying our actions and motivating us. However, relationships are still important (equally important, as I have argued) because they enable our reasons to respond to a particular individual's value. Keller admits himself that this view prime facie appears counter

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intuitive, but consider the desire for happiness for a moment. By aiming directly at happiness, by simply trying to be happy, one will often fail. Happiness is achieved, often, by pursuing other means, which will in turn lead to happiness. Perhaps relations are similar to happiness in that when aiming for good relations, we should set our aim off the target, instead aiming towards the good of individuals, thereby cultivating good relations.

The further significance of Keller's analysis is that his conception of individuals and relations begins to dismantle the care/justice dichotomy, as relations are often associated with care and individuals with justice. Keller's conception of partiality illustrates the interdependence of individuals and relationships – we simply cannot make sense of our behavior in relations without a specific conceptions of individual motives. Likewise, care theorists have continuously demonstrated how the concept of an isolated individual is nonsensical within any ethical theory. Ethics itself is incoherent unless understood as an enterprise attempting to delineate how we ought to act in relation with other people.

In the table below, I have listed the common cluster of concepts typically associated with either care or justice.

Kantian Ethics/Justice Theory	**Care Ethics**
How do we decide what to do?	
abstract	concrete
universal	contextual
impartiality	partiality
reason	emotions
The conception of persons	
independent	dependent/interdependent
autonomous	embedded in relations
individual	relational
equal (in value)	recognize inequality in capabilities and autonomy
What persons deserve	
respect	care

Table 5.3.1: Concepts of Justice and Care

Velleman, who influenced Keller, also describes special relations, loving relations in particular, as constituted by the value of the individual rather than the value of the relation.[63] In addition, he provides an understanding of partiality which is less at odds with impartiality, even illustrating how these concepts may be complimentary. Throughout Velleman's analysis, he illustrates further ways in which the care/justice dichotomy comes apart, revealing the interdependence of supposedly oppositional concepts and theories, such as the respect/care dichotomy, the abstract/universal and concrete/contextual dichotomy, as well as others, in addition to the individual/relations and partiality/impartiality dichotomies. For the sake of time, I will focus on Velleman's account of the attitude toward the beloved, which involves universality, particularity, rationality, and incomparability.[64] I should note that Velleman's account pertains to adult relationships of love, but I believe much of his account can be generalized and applied to a theory of care.

Velleman's account of love is Kantian at its core, but also is strongly influenced by Iris Murdoch.[65] Velleman sees respect and love as along the same continuum, where respect is the "required minimum" and love is the "optimal maximum" response to the same value: the dignity of persons.[66] Hence, although love is *particularistic*, focusing on an individual, it is universal in the sense that all persons possess the same value. Velleman does, however veer from the traditional Kantian interpretation of dignity in terms of the rational will. Alternatively, Velleman says:

> rational nature is not the intellect, not even the practical intellect; it's a capacity of

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[63](Velleman 1999).

[64]Ibid., 360-61.

[65]Particularly in Murdoch, Iris. *The Sovereignty of the Good*, (New York: Routledge & Keegan Paul, 1970).

[66](Velleman 1999, 366).

appreciation or valuation — a capacity to care about things in that reflective way which is distinctive of self-conscious creatures like us. Think of a person's rational nature as his core of reflective concern, and the idea of loving him for it will no longer seem odd.[67]

For Velleman, rationality involves the ability to value ends, and since persons are ends in themselves, the rational will is "a capacity to care about things" in a reflective way. This understanding of valuing persons illustrates the interdependence of the universal/contextual dichotomy, casting doubt on the disassociation, where a contextual relationship is realized through universal value. Likewise, Velleman goes on to note that we appreciate the universal through contextual experience – we appreciate the value of all persons through appreciating the value of those with whom we are in special relations, recognizing all have the same value, namely dignity.[68]

Incomparability is the final component of Velleman's conception of the attitude of the beloved, which involves multiple layers, both Kantian and Murdochian. Persons whom we love possess incomparable value, according to Velleman, because persons do not have a price; they have dignity and that which has no price cannot be compared, as first delineated by Kant.[69] Contrary to care theory or any view which sees relations as the prime bearers of value, we do not treat those with whom we are in special relations differently *because* our relations with them are more valuable than other relations. On the contrary, *individuals* with whom we are in special relations are the source of value for Velleman, and their value cannot be compared to the value of other individuals. Again, his account calls into question the relations/individual dichotomy, focusing upon the value of individuals in relations, rather than the relations themselves, and

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[67]Ibid.
[68]Ibid., 373.
[69]Ibid., 366.

furthermore questions the care/respect dichotomy, where each is seen as along the same continuum, differing in degree. Although Velleman discussed love only, good care, as I have argued, constitutively involves respect.

As for the Murdochian components of incomparability, Velleman describes her account of love as impersonal and objective, an exercise in detachment, as she puts it, "really looking."[70] "Really looking," for Murdoch, involves attention and respect. When we love a person, we see them for who they really are, their true self, achieved only through an unbiased and objective perspective, at a distance, detached from the beloved. An objective perspective, to see the true self, cannot be achieved via Noddings's engrossment for instance, where one may minimize differences and exaggerate similarities of the other to oneself, overwhelmed with emotion and feelings of partiality. Murdoch's conception of love is impartial in a sense, but particular, an unbiased perspective focusing on a particular person.

"Really looking" and seeing a person, according to Velleman, brings about feelings of awe and wonder toward the beloved, a kind of suspended attention, where one is simultaneously close to yet distant form the beloved.[71] When struck with awe at the beloved, we become emotional vulnerable to him or her, letting down our emotional defenses. As Velleman says that minimal respect arrests our tendency toward self-love, love arrests our tendency toward emotional self-protection and we become receptive to and affected by the beloved. But an obvious question arises: if all persons possess the same value, why do we love some but not others or why do we not love everyone? Velleman argues that everyone expresses their dignity differently and we are only receptive to particular ways in which particular persons express their dignity. So one loves another because he or she responds to the way in which the other expresses

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[70](Murdoch 1970, 15).
[71](Velleman 1999, 360-61).

his or her dignity, but one does not respond in the same way to others' expressions of dignity.

Now, Velleman casts doubt on the reason/emotion dichotomy, as well as the partial/impartial dichotomy. The reason/emotion dichotomy is questioned as his account of love constitutively involves both rationality and emotionality. Moreover, he has presented a particularist conception of love consistent with impartiality: love that constitutively involves aspects of impartiality such as unbiased and objective attention and valuation. Collectively, I believe that these various illustrations of the interdependence of care and justice concepts demonstrates the interdependence of these notions, revealing they cannot be easily dissected and distinguished. Hence I take it that neither care nor justice can stand alone. Each needs the other, as in isolation, they are both incomplete and incoherent.

Held, however casts doubt on Velleman's conception of love, particularly "the attitude toward the beloved."

> He sees it as an attitude toward something universal – rational nature or the status of being incomparable – possessed by every person – in the beloved. The ethics or care, by contrast, would see the beloved as a unique, particular person to be valued for herself, rather than for her exemplification of something universal and it would value the particular relation between the person and beloved.[72]

I question whether Held's conception of caring here is inconsistent with Velleman's account of love. Individuals are valued for their universal dignity, *but* we respond to the particular way in which the beloved expresses their value. I think this aspect of Velleman's theory recognizes the uniqueness of individuals, as well as their unique value. Granted, however, Held's and Velleman's accounts do diverge with respect to what is the prime bearer of value: the

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[72](Held 2006, 91).

individual for Velleman and the relation for Held. In conclusion, I have hoped to show that there

are substantive reasons for focusing upon individuals in relations, while also providing a rough

sketch as to the interrelatedness of the concepts typically associated with care and justice,

arguing for their interdependence. Therefore, the concepts of care and justice are perhaps not as

divergent as care ethicists have supposed.

5.4   Reconceiving Care-ethical Conceptions of Autonomy and the Self

Care ethicists have re-described the role and conception of autonomy and the self to be

consistent with care theory, but few have understood these conceptions as constitutive of care

ethics, as I have in my conception of care, argued previously in chapter 2. Here, my aim is to

describe a conception of autonomy and the self, consistent with the values and aims of both care

and feminism, resulting in a more complete account of care.[73] I surely cannot do justice to the

complexity of these issues at this time, and hence focus only on a few theorists' accounts. I begin

by briefly reviewing the common threads of relational, feminist Western views of autonomy and

demonstrate how these accounts ultimately fail in their own terms, but also show how relational

accounts are in need of supplementation, via an account of the self, as well as numerous other

theories of autonomy. I then present an alternative conceiving of both autonomy and the self in

minimal terms, deflationary accounts, and demonstrate the advantages of such conceptions. First,

however, I review Slote's account of autonomy and argue that it ought to be rejected.

Slote presents a relational conception of autonomy. He does not aim to modify liberal

notions of autonomy, but rather to develop a relational conception of autonomy entirely from the

basis of care, more specifically, empathetic care. For Slote, empathy is the central "source and

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[73]This is of course a huge project, and hence, I only aim to provide a rough sketch here, requiring much further development and exposition in the future.

sustainer" of caring about another's well-being, where empathy consists in experiencing another's feelings.[74] He adheres to a basic liberal understanding of autonomy in that it consists in the capacity to make and act on one's own decisions, but further claims that respect for autonomy arises from one's ability to empathize in the appropriate caring way. Failing to respect autonomy in another is due to a failure of empathetic caring for Slote.[75] Slote sees autonomy as necessary to caring, causally relational (that our autonomy develops within relations), and constitutively relational (as autonomy requires cooperation with others), similar to Gould and Held.[76] Slote also explicitly rejects the liberal conception of autonomy with Held and Gould, which diminishes the importance of relations, as well as the importance of emotions.[77]

Prime facie, Slote's account is implausible. One may empathize deeply in a caring way with another and yet fail to respect the other's autonomy. Empathizing with another does not ensure that one will respect the other's autonomy. Empathizing may in fact encourage a lack of autonomous respect. We can imagine an overly empathetic mother feeling her adult child's pain, and, in an effort to relieve it, interfere with his or her autonomous agency. Similarly, respect for autonomy is surely possible without empathetic caring; one need not empathize in a caring way to respect another's autonomy, as Kant has clearly shown. One surely need not imagine or experience another's feelings in order to have respect for him or her.

In Mackenzie and Stoljar's volume, *Relational Autonomy*, feminist theorists present one of the first conceptions of relational autonomy, defined as such:

These perspectives are premised on the shared conviction that persons are socially

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[74](Slote 2007, 15, 13).

[75](Slote 2007, 55-66)

[76](Held 2006, 14); Gould, Carol. "Reconceiving Autonomy and Universality as Norms for Democracy." In *Global Democracy and its Difficulties*, edited by Langlois and Soltan. (New York: Routledge, 2009).

[77]Ibid.

embedded and that agents' identities are formed within the context of social relationships

and shaped by a complex of intersecting social determinants ...Thus the focus of

relational approaches is to analyze the implications of the intersubjective and social

dimensions of selfhood and identity for conceptions of individual autonomy and moral

political agency.[78]

A number of the accounts presented are either substantive, such as Stoljar's or procedural, such

as Barclay's.[79] Procedural accounts of autonomy are content neutral, only dictating particular

forms of reasoning and reflection as necessary for autonomy. Contrastingly, substantive accounts

require the adoption of particular norms in order for one to be autonomous. For instance, Kant's

account requires that one adopt the categorical imperative in order to be autonomous. However,

Uma Narayan and Khader have both argued against these typically Western conceptions of

autonomy on a number of grounds.[80] First, substantive accounts fail to be culturally neutral,

imposing supposed 'superior' values on to others; their application inevitably leads to coercive

practices in order to "free" women of various cultures from the oppressive structure in which

they reside, not respecting such women's own beliefs or values. Khader notes that many

procedural accounts sneak in moral or cultural norms, although they claim neutrality. In addition,

both Khader and Narayan note that Western feminist theories of autonomy in general –

procedural, substantive, and other forms – preclude many non-Western women from being

considered "autonomous." This suggests that non-Western women ought not to be taken

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[78](Mackenzie & Stoljar 2000), 4.

[79]Ibid.

[80] Khader, Serene. *Adaptive Preferences and Women's Empowerment* (Oxford University Press, 2011), 103, 105. Narayan, Uma. "Minds of Their Own: Choices, Autonomy, Cultural Practices, and Other Women." In *Mind of One's Own: Feminist Essays on Reason and Objectivity*, edited by Louise Antony and Charlotte Witt. (Boulder: Westview Press, 2002), 418-32.

seriously and hence are not respected. Narayan offers the alternative perspective that despite

women's compliance with cultural practices we must keep in mind that the practice imposes

constraints on choices and that choices are being made within these constraints.[81] Khader echoes

this point noting that having unchosen preferences does not mean a person is incapable of

making choices.[82] Hence many Western conceptions of autonomy ultimately fail on the grounds

of being too "robust" as I shall refer to them. Both thinkers offer an alternative "minimal

conception of autonomy," which I will attempt to develop further below.

All theories of autonomy that I have come across (in my limited study) seem to agree on

the most basic Kantian conception of autonomy, feminists in part, and liberals in all: self-

governance, self-regulation, and self-determination. The definition and common core of

autonomy then involves *the self*. Many theories of autonomy, expand upon various notions of

freedom, as well as necessary and sufficient conditions of autonomy, such as delineating specific

procedures of reasoning, or including the adoption of particular norms, as do procedural and

substantive accounts. And yet, many (not all of course, especially in the Stoljar volume) explain

little to nothing with respect to what he/she means by "the self." If the self is a necessary

constituent of autonomy, then any conception of autonomy presupposes some conception of the

self. If one's theory of autonomy is contingent upon one's notion of the self, then every theory of

autonomy necessarily ought to include a theory of the self at least minimally.

One may object by claiming their notion of autonomy is neutral over various conceptions

of the self, yet I claim this is incoherent. Robust theories of both autonomy and the self are

incompatible for instance. If the self is seen as robust, rigid, and not easily altered, then

demanding robust theories of autonomy, where one has little to no constraints on their will, could

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[81] (Narayan 2002), 422.
[82] (Khader 2011), 14.

not be applied to such a conception of a self. If the self is unchanging and determined, it would seem that one could not choose or decide freely at all, as such decisions would be determined by one's entrenched beliefs and dispositions.

One may argue, perhaps, that many theories presume a less robust theory of the self, a more minimal version, but this tends not to be the case, especially with respect to the feminist literature. Granted, feminists tend to see the self as a flexible conception, but also constituted by various identities, relations, as well as cultural and social factors – hardly minimal conceptions of the self, but rather robust.[83] Although these conceptions may be flexible, when constituted by relations and various identities, it becomes difficult to square how and if autonomy can modify or change these constitutive aspects of the self or even exist, exercising "free" choice. A decision, for instance, may be determined by one's psychological socialization. Feminist accounts of the self may be more restrictive than they purport to be, making transformation and free choice – an exercise in autonomy – difficult to impossible. As a result, robust accounts of the self have difficulty in explaining how dramatic change of one's characteristics, one's values, etc. is possible. Hence, without specifying *how* autonomy functions with respect to one's accounts of the self, such accounts remain incomplete at best and at worst incoherent. In the end, many Western accounts of autonomy of the self fall into the category of being too robust and thus are incoherent.

I will now describe a possible alternative deflationary conception of the self and autonomy, largely drawn from Narayan and Khader, to circumvent these issues. Narayan defines autonomy as such:

A person's choice should be considered autonomous as long as the person was a 'normal

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[83]Meyers, Diana. *Self, Society, and Personal Choice* (New York: Columbia University Press, 1989).

adult' with no serious cognitive or emotional impairments and was not subject to literal

outright coercion by others.[84]

In turn, I will present my definition of autonomy and the self, distinct from persons and

identities, then discuss some advantages of these notions. Finally, I argue with Gould and Held

that the self can only be understood and actualized within relations.

The *essential* self, I claim is simply current conscious awareness, nothing more.[85] There

are, however, *contingent* aspects of the self, which include one's desires beliefs, values,

emotions, sensations, thoughts, characteristic, identities, memories, etc. These aspects, I take it,

are *non-essential* aspects of the self, *the content* of one's essential self or conscious awareness,

which are fluid and flexible. The essential self interfaces with the contingent self, but the

essential self is not equivalent to the contingent self. In other words, the essential self does not

include one's desires beliefs, values, emotions, sensations, thoughts, characteristic, identities,

memories, etc. The essential self is only current conscious awareness, not identical to the content

of awareness. Such a view sharply contrasts many feminist conceptions of the self where

identities may be seen as essential.

"Identities" are clusters of socially constructed beliefs and dispositional attitudes,

possibly giving rise to particular emotions, directing behavior and dictating values, and on my

view, directing and dictating the non-essential aspects of the self. "Persons," I see as the

conjunction of the essential and contingent aspects of the self. "Autonomy" is a feature of the

essential self, conscious awareness, acting upon, determining, regulating the content of one's

awareness i.e. one's desires beliefs, values, emotions, thoughts, characteristic, identities,

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[84](Narayan 2002), 429.

[85]Dainton also puts forth this view. Dainton, Barry. *Self: Philosophy in Transit* (Penguin Books, 2014).

memories, etc., and ultimately making choices. More specifically, autonomy is the capacity to reflect upon and reason with respect to one's desires beliefs, values, emotions, thoughts, characteristic, identities, memories, etc. Autonomy does not exhaust my conception of the essential self as the essential self is not always active, but at times, passive and observing, rather than reasoning or reflecting.[86] Autonomy may still be seen as self-determination, but on this account, more specifically, it is determination of the non-essential, contingent self, deflating and minimizing traditional conceptions of self-regulation and governance.

Considering my arguments against robust theories of autonomy and the self, as well as against standard feminist theories, deflationary conceptions of these concepts may be the only coherent alternative left. If robust theories fail, we must seek out a deflationary conception; otherwise, it would seem we are forced to deny the existence of autonomy and the self altogether. However, there are further reasons to accept deflationary conceptions of the self and autonomy, some theoretical, others empirical, and some normative.

Theoretically speaking, the above conception of the self allows for the greatest possible autonomy, an advantage for any feminist account of autonomy. Since the only essential part of the self is conscious awareness, persons may be seen as fluid, where their desires beliefs, values, emotions, thoughts, characteristic, identities, and memories, may evolve and change, as these aspects are only contingent constituents of the self. If persons are conceived in this way – with a minimal essential self – the barriers to change are less substantial, yielding possibilities for greater autonomy. One can transform one's characteristics, self-descriptions, identities and values *more easily*, *not easily mind you*, when these aspects are only contingent.

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[86]My conception of the active versus passive self is derived from Kant's notions of the noumenal and phenomenal selves. Kant, Immanual. *The Critique of Pure Reason.* Edited by Paul Guyer and Allen Wood. (Cambridge University Press, 1999).

Empirical evidence suggests that the self does not exists in the traditional or robust sense.[87] For instance, Daniel Dennett argues, "neuroscience has discovered that 'there is no single point in the brain where all information funnels in,' and 'there is no observer inside the brain.'"[88] Prinz casts doubt on the phenomenal self, experiencing the self as a subject. Although he clearly is not making a metaphysical claim about the existence of the self, one may perhaps see his arguments against the experience of the self to at least provide some evidence against the existence of the self.[89] If we cannot experience the self as a subject, perhaps then the self (in this sense) does not exist. Barry Dainton also casts doubt on the existence of traditional conceptions of the self, noting psychological and neuro-scientific research.[90] The mounting evidence against more robust theories of the self may then lend some support for a deflationary conception.

For a moment, let's say that I am wrong and that a robust theory of self is true. Still, I maintain that there are normative reasons for conceiving of the essential self in a minimal way. We ought to conceive of persons this way because doing so facilitates one's ability to overcome the bounds of oppression, domination, and socialization.[91] Of course, a deflationary conception of the essential self does not necessarily lead one to achieving more freedom and agency, but it can make doing so easier. If one does not see oneself as essentially anything, except as a conscious being, then change is less of an obstacle psychologically speaking. If persons are a collection of fluid characteristics, descriptions, values, beliefs, identities, etc., then changing

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[87]Hood, Bruce.*The Self Illusion: How the Social Brain Creates Identity* (Oxford University Press, 2013). Baggini, Julian. *The Ego Trick* (Gratan Books, 2012).

[88] Liu, JeeLoo. "Introduction." In *Consciousness and the Self: New Essays*, edited by JeeLoo Liu and John Perry. (Cambridge University Press, 2014), 4.

[89] Prinz, Jesse. "Waiting for the Self." In *Consciousness and the Self: New Essays*, edited by JeeLoo Liu and John Perry. (Cambridge University Press, 2014), 123-49.

[90](Dainton 2014).

[91]I do not mean to suggest that one is solely responsible for one's own autonomy. Socialization and various political and religious constructs certainly shape and can make the exercise of autonomy more difficult.

these aspects is not completely insurmountable. Again, this conception does not make

transformation easy, but it does make transformation easier. Furthermore, the spectrum of one's

choices may broaden when a deflationary conception of the self is adopted, since one (ideally)

may be less restricted by one's identities, when conceived of as fluid and modifiable.

Held and Gould emphasize the role of choice and agency, the importance of social

relations, joint activity, and the role of care in their accounts of the self and autonomy.[92] My

account concurs with their emphasis and I will explain how below. First, I want to emphasize the

role of reason, reflection, and choice with respect to autonomy, like Held and Gould, yet

contrastingly, I specify the object of reflection and reason as aspects of the contingent self,

desires, beliefs, values, emotions, thoughts, characteristic, identities, memories, etc. Although I

take the essential self to be simply consciousness, I understand *persons* to be essentially socially

situated. As noted by both Held and Gould, one becomes autonomous within caring relations,

where the skills of autonomy can be encouraged and developed. Hence, social relations produce

autonomous persons. In addition, cooperative social relations and joint activity are often

necessary for agency, also emphasized by Held and Gould. One may not be able to pursue

individual goals in isolation without any support or facilitation from others; even more likely,

goals tend to be common to multiple individuals, requiring cooperation and joint activity.

Schwarzenbach makes a similar claim. "A friend thus is not only a necessary condition for

awareness of ourselves, but also for their further illumination."[93] On this account, persons are

essentially social and their autonomy can only be realized when embedded in relations.

Therefore, although I have presented a deflationary conception of the essential self as well as of

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[92](Held 2006 14, 48, 84), (Gould 2009, 164, 165, 167).
[93](Schwarzenbach 2009, 43). So, Schwarzenbach is saying here that selves are only realized and developed through relations with others.

autonomy, selves remain socially situated on my account, consistent with the values and aims of both care and feminism, resulting in a more complete account of care.

5.5 Relational Caring Persons: the Friendship Model

Above, I began to sketch an account of caring persons, who are autonomous and yet embedded in relations. Now, I aim to provide a clearer picture with respect to how caring persons ought to be embedded in relations via Schwarzenbach's model of personal and political friendship. Plumwood suggested conceiving of the self as not completely merged, a distinct self, yet connected to others and the environment, as the self-in-relation, noted in chapter 2. Plumwood, however, did not fully develop this notion, but as Schwarzenbach's model of selves and relations bears similarity, I utilize her notion to provide a more comprehensive account. Schwarzenbach argues for a broader conception of "friend" than the colloquial notion, borrowing from Aristotle's conception of *philia*. According to Aristotle, *philia* extends to good relations between, siblings, various family members, including parents and children, lovers and fellow citizens.[94] Schwarzenbach defines Aristotle's notion of *philia* as "mutual awareness and liking, reciprocal wishing of the other well for the others' sake, and a practical 'doing' for the other." These are the "common denominators of all friendships throughout Aristotle's work."[95] Her conception of friendship mirrors and influenced my conception of care previously presented. Schwarzenbach augments Aristotle's concept of friendship claiming his account is missing a critical aspect: "the reciprocal goal or desire to establish and maintain this moral equality as well, the autonomy of the other;" material inequalities may surely be present.[96] With Schwarzenbach's

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[94]Ibid.

[95]Ibid., 44.

[96]Ibid., 49-50). By "moral equality," Schwarzenbach is referring to a goal of friendship, equality in virtue and the things which affect it.

theory of friendship, we now have a principled way of guarding against paternalism in caring

relations as her conception of friendship includes promoting the autonomy of the other.

Ultimately then, caring persons are seen as embedded in relations, namely friendships (in the

Aristotelian sense), yet are autonomous themselves, while promoting the autonomy of those with

whom they are friends.

Schwarzenbach expends this notion of personal friendship to political friendship, yielding

a more comprehensive account of social relations. She argues that political friends still share the

same three tenets of personal friendship: involving mutual good will, reciprocal wishing fellow

citizens well for their own sake, and practical doing.[97] Of course practical doing would not be

possible with each and every fellow citizen, however, one could participate in actions which

benefit the community as a whole. But then, what is the difference between political and

personal friends according to Schwarzenbach when each share the three basic tenets of

friendship? Schwarzenbach notes that the difference lies in concrete knowledge of the other, as

well as in intimacy and emotional attachment. We have at least some knowledge of all personal

friends, whereas intimacy and emotional attachment can vary, but with respect to political

friends, each of these aspects is absent.[98] These concepts of personal and political friendship

provide a clearer picture of how caring persons are situated within relations (I would deem

caring relations), and what is constitutive of different types of caring relations between persons.

Now that we have established a general conception of this, I will go on to describe in greater

detail the nature of caring relations.

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[97]Ibid., 53.
[98]Ibid., 54.

5.6 Concrete versus Abstract Caring Relations

In this section, I will suggest first that ideally, we are engaged in *concrete* and *abstract* relations of care (inspired by Gould's account of concrete universality,)[99] where all caring relations involve the appropriate caring *emotions and desires*, *reasoning*, *motives*, actualized in caring *action*, i.e., in actual practical doing. These relations correspond with principles 1, 3 and 4. Secondly, we can make sense of abstract relations when care is understood as involving *counterfactual practical doing* where one ideally wants to do the care work for the sake of the care recipient and would if she could, *but* minimally and necessarily wants to fulfill her caring duties (e.g., meeting needs) towards the care recipient. Other actions, such as donating money or paying someone else to do care work (the actual practical doing), and not wanting to fulfill caring duties for the sake of the care recipient, I deem to involve non-caring abstract relations. Recall that in section 4.3, I argued that minimally, caring requires wanting to fulfill one's caring duties for the sake of the cared for. The absence of a caring motive results in the lack of caring on my account. And finally, if one never takes action, one is in no relation at all; if particular emotions are directed toward a class of persons or things such as sympathy for the poor, this may be as a connection, but not a relation.[100] These distinctions will be described and explicated next, followed with the introduction of examples illustrating these different relations and the lack of relations.

5.6.1 Caring Relations, Non-caring Relations, and Connections

To recall, caring action requires at least preventing uncontroversial impending harm, typically the meeting of fundamental needs, but ideally aiming to promote flourishing of the care

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[99](Gould 2004).

[100]In section 4.4, I argued that caring requires action.

recipient, at least respecting autonomy, but also promoting autonomy when possible.[101] Concrete

caring relations consist of those typically described by theories of care, such as those we are in

close relations with (family and friends), but also those we have communicated with directly and

cared for in some way delineated in the above definition. Contrastingly, abstract caring relations

extend towards distant others or even those not so distant with whom we have had no

communication, but cared for in some way. Hence, communication, whether virtual or in-person,

is the dividing line between concrete and abstract relations on this account. One may have

concrete relations with others, but not caring relations with them, such as with co-workers whom

are only acquaintances. Therefore, concrete caring relations require caring for another – but the

medium is left open, including virtual mediums – whereas concrete relations (lacking care) may

only involve some form of communication.

Both concrete and abstract caring relations involve caring emotions, desires (caring

motives), reasoning, and caring action.[102] For instance a mother may feel sympathy (a caring

emotion) for her child who had a bad day at school. She is motivated to help and console the

child, motivated by wanting to fulfill her caring duties (e.g., meeting needs) for the child's

sake.[103] She may then reason concerning how to best care for the child or how to resolve a

dilemma, if one is faced. Finally, the mother consoles the child (practical doing/caring action). I

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[101]Inspired by (Held 2006), (Schwarzenbach 2009), (Gould 2007) and (Engster 2005).

[102]For emotions, see (Noddings 1984), (Held 2006), (Tronto 1993), and (Gould 2004); for caring motives, see (Slote 2001) and (Held 2006); for reasoning, see (Schwarzenbach 2009); for action, see (Held 2006) and (Gould 2007).

[103]One mother may want to partake in the *activity* of consoling for the sake of the child, yet another mother may find consoling a struggle (it is not her strongest skill), however, she still wants to *fulfill her caring duties* of meeting the child's needs for the child's sake. (Aristotle makes a similar distinction between action and production, highlighted by Whiting.) Both mothers are ultimately motivated by wanting to care for their respective children, and hence, both are caring. Although one mother may struggle with the activity as the means to caring, such a struggle ought not count against considering a care-giver as caring, lest we are in danger of devaluing difficult care work.

leave open the possibility that caring emotions may be absent on occasion when practicing care: although such care is not ideal, it remains care. If a mother, for instance, isn't feeling well or is overly stressed, she may at times lack caring emotions or they may be weak. I do not rule out that such cases still constitute care as long as caring motivations and caring action obtain, as argued in chapter 4. Reasoning too may be absent at times, when one is faced with a common situation where care is needed. Not to count such cases as care, I believe would be too strict a notion of care. I take care work/practical doing and caring motives to be the most integral aspect of an ethic of care (as do many others),[104] so even if the practice of care does not meet ideal standards it would be a mistake to deny that care is taking place.[105] Much care work would be devalued if this were the case, by not reaching the ideal standard, a result care theorists want to avoid since one primary purpose in developing care ethics is to recognize and value care work.

Concrete and abstract caring relations differ, however, in that concrete caring relations require at least some *actual practical doing* (although some counterfactual doing may be present) whereas abstract caring relations involve only *counterfactual practical doing*.[106] One practices counterfactual practical doing when one designates another to do care work for him or her that one cannot do him or herself due to life circumstances, but who would do the care work/practical doing/wants to do the work ideally, but minimally who would want to fulfill his or her caring duties him/herself (e.g., preventing harm, meeting needs, etc.), if one's life circumstances allowed it. So, for instance, one may feel concern and strong passion towards defeating world hunger, however, one may not have the time nor means for the practical doing and may only

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[104](Held 2006), (Gould 2007), Bubeck, D. *Care, Gender and Justice* (New York: Oxford University Press, 1995).

[105]As I referred to continent care in chapter 4, the unorthodox use of the term.

[106]The domain of counterfactuals is restricted to the next closest possible world where one could fulfill his or her caring duties him or herself.

have the means to donate money. As long as one would want to fulfill her caring duties if her life circumstances allowed it, and donates money, then one is in an abstract caring relation. Working mothers are similarly situated when they hire child-care workers in terms of counterfactual practical doing. As long as a mother would want to fulfill her caring duties him/herself, but life circumstances make this impossible, then hiring a nanny would constitute a concrete counterfactual caring relation in this context, but not necessarily overall.[107]

Contrastingly, one who is involved in neither actual practical doing nor counterfactual practical doing is not in a caring relation; if one designates another to do care work for him or her and does not want to fulfill his or her caring duties him/herself, then one is involved in a non-caring relation. Non-caring relations may be either concrete or abstract. For instance, the wealthy socialite who almost never spends time with her children, pays for their care (even good care), and does not want to fulfill her caring duties herself (regardless of life circumstances) is not in a caring relation with her children, but rather in a concrete non-caring relation; she shares things in common with her children, such as the biological or legal child-parent relation, and the fact that she pays for their care, but since she does not want to fulfill her caring duties herself, she is not in a caring relation with her children. Likewise, even a mother who is not wealthy and perhaps cannot care for her children due to life circumstances, but still would not want to fulfill her caring duties herself if the circumstances allowed, also is not in a caring relation, but rather in a concrete non-caring. One who donates money to a humanitarian cause from motivations other than care would also constitute a non-caring relation, although abstract in this case.

Finally, one who does not perform any caring action is in no relation, but may be

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[107]So a mother may be in a counterfactual caring relation with her child with respect to caring during the day, but may nonetheless be the primary caregiver to the child at all other times, constituting practical doing. Hence, practical and counterfactual doing can be relative to particular domains.

involved in a connection. Hence, if one worries about starvation in Africa and feels sympathy for those starving, but never performs a caring action, then such feelings and emotions are simply that, feelings. A connection is present, but action must occur at some point in order to be in a caring relation;[108] the complete absence of action is contrary to the notion of care, and a lack of action may involve either impulsivity, indifference, or viciousness in the Aristotelian sense, described in chapter 4.[109]

Below I have included a table in order to clarify further the distinctions between caring relations, non-caring relations, and connections with the appropriate emotions, reasoning, caring motives, actual practical doing, and counterfactual practical doing. An 'X' signifies that the condition obtains. Caring relations, non-caring relations, and connections apply to overall relations with persons, but actions may be relative to particular domains. For instance, a parent may be in a concrete caring relation with a child practicing practical doing (when doing the care work themselves) or they may practice counterfactual practical doing with a child (when hiring a babysitter), but may do most of the care work overall, i.e. practical doing may be the dominant form of care in the relation. Or one may be in a non-caring relation only with the problem of world hunger (donating money), but may be in concrete or abstract caring relations with other persons or causes.

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[108]Also noted by (Gould 2007).

[109]As caring requires respect for autonomy, caring may at times involve not acting.

	Emotion	Reasoning	Caring Motive	Actual Practical Doing	Counter-factual Practical Doing	Negative Counter-factual Practical Doing
Concrete Caring Relation	X	X v ~X	X	X	X v ~X	
Abstract Caring Relation	X	X v ~X	X		X	
Concrete Relation		X v ~X		X		X v ~X
Abstract Relation		X v ~X				X
Connection	X					

Table 5.6.1: Caring and Non-caring Relations
Note: Negative counterfactual practical doing resembles counterfactual practical doing sans the caring motive, i.e., helping/sending money, but not wanting to perform one's caring duties.

One may here wonder: what is the utility of such an analysis? Why should we make such fine distinctions between types of human relations? Understanding the nature of a relation, I shall argue, is crucial if we want to improve upon such relations. Without such distinctions, one can easily gloss over the nature of one's relations, and think he or she is "caring," but revealing the nuances of relations could reveal that one's relations are of a different nature, than initial shallow reflection believes. For instance, upon momentary reflection one may think, "Yes, I am a very caring friend towards X." However, if one reflects upon how much actual practical doing one partakes in, one may discover that she may not spend as much time with her friend as she could. Perhaps one has declined a few invitations to meet or not returned a few phone calls from the friend in question recently, and upon realizing this, one may be motivated to make a greater effort to engage with her friend. Of course, one may come to such reflections on one's own, but the purpose here is to formalize the process to some degree, to reveal the nature of care and fill-in the theorizing of care ethics.

5.6.2   Further Examples

At this point, I will illustrate with a few more examples of what the proposed caring and non-caring relations may look like in hopes of making these conceptions clear. Many, by now, have discussed concrete relations and practical doing, so I will focus upon counterfactual practical doing, negative counterfactual practical doing, abstract relations, and non-caring relations, For instance, the struggling Westerner who does not (and will never) have the means to visit X distant land, but feels the emotions of care (such as concern and sympathy) towards those in need in X, is motivated to help partly by fulfilling her duties of care for the sake of those in need, and counterfactually she would fulfill her duties if she could, and alternatively donates money, is caring and such caring would constitute an abstract caring relation on this account. Contrastingly, the wealthy CEO who feels no concern and sends money to charity for the purposes of good "public relations" (negative counterfactual practical doing) is not caring and hence in a non-caring abstract relationship, not only because he lacks the appropriate emotions but also because his motivations are not caring motivations – they are selfish in fact. Alternatively, the CEO who sends money, feels sympathy, is motivated to help partly by fulfilling her duties of care for the sake of those in need, and counterfactually would fulfill her duties if she could, and plans to do it, is in an abstract caring relationship, presently practicing counterfactual practical doing, soon to be realized as a concrete relation involving actual practical doing.

Yet a different wealthy Westerner may send money, feel sympathy, but does not want to fulfill his caring duties concretely for the sake of those in need (negative counterfactual practical doing). He is not in an abstract caring relationship, but in an abstract non-caring relationship.

Perhaps this person is acting out of a sense of duty *only* in the Kantian sense,[110] however, this case fails the requirement of actual or counterfactual practical doing, and hence does not constitute a caring relation at all; possessing only some caring emotions is neither necessary (in all circumstances) nor sufficient to constitute a caring relation, even if one acts, fulfilling their caring duty, as one must *want to* fulfill his or her caring duties for the care recipient's sake. Here, we can see how care ethics and Kantian ethics can come apart, again. This person may perform a morally praiseworthy action according to Kant, but this action is not caring under my proposal, as argued in sections 4.3 and 4.4. That is not to say that these conclusions are inconsistent in any way. This person's action could be morally praiseworthy, although not a caring action, which reveals that care demands more of moral agents than Kantian ethics appears to require. Further possibilities of the complexities of concrete and abstract relations are surely possible, but I have only hoped to clarify a few here; this exercise is not intended to exhaust all possibilities. My aim has been to clarify what caring relations and non-caring relations generally look like. As argued previously, we are obligated to be involved in various kinds of relations when able via my arguments for holistic reciprocity in chapter 5.

Finally, if care is only a partialistic ethic, we may doubt that it is a full ethic at all. The purpose of an ethic, I take it, is to provide guidance in how we treat others, namely all others. Traditional ethics have demonstrated failures with respect to how we treat the near and dear for the most part (as noted by care ethicists), which was an integral motivation for the beginnings of care theory. However, if care theorists only concern themselves with the care of the near and dear, then care ethics would suffer the same one-sided failings as traditional ethics. Hence, the most complete ethic will offer guidance in both domains, the near and dear as well as distant

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[110]So in this case, the wealthy Westerner may *not want to fulfill his caring duties*, but alternatively, *believes that he has the duty* and is motivated instead by this belief.

others, and therefore, care must include distant others in its formulations, if it is to have a chance at competing with the traditional theories of ethics. Much more work is surely required, however, I hope to have made a small contribution to the developments of care ethics by presenting a possible analysis of different kinds of relations.

5.7 Conclusion

In this chapter, I presented a conception of in what a caring person consists. I began by grounding the practices of the caring person in holistic reciprocity, and followed with the specification of what we ought to care about, and then delineated four principles of care, requiring one to care for oneself, the near and dear, distant others, as well as the environment. I went on to explore various care-ethical and feminist conceptions of the self and autonomy. I revealed the weaknesses with such feminist theories and argued for a deflationary account of both, autonomy and the self. Next, I began to deepen my analysis of relations, utilizing a friendship model of relations to describe ideally how relational caring persons are situated. Finally, I further expanded upon the nature of such relations, distinguishing caring relations from non-caring relations, as well as concrete and abstract relations.

This chapter completes my preliminary account and analysis of care understood as a sentiment, as a virtue, and some crucial aspects of caring persons. In the final chapter of this dissertation, I will apply the theory constructed here to various environmental issues in an attempt to demonstrate that a care-based ethic may provide better solutions to such issues in contrast with non-care-based ethics.

6 Conclusion

6.1 Introduction

To recall chapter 1, one of the central aims of this dissertation is to contribute to a change in attitude toward the environment – to care about the environment and its preservation – and to describe a caring practice in which to achieve this aim, utilizing elements of care ethics and ecofeminism. The second focus has been to show how utilizing a care-based account can provide better solutions to environmental issues in contrast to non-care-based accounts. To facilitate this project, I have spent much time developing the theoretical and psychological framework of care ethics, so as to clarify in what caring for the environment consists, ideally. I first recapitulate briefly the previous chapters in order to demonstrate the theoretical steps, which have led to this final chapter.

In chapter 2, I presented a definition of care, which is essentially a synthesis of other classic conceptions of care from the feminist literature, but with an emphasis on autonomy. At the very least, "care" means a) to prevent uncontroversial impending harm, typically meeting fundamental needs, but ideally also promoting the flourishing of the object of moral care, while b) while at the same time respecting the autonomy of both the care-giver and care-receiver. As I conceive of this definition, it provides a baseline test for evaluating action, an applicable general *criterion for determining* whether an action falls within or outside of the domain of caring, or more specifically, within or outside *the practice of care*.

Chapters 3 and 4 partook in a different goal: to further clarify *the psychological elements and framework of both minimal and ideal care,* and hence provide aims and checks for individual reflection to facilitate caring affect, reasoning, and ultimately behavior. More specifically, these chapters sought to provide the *psychological criteria for both ideal and*

minimal caring. Caring action and practice remain the final goal, and these chapters focus on

delineating *the cognitive and affective processes required* to achieve the best care practices.

Both normative and metaphysical groundings for *the practice of care* were supported via

the notion of "holistic reciprocity" in chapter 5. Recall that "holistic" refers to the whole system

of reciprocity, as in chains of overlapping networks, where no member is in complete isolation in

a web of caring relations. By "reciprocity," I have a very broad notion in mind (similar to

Schwarzenbach's), where give and take may obtain over a life time, while "giving" may be as

simple as a sigh of relief and "taking" the acknowledgement.[1] I also argued there that we ought

to care about objects of reproductive *praxis*, persons, and the environment (and its inhabitants) in

particular, and described four caring principles – a further set of *criteria for practicing care* –

along with the limiting condition of fairness. To recall briefly the principles are as follows:

1) We ought to care for those with whom we are in special relations, and those we are in a
   special position to help, particularly family and friends, but also including neighbors and
   colleagues. As noted in my previously presented definition of caring, care often involves
   preventing harm and meeting needs, but ideally promoting flourishing, while respecting
   the autonomy of the care recipient - the positive duties of care; furthermore, we ought not
   harm or disrespect the cared for, avoiding vicious and incontinent acts – the negative
   duties of care.

2) We ought to care for ourselves, often preventing harm and meeting needs, but ideally
   promoting our own flourishing (positive duties to care); furthermore, we ought to avoid
   harming ourselves (a negative duty); pursuing one's passions is an integral part of
   flourishing and caring for the self, if life circumstances make doing so possible.

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[1](Schwarzenbach 2009, 48).

3) We ought to care for local and distant others, a positive duty, preventing harm as much as possible within reason; meeting needs and promoting flourishing are not required for some, encouraged for others, but also required for some, *depending upon one's own life circumstances and resources*; negative duties involve avoiding harm as much as possible, as well as vicious and incontinent action.[2]

4) We ought to care for the environment, including but not limited to non-human animals, plants, and ecosystems. Environmental care typically consists in negative duties, not to harm or harm as little as possible at least within reason. One ought to pollute as little as possible for instance, avoiding vicious and incontinent actions, while meeting needs and promoting flourishing (the positive duties) are required only when one is able.

The colloquial conception and limiting condition of fairness was described as "people getting what they are due and required to do their part," another *criterion for the practice of care*. In addition, I presented caring conceptions of the self and autonomy, arguing for a deflationary account on both normative and theoretical grounds, another *psychological criterion* for caring. Lastly, I described the nature of ideal caring relations generally, modeled after Schwarzenbach's conception of friendship, going on to specify the nature of concrete and abstract caring relations.

As the final aim of this project is to apply care theory to environmental issues, I will focus primarily on my discussions of the criteria for the practice of care. This is not to say that the psychological criteria bear no significance to environmental issues. Specifying an ideal form of caring provides general guidance as to how best psychologically to aim at care, and also at caring with the greatest proportion of ease – although granted, much care work is not easy. Thus, although the psychological criteria may not be directly applicable to resolving moral issues, their

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[2]The arguments made for holistic reciprocity in chapter 5 support this principle, as well as the other principles of care.

utility lie in providing a framework to facilitate the practice of care. As for the criteria for the practice of care, I will apply these components of the present theory to two environmental issues – wilderness preservation and the moral status of animals – comparing the practice of care to traditional utilitarian and Kantian methodologies and solutions that is to non-care-based theories. I will then compare a virtue ethical account (a care-based theory in particular) to the care-ethical account presented here. But first, I must defend further one component of the presented theory, namely the grounding of care in holistic reciprocity. Whereas I previously provided both a metaphysical and normative grounding, I will now also provide an empirical grounding.

6.2   Empirical Support for Holistic Reciprocity

I briefly review three studies, which I think demonstrate the importance of caring relations, a chain of relations – holistic reciprocity. Two of the studies investigate the relationships abused children have with others, and the last investigates the tendencies of prosocial behaviors among the abused. First allow me to lay out some obvious assumptions; in my interpretations of these studies, I assume that both abuse and neglect qualify as neither experiencing nor teaching care; indeed, I believe abuse teaches harm and neglect teaches apathy. In C. Howe's and R. Eldridge's study, they discovered that mistreated children interact differently with their peers than do non-maltreated children.[3] Maltreated children responded to aggression with aggression, while non-maltreated children react by crying. Maltreated children also resisted friendly behaviors and responded to the distress of others with aggression, whereas non-maltreated children responded with pro-social behavior. We can conclude form this study, I think, that children who did not experience care, tend to respond to others in non-caring ways.

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[3]Howes, C. and Eldridge, R. "Responses of Abused, Neglected, and Non-Maltreated Children to the Behaviors of Their Peers." *Journal of Applied Developmental Psychology* 6 (1985): 261-70.

Granted this study was small, but it still lends support to my claim that caring behaviors encourage further caring behaviors, strengthening the chain of holistic reciprocity. Suzanne Salzinger's study discovered that maltreated children displayed less reciprocity with friends, a key element of caring behavior, which I discussed in chapter 5.[4] Hence again this study lends further support to my claim that caring encourages caring.

Finally, C. Prino and M. Peyrot studied effects on maltreated children, differentiating between the abused and neglected, while also having a control group. Physically abused children displayed significantly more aggression than both neglected and non-maltreated. Neglected children were significantly more withdrawn than abused children and non-maltreated children displayed significantly more prosocial behavior than both abused and neglected children.[5] This study may be the strongest in support of my claim as it demonstrates the relation between having caring experiences and demonstrating (caring) prosocial behavior, while simultaneously revealing that if one is taught to harm others or is treated apathetically, a reduction in caring behaviors follows as compared to those who were taught and experienced genuine care. Some victims of abuse do demonstrate resilience and go on lead successful non-violent lives, but such cases are few. In sum, experiencing the virtue of care may be neither necessary nor sufficient for becoming a caring person, but it appears to increase the likelihood of future caring whereas experiencing the absence of care decreases the likelihood of caring in the future. So, not only are we enmeshed in caring relations – and so ought we to be – but the practice of caring relations facilitates the practice of further caring, encouraging reciprocity and continuing the holistic chain of care, in other words, supporting holistic reciprocity.

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[4]Salzinger, Suzanne, Richard Feldman, Muriel Hammer, and Margaret Rosario. "The Effects of Physical Abuse on Children's Social Relationships." *Child Development* 64 (1993): 169-87.

[5]Prino, C., and M. Peyrot. "The Effect of Child Physical Abuse and Neglect on Aggressive, Withdrawn, and Prosocial Behavior." *Child Abuse & Neglect* 18 (1994): 871-84.

6.3   A Comparison: Kantian Ethics, Utilitarianism, and Virtue Ethics versus Care

There are undoubtedly a plethora of environmental issues, varying from vastly complex to simple, that individuals, communities, and nations may face on a daily basis – from what products to produce or to purchase, to human over population, etc. In this section, I will focus on what are commonly conceived of as critical environmental issues: wilderness preservation and the moral status of animals. I hope to show how the care-based ethic presented here can solve issues, which arise within these areas better than "traditional" pure forms of non-care based Kantianism and utilitarianism. Some formulations of virtue ethics bear a number of similarities to care ethics, so I reserve this discussion for my closing comments in this section below.[6] Of course, there are many other normative theories in competition within environmental ethics, such as deep ecology, social ecology and ecofeminism (which I have argued against), but addressing each and every one is impossible here. Hence, I focus on applications utilizing what are thought of as non-care based "traditional" theories of ethics. I apply the criteria of the practice of care to issues within both domains, wilderness preservation and the moral status of animals. I conclude by clarifying the distinction between care-based virtue theories and the theory presented in this dissertation, hoping to show, finally, that the conception of care delineated here bears a number of advantages over virtue theory in general.

Prime facie, wilderness preservation may appear to be a less contentious issue than many others – such as the moral status of animals – but, although the goal may be uncontentious to most, the practical aspects of preserving wilderness gives rise to complex conflicts. Ramachandra Guha discusses some of these conflicts which have arisen in India, although

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[6]Most notably, Sandler, Ronald. *Character and Environment: A Virtue-Oriented Approach to Environmental Ethics* (Columbia University Press, 2007).

similar conflicts have transpired in parts of Africa and other places as well.[7]

> Thus, Project Tiger, a network of parks hailed by the international conservation community as an outstanding success, sharply posits interests of the tiger against those of poor peasants living in and around the reserve. The designation of tiger reserves was made possible only by the physical displacement of existing villages and their inhabitants; their management requires continuing exclusion of peasants and livestock.[8]

Conflicts among humans and wild animals are common among preservation attempts – especially those advocated by wealthy Westerners and other elites – throughout Asia and Africa. The dilemma is this: ought preservationists to displace locals for the sake of preserving wilderness and the species it contains or do human interests trump environmental interests? Kantian versions of environmental ethics would likely conclude the latter or, I will argue, they could also result in an intractable position. Utilitarians, by contrast, will favor the former conclusion, depending upon the number of persons involved or whose pain or pleasure is considered morally relevant.

A classically interpreted version of Kant's ethics likely favors the well-being of the locals because Kant held that only humans, unique in their rational abilities, are worthy of respect, while all non-rational beings are mere "things" and not rational ends in themselves.[9] Since "things" are not persons, according to Kant, one may be permitted to use them as a mere means, although never cruelly, as opposed to persons, who ought never be used as a mere means, according to the second formulation of the categorical imperative. Granted, Kant discouraged the

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[7]Guha, Ramachandra. "Radical American Environmentalism and Wilderness Preservation: A Third World Critique." *Environmental Ethics.* 11 (1989): 71-83.
[8]Ibid., 78.
[9](Kant GM 4: 428).

torture of animals, as he believed such practices were generally bad for one's human character.[10] Again, because persons are the only beings with intrinsic value on Kant's account, the weighty interests of persons will always be regarded as more important than the interests of any other beings. Thus, the presented conflict above would be no real conflict for Kant: do not infringe upon the autonomy of the locals – at least to no significant extent – and thus, attempts to preserve the tiger are not morally required.

Paul Taylor famously advocates a Kantian inspired environmental ethic, where all living things are considered "teleological centers of life."[11] As such, all living things interests must be taken into account when formulating moral obligations. But this perspective only raises the question: whose or what interests take precedence? Humans require the destruction of many organisms just to survive. Taylor introduces a number of principles in his attempt to resolve these conflicts. First, he proposes a principle of self-defense: humans are permitted to defend themselves against other organisms attempting to harm them. Second, he claims that the basic interests of non-human organisms trumps the non-basic interests of humans. Finally, when conflicts arise, Taylor notes that humans are not required to sacrifice themselves for the sake of other animals. But these principles only lead to intractable positions. Humans are not required to sacrifice their well-being and livelihood for the sake of the tiger and can defend themselves, but might residing in a particular region constitute a non-basic interest of human beings? If so then the interest of the tiger ought to trump the interests of the human in this case, according to Taylor's second principle. Yet, the first and third principles seem to imply that the interests of

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[10](Kant, *The Doctrine of Virtue,* 16-17)
[11]Taylor, Paul W. *Respect for Nature: A Theory of Environmental Ethics* (Princeton University Press, 1986).

humans trump those of the tiger.[12] We are left with an intractable position.

On a classical utilitarian account such as Bentham's, the issue would come down to numbers.[13] If only the pain and pleasure of humans were considered relevant, then the solution would be not to pursue the project of protecting the tiger. However, on Bentham's own interpretation and on other modern accounts, such as Peter Singer's, the pleasure and pain of other living creatures is taken into account when determining utilitarian calculations.[14] If more pleasure (humans and other creatures) results from the preservation of the tiger, then such would be the solution and morally required. If only the pleasure of a few results from the tigers' preservation, then preservation would not be permitted and morally forbidden. Of course, calculating pleasure has proved to be an exceedingly difficult task for the utilitarian in difficult cases such as this. However, if all interests were considered equally, persons and tigers, persons far outnumber tigers, and hence the pleasure of persons would out weight the pain of the tiger. The utilitarian would conclude to not cause persons pain and displacement, but instead sacrifice the pleasure of the tiger.

None of the solutions thus far appear ideal, however, as ultimately, *either* the locals *or* the tiger will suffer in the end. The care ethicist would resist viewing the issue as choosing one side over the other and attempt to "find another way" building relations with others and nature – in this case with the tiger (metaphorically speaking of course). At this point, allow me to recall each criterion of the practice of care to demonstrate why such a solution is not only possible but, required on a care ethical account. First, the principles of care require that we care for the

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[12]The example discussed need not be limited to preservation of animal species, but could extend to the preservation of particular ecological areas or delicate regions, where preservationists see the locals as degrading the wilderness and hence must be displaced.
[13](Bentham 2007).
[14]Singer, Peter. "All Animals Are Equal." In Tom Regan & Peter Singer (eds.), *Animal Rights and Human Obligations* (Oxford University Press, 1989), 215-226.

environment and its inhabitants, as well distant others when we are able, so both the interests of the locals and the tiger must be considered. Second, our definition of care requires at least preventing harm. We would not prevent harm to the tiger without preservation efforts, but we also would not prevent harm to the locals if displacement were required. The principle of fairness supports this conclusion, for to 'side' with either could impede the critical needs of the other and hence either the tiger or the locals would not receive "their due." Furthermore, the autonomy of both must be respected, again, the tiger's "autonomy" must be interpreted metaphorically. A compromising solution is thus required, if it is to be a caring solution at all, that is, preventing harm to both and respecting the autonomy of both. Neither the utilitarian nor Kantian approach requires a compromising solution. Of course, these theories do not in principle rule out a compromise, but they generally do not *seek out* compromising results, as their aim is to apply a universal moral rule. Hence, a care ethic is advantageous in its requirement to find a solution for all involved.

So what might be the solution? Care ethicists would seek out full details of the situation, such as the tigers roaming requirements, typical migration patterns and behavior, availability of prey, as well as the way of life of the locals, their values, and how they interact with the tigers. A multifaceted solution would be required as the issue is multifaceted itself. With the aid of preservationists, for instance, locals could build electric fences around critical areas, develop alarm systems, and create a guarding system to identify tigers in the area, alert other locals, and/or attempt to scare the tiger out of the area. Numerous solutions may be possible – these are merely a few suggestions. And not only may these methods save the tiger from slaughter, but they could help to build the local economy as well by creating work for the construction, maintenance and guarding of the area, also supported by the preservationists. Such a solution

would be beneficial to both the tiger and the locals, preventing harm to both, while even helping to meet some economic needs of the locals. Such a solution, is preferable to Kantian or utilitarian solutions where only either the locals or the tiger benefit.

The issue of the moral status of animals is *prime facie* more controversial. Is it permissible to utilize non-human animals for human products and consumption? Setting aside issues of factory farming, which many agree is at least problematic and at most morally forbidden, is it permissible to kill an animal 'humanely' for human consumption? As noted in the previous example, Kant himself would not object to such a practice, and would forbid animal torture. However, another modern version of Kant's theory, now proposed by Tom Regan, arrives at the contrary conclusion: it is never permissible to use an animal as a mere means, for he argues, animals have rights.[15] We ought to extend moral standing to animals because they are "subjects-of-life;" they perceive, have emotions, beliefs, desires, etc. In other words, his basic criterion for moral standing is the possession of some form of consciousness and having interests. As rights apply universally, animals are never permitted to be used as a mere means for human consumption on Regan's account.

Again, on certain utilitarian accounts, it would all come down to numbers, calculating the pain versus pleasure of considered beings. If only the pain and pleasure of humans were considered relevant, then animals would have no special moral status. However, Bentham's and certain modern accounts such as Singer's, take the pleasure and pain of other living creatures into account when determining utilitarian calculations. The interests of humans and of animals deserve "equal moral consideration."[16] Hence, killing an animal to "please our pallet" is morally

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[15]Regan, Tom. "The Case for Animal Rights." In Steven M. Cahn ed., *Exploring Ethics: An Introductory Anthology* (Oxford University Press, 2007).
[16](Singer 1989).

reprehensible because a weighty interest is denied to fulfill a trivial one. As Singer is a

utilitarian, he does not rule out the possibility that there may be cases where the benefits of

killing an animal outweigh the costs of its pain, but he emphasizes, the same applies to humans.

Killing one human to save many is also justifiable at times. So again, animals do have moral

standing on Singer's account and using them for food or trivial products is morally objectionable.

But what are the implications of Singer's and Regan's theories? As they are to be

universally applied, all forms of meat consumption are considered morally wrong, from any

culture in any region. Although neither Regan nor Singer require vegetarian missionaries to

spread their beliefs throughout the world, they do seem to judge others who eat meat as doing

something morally reprehensible. But this is unreasonable. Some cultures, for practical reasons,

must consume meat due to the lack of vegetative nutritional resources. Populations in the far

north, the Inuit for instance, have nearly no other options. Care ethicists, by contrast, will take a

different approach.[17] Again, according to the caring principles, both the well-being of persons

and of animals must be considered. What kind of impact would a particular population face if

vegetarianism were taken to be morally required? Perhaps in the wealthy parts of the Western

hemisphere, substantial ill effects would not result in harm or even in the diminishment of

flourishing; thus, to prevent the suffering of animals, vegetarianism may be the most caring state

of affairs and morally required – considering the whole population – and according to the

definition of care in this case. This is not to say that given the way American society functions

presently that care ethicists would deem all meat consumption as non-caring and morally wrong.

Ideally, I think many care ethicists would conclude that given our current culture, we ought not

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[17]There is noted variance on this issue. Marti Kheel advocates for universal vegetarianism whereas Plumwood and Warren promote contextual vegetarianism, all from a care ethical perspective. Marti, Kheel. *Nature Ethics: an Ecofeminist Perspective* (Rowman & Littlefield Publishers, 2007); (Plumwood 2002); (Warren 2000).

to consume meat to prevent harm to animals, but considering that the current system of meat consumption is already at play, a few individuals refraining from eating meat will not prevent much harm to many animals. Hence, because little harm would be prevented by doing so, refraining from eating meat in our current system may not be caring enough and more is morally required.[18] A genuinely caring solution would need to be implemented on a political level, changing the practice of our meat eating society as a whole.

In different cultures, however, if a community would suffer harm with respect to meeting nutritional needs or perhaps severe harm to their cultural flourishing, vegetarianism may not be required; this might be the case with certain indigenous tribes whose livelihood is primarily dependent upon hunting and/or livestock, such as with the Inuit, noted above. The case of cultural flourishing is perhaps the most difficult, but as noted, I here aim to provide only some rough guidance as to how one may resolve a dilemma on a care ethical account, and hence will leave such determinations open. Cashing out in what precisely fairness consists in these cases, I imagine, is the first step in resolving the dilemma.

Finally, as discussed at great length in chapters 3 and 4, the theory proposed here closely resembles a virtue ethical account, for I have utilized a virtue ethical framework in providing some of the theoretical background for an ethic of care. So too, some virtue ethical theorists incorporate the value of care into their view, for example, Slote.[19] Ronald Sandler's theory, a virtue-oriented environmental ethic, is even one step closer to the theory presented here, for he takes a virtue ethical account, which explicitly incorporates the virtue of care, and applies it to

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[18]Thanks to Mark Budolfson for his input in developing this point. Budolfson, Mark. "The Ethics of the Marketplace and a Surprisingly Deep Question for Normative Theory: What are Consumers Required to do When Products are Produced in Morally Objectionable Ways?" Unpublished. http://www.budolfson.com/papers.

[19](Slote 2001).

environmental issues.[20] The mechanics of our accounts differ, however.

As Sandler proposes a version of a care-based theory, and that the aim of this dissertation has been to show the advantages of care-based over non-care-based theories, it would not be inconsistent for me to accept Sandler's theory as one possible alternative to the solution of environmental issues. Clearly distinguishing the nuanced differences between the theory presented here and Sandler's, as well as which theory is superior overall, would be a lengthy and complex undertaking, a worthy future pursuit. Instead of taking up this investigation now, however, I wish to emphasize some relevant differences between our theories and possible advantages of an ethic of care over his virtue ethical theory in general.

For one, the theory presented here *balances principles against one another* in order to provide action guidance, whereas Sandler *balances various virtues against each other* to guide action. Ethical theorists have often criticized virtue ethical accounts for the lack of guidance virtues provide. Sandler's account falls victim to this common criticism. How one ought to balance Sandler's virtues such as, "the virtues of respect for nature" and "the virtues of environmental stewardship" is left unclear. The presented care ethical account, although admittedly a rough guide only, provides more specific guidance for action, as described by the principles of care balanced by the principle of fairness.

In addition, care is not central to his theory, although it does play an important role as one virtue of respect for nature.[21] I am inclined to think that many of the virtues Sandler discusses, for instance, sensitivity, attunement, compassion, considerateness, etc. – ought to be subsumed under the virtue of care, resulting in a simplified theory, but as he does not do this, there is no time here to provide lengthy arguments to this effect. Although I discussed in detail the virtue of

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[20](Sandler 2007).
[21]Ibid., 82.

care, these discussions primarily served as a tool for the cultivation of relations between persons, as well as with the environment. Sandler is not concerned with relations, but rather the flourishing of both humans and the environment. Any ethical account, which fails to appreciate and analyze the moral significance of relations, I think fails, as an ethical account. As care ethicists have argued, persons are essentially embedded in relations and hence the ethics and conception of relations is critical for our understanding of persons and ethical action in general. Thus, I believe my theory has the advantage over Sandler's for recognizing, analyzing, and emphasizing the importance of relations.

In the final analysis, a care ethic may bear the advantage over a virtue ethical account in being more psychologically practical; focusing on, and education in, building relations, via the emphasis on individuals in relations, may be psychologically easier than the abstract goals of promoting the flourishing of humans in general or of the environment. As explained in 5.7, abstract caring relations are possible, but not ideal on my account, whereas on a virtue ethical account, promoting the flourishing of specific individuals or abstract groups may be no different from one another in terms of ideal ethical aims – a disadvantage of virtue ethics on my view. Treating abstract and concrete relations as equally worthy moral pursuits is problematic, according the care ethics because we tend to be in a better position to help those close to us, not only for practical reasons, but because we can often provide better care in concrete situations. Virtue, of course, does not preclude focusing on individuals and concrete situations, but such focus is not taken as primary. In short, a care ethical account may be advantageous over a virtue ethical account in terms of motivating pro-social behavior due to its emphasis on concrete situations and relations. A fuller determination of this matter would need, of course, further investigation, another possible avenue for future research in the ethics of care.

6.4   Conclusion

In this dissertation, I have explored how an ethic of care may serve to provide better environmental solutions all around over non-care-based theories, while providing realistic motivation to care for the environment via the conception of holistic reciprocity. I began by investigating the virtues and vices of ecofeminism, the virtues of ecofeminism being primarily its emphasis on care and aspects of caring. I then proceeded to clarify in what caring consists, analyzing care as a sentiment, and then as a virtue. In the previous chapter, I delineated the principles of care, and theorized as to the nature of the ideal caring person as autonomous and yet embedded in relations. This pursuit allowed me to apply this refined version of care to environmental issues in this final chapter. Hopefully, I have demonstrated how the present theory provides a better account of and solutions to a number of environmental issues, when contrasted with both Kantian and utilitarian theories. Finally, I have sketched some possible advantages of the theory presented here over a virtue oriented environmental approach, generally, although noting that a full investigation of this matter would require further study and analysis, a possible avenue for future research.

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