

Course Notes in Feminist Ethic of Care

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Joan Tronto: Towards a Feminist Ethic of Care

Joan Tronto, author of *Moral boundaries: a political argument for an ethic of care* (1993) claims that dualism, in its distinction between male and female, effectively separated the private and public realms of human life. The public sphere belongs to men while the private sphere is entirely a women's domain. The idea of care is a case in point. The notions of caring reveal traditional gender differentiation—men care for money, ideas, career, advancement; men care about their work and the provision they make for their families while women care for their friends, neighbors; women care about their families by directly "caring" for them. Caring then is engendered in the way men and women care: men care about while women care for (Tronto 1989, 173).

However, this gender differentiation in caring has been challenged by some of those who suggest that women might be endowed by qualities unique only to them (and even might be superior to men. The search for "women's morality" is an offshoot of this proposal. Throughout the twentieth century, many advocates for women have tried to use the common notion that women are more moral than men as a political tool to improve women's standing in the public sphere and this can be done by advancing women's morality (Tronto 1993, 1).

Efforts to forward a "women's morality" have not been entirely successful yet it continues to appeal to scholars and figures in everyday conversations. This is due in part to the continuing appeal of how it stresses women's contribution instead of male-bashing as some feminists want to do. Also, the qualities identified with women such as caring, nurturance, and value for preserving

human relationships are touted to be key elements of a good life contrast to a culture that encourages productivity and unlimited progress.

Tronto, however, argues that we need to stop talking about a “women’s morality” and instead proposes an ethic of care that includes the values traditionally associated with women. This ethic will do away with the conventional public/private dichotomy by understanding morality in the political context.

For Tronto, an ethic of care can be a good example of an ethic that can close the gap between the moral and political realms of human life. She posits that the truly transformative and feminist aspects of caring cannot be recognized unless we also revise our view of the political context in which we situate caring as a moral phenomenon. This ethic of care has two implications: first, care implies a reaching out to something other than the self; second, it is neither self-referring nor self-absorbing. Caring involves some kind of ongoing responsibility and commitment (Tronto 1993, 102). In this case, if caring involves commitment, then caring must have an object. Thus, caring is necessarily relational. We can say that we care for or about something or someone. We can distinguish “caring for” from “caring about” based on the objects of caring. “Caring about” refers to less concrete objects; it is characterized by a more general form of commitment. “Caring for” implies a specific, particular object that is the focus. It involves responding to the particular, concrete, the physical, spiritual, intellectual, psychic and emotional need of others. Lastly, caring is ongoing. Therefore, caring is not simply a cerebral concern or a character trait, but the concern of living, active humans engaged in the processes of everyday living (Tronto 1993, 107).

Increasingly, care is becoming disassociated with the private sphere because of the market-driven demands for caregiving. This puts care's integrity as the self-object relationship in peril because it has been wrestled out from women's domain by both state and market that are expected to create

illusions of caring; providers of services are expected to feign caring even if some have inadequate training on care-giving. This threatens the integrity of caring, which hinges on the self-other relationship.

To Care For or To Care About: The Morality Of Caring

For Tronto (1989, 175), caring is engendered in both public and private realms. We hear of statements such as he only cares about making money; she cares for her mother. Even in the job market, women's occupations are caring occupations and women do a lot of caring in private households. The logical question to ask is if "caring about" a moral activity. The answer lies in the object that someone cares about. If someone cares about justice, it becomes a moral activity because justice is a moral concern; if someone cares about something that is not a moral concern, then it is not a moral activity. Tronto underscores that "caring for" does not require this distinction of objects because it implies that a caregiver knows something about the context of care, especially about the relationship between the giver and the recipient. She gives the example of a dirty child who is not a concern of other people but these same people will judge the capacity of the child's mother to take care of her child. This example reveals the moral assignment of "caring for." What typically makes "caring for" be perceived as moral is not the activity per se but how that activity reflects upon the assigned social duties of the caretaker and who is doing the assigning.

Tronto cites Sara Ruddick who likewise denies that caring is simply a banal activity devoid of judgment. According to Ruddick (1980), maternal thinking is an example of caring, a prudential activity, where emotions and reason are brought to bear to raise a child. Sometimes, the interests of the child run counter to that of the mother whose interests revolve around the survival and eventual growth of the former. Thus, maternal thinking is a practice that does not rely solely on

instincts but also requires prudence (Ruddick 1980, 342-367 in Tronto 1989, 175).

For Tronto (1989, 170) however, this proposal needs to be considered at length. It appears that the moral concern lies in whether or not one “ought to care” rather than in the activity of caring itself. Caring poses a dilemma on morality, which is long viewed as anchored on authority and autonomy, by the special relationships between the caregiver and the recipient of care, which can be unequal, which in turn, can create dependence on both parties. The crucial issues emerge: can the activity of caring, identified with women in our society, be moral, and if it can be, what are the elements of caring that can be given moral significance?;

Four Elements of Ethic of Care

Tronto underscores that discussion on an ethic of care is not an attempt to forward a “women’s morality,” which for her romanticizes the “natural” qualities of women. If care is perceived to be instinctual alone, then it forfeits its place in the realm of moral choice. She enumerates four elements of the ethic of care that she also names as moral dimensions of the activity of caring for others.

Tronto identifies attentiveness as the first element. Caring involves the meeting of the needs of a particular other or preserving the relationships of care that exist. Knowledge is thus crucial in attaining the level of attentiveness that is needed to care for others. The caring person must, therefore, devote much attention to learning what the other person might need. This leads to attentiveness to the needs of others and receptiveness to the need of others. Tronto (1989, 176) admits that some recipients of care create pseudo-needs so it is necessary to develop genuine attentiveness on the part of the caregiver. On the other hand, caregivers can also be susceptible to projecting their own needs to others. Self-knowledge is thus required as part of developing genuine attentiveness to avoiding this situation.

The second element is responsibility. *Taking care of* makes responsibility into a central moral category. Conventional moral theories view responsibility as an obligation to follow established rules but in the ethic of care, responsibility is viewed differently. Tronto emphasizes that in the context of caring, responsibility should be viewed with flexibility—one might feel responsible to the recipient of care because of biological ties, or it could be because one recognizes a need for caring and one feels that this need should be met. Thus, responsibility ought not to be limited to a mere response to obligations or established rules.

The third element is competence. Competence should be included as part of the moral quality of care insofar as it raises the issue of the value of the care given by caregivers. Supposing a teacher is assigned to teach a course (like Math) that is not her field due to the inadequacy of school funds. Is it morally right to condemn the teacher when it is not her decision but due to the inadequacy of funds? According to Tronto (1993, 131), issues such as this brings into focus professional ethics. The example above makes good care impossible because the teacher is not competent enough to dispense adequate care to the students. Competence in care implies that even if one has good intentions, we would not permit individuals to escape from responsibility for their incompetence. This means that the teacher assigned to teach math is also responsible.

The fourth element is the responsiveness. Responsiveness includes the issues of vulnerability and inequality. It is a fact that those who need care are the most vulnerable members of our society: the children, the poor and the elderly. Responsiveness connotes that the self, who is viewed as independent and autonomous, cannot continue to be so in the face of the needs of others. Responsiveness suggests that we should be sensitive to the needs of others and not just put ourselves in their position. The assumption is that the self and the other are not interchangeable. Tronto (1993, 131) asserts that responsiveness requires responsiveness—this implies that all

elements or dimensions of the ethic of care are interconnected or part of an integral whole.

Dilemmas of an Ethic of Care

Tronto posits that the truly transformative and feminist aspects of caring cannot be recognized unless we also revise our view of the political context in which we situate caring as a moral phenomenon. This ethic of care has two implications: first, care implies a reaching out to something other than the self; second, it is neither self-referring nor self-absorbing. Caring involves some kind of ongoing responsibility and commitment (Tronto 1993, 102). In this case, if caring involves commitment, then caring must have an object. Thus, caring is necessarily relational. We can say that we care for or about something or someone. We can distinguish “caring for” from “caring about” based on the objects of caring. “Caring about” refers to less concrete objects; it is characterized by a more general form of commitment. “Caring for” implies a specific, particular object that is the focus. It involves responding to the particular, concrete, the physical, spiritual, intellectual, psychic and emotional need of others. Lastly, caring is ongoing. Therefore, caring is not simply a cerebral concern or a character trait, but the concern of living, active humans engaged in the processes of everyday living (Tronto 1993, 107).

She cites issues that are of special interest in considering an ethic of care, such as the issue of authority and autonomy. These two qualities are constant in the traditional understanding of morality. However, the special relationship between the caregiver and the recipient of care poses a dilemma to the conventional thinking of what constitutes authority and autonomy. Tronto turns to other women thinkers to shed more light on this concern.

Carol Gilligan (1982) proposes an "ethic of care" characterized by a commitment to maintaining and fostering relationships. Without this dimension, the account of morality found in the

enumeration of rights would be incomplete.ⁱⁱ Gilligan's analysis is a critique of Lawrence Kohlberg's theory of cognitive moral development, which stresses that the autonomous self, clearly differentiated from the others, is crucial to developing a moral sense. She underscores that there may well be tension between the maintenance of self and relationships; by her account, moral maturity arrives when an individual can correctly balance concerns for the self and others.

Nel Noddings (1984) also proposed a feminine approach to ethics. According to Noddings, care is a relationship between the one caring and the cared-for. The essential aspect of caring is that it involves a displacement from one's interests to the interests of the one cared-for. She writes: "Our attention, our mental engrossment is on the cared-for, not on ourselves." (1984, 24) Caring affects both the one caring and the one cared-for. It affects the one caring because she must be engrossed in the other; it affects the cared-for because the individual's needs are met. That individual must somehow respond to accept the care offered. Tronto (1989, 180), however, criticizes Noddings' approach as unable to discern that relations of care might also be relations of authority. Nonetheless, Gilligan and Noddings, according to her, can present care as a challenge to the traditional thinking that moral consciousness starts with autonomy and authority. Indeed, the very nature of caring brings into the fore issues of authority and autonomy between individuals who interact with each other.

For Tronto (1989, 183), caring involves a commitment of time and effort that may be made at a high cost to the self that can lead to the loss of the self. This is because, in caring, the self has become too committed to caring for others that the loss of the other may destroy the self. From this, we can deduce that caring cannot simply be a romanticized notion of selflessness, nor can it occur if the self remains aloof. A connection between the self and the other is necessary for the self to care.

The particularity of caring, as a moral precept, poses a dilemma to conventional moral theories that require universal moral judgments. Tronto asserts that in the context of caring, it is difficult to assign universal rules because it is the individual's decision when or how to give care or when or how to stop giving care. Caring varies with the amount of time and kind of effort that a caring individual can expend, as well as, the needs of the ones who need care, so rules cannot be specified allowing us to claim that we had applied universal moral principles. One difficulty, for instance, is that in caring, we invariably provide care to those who are closest to us and ignore the others, which is against the rule-based morality that cautions us to act impartially.

Noddings deals with the dilemma by suggesting that caring must take place in a limited context or it is not properly understood as care. That is, caring must be personal—caring for cats and birds, children and husbands and the strangers who arrive at the door. However, she draws the line at, for example, the starving children in Africa. In her attempt to explain the particularity of caring, Noddings succeeds in narrowing and restricting the notion of what it is to care. Tronto, however, argues that to say we should only care for those things that come within our immediate purview ignores how we are responsible for the construction of our narrow sphere. The fact that one cannot escape from the interdependence of things, nor isolate the self from the social reality happening around it, underscores that morality cannot just be reduced to the exhibition of caring. If the scope of moral activity is reduced to caring for those who are immediate to us, then care has little to offer to be considered as a moral category (Tronto 1989; 1983).

Towards Feminist Approach to Caring

One of the contributions of feminism to the current construction of political and moral theories is the dissolution of the so-called public and private spheres of human life. For Tronto, it is precisely the inclusion of the private to the public, which will allow an ethic of care to flourish. This is a

feminist approach in contrast to a feminine approach, which seeks to forward a "women's morality." The category "feminine" in itself is problematic. Femininity is constructed as an antithesis to masculinity. Thus, what is constructed as masculine, the normal, is in opposition to what is feminine. In this case, the construction of women as tied to the more particular activity of caring for others stands in opposition to the more public and social concerns about which men care. Care viewed in this way, reinforces the subordinate status of women; caring becomes a survival mechanism for women or others who are dealing with oppressive conditions. A feminine approach to caring, then, cannot serve as a starting point for a broader questioning of the proper role of caring in contemporary society. A synthesis of Tronto's assertion of a feminist approach to caring: it begins by broadening the understanding of what caring for others means both politically and morally if it will be made central to the everyday lives of everybody. It suggests that the moral relevance of attentiveness debunks the adequacy of the abstract, exchange-oriented individual as the moral subject. It recognizes that caring has been privatized for so long or has been particularized that attempts to provide a feminist theory must rethink how particular circumstances have been socially constructed. Finally, it looks at caring for others not as a means to pursue self-interest but as a means to emphasize the concrete connections with others. Because it evokes so much of the daily stuff of women's lives, it is worthy of the serious attention of feminist theorists to develop means to broaden the understanding of what caring for others means, as well as, working toward widening political and social structures that will make caring a part of everyday living of everyone in society. Besides, feminists have long held that emotions as embodied experience do not necessarily compromise rationality. At best, embodied experience points to new objectivity, a new way of thinking, feeling and doing. Lorraine Code (1988) holds that to exclude other forms of knowledge is to fall into an old dualistic trap of emotionality or rationality.

- i Tronto argues that a truly feminist analysis of the ethic of care must consider how caring is valued in contemporary society. In *Moral boundaries*, she enumerates how care is looked upon. First, care is seen as a weakness with its connection with privacy, with emotion, and with the needy, thus devaluing care as a “non-productive work.” Second, there is a general disdain for care recipients because to require care or to be a recipient of care, one is considered “helpless” or “needy” as opposed to being autonomous and independent. Third, care as a private activity, a private concern, oppresses women more because they are expected to provide care for their husbands and children but not to take care of themselves or the activities of caring do not provide them with opportunities to care for themselves. Tronto proclaims that care is marginalized in contemporary society.

- ii In this work, Gilligan showed that Kohlberg's theory of moral development fails to fully account for the female subjects' response to his case studies. She presents a theory of moral development, which claims that women tend to think and speak differently than men when they confront ethical dilemmas. For her, gender differentiation plays a crucial role in moral development—men are fair and value autonomy; women care and value interconnectedness. Gilligan contrasts a feminine ethic of care with a masculine ethic of justice. She believes that these gender differences in moral perspective are due to contrasting images of self, i.e. women see themselves in terms of their relationships with others. Morality is seen as responsibility toward others not just the rights of individuals, moral judgment employs compassion, as well as, reason.