CHAPTER TWO: POSTMODERN CARE ETHICS

Introduction

Any chapter on postmodern ethics should, according to radical postmodernists, consist of blank pages only. Ethics is one of the great, modern meta-narratives, to borrow a term from the post-modern philosopher pur sang, Jean-François Lyotard, and should, á la Lyotard, be treated with incredulity and deconstruction. However, less radical reviewers of postmodernism, like Elizabeth Deeds Ermarth, argue that postmodernism does not spell the end of meaning and value, still less the end of humanist meaning and value, only the end of certain hegemonies of ‘truth’, ‘nature’, and ‘reality’.

Ethics is rejected because it supposedly employs the ‘view from nowhere’ – a view ‘above’ or ‘beyond’ individual views or perspectives - that prescribes how we should behave. This view does not exist, insist postmodernists. On the contrary, they argue, each perspective is unique and every situation in which this perspective takes place is a coincidental collation of contingencies. Furthermore, experience is fleeting and essentially subjective – how can we possibly speak then of shared normative values? In the words of Ermarth, “Postmodernism presents a new problematic of negotiation between finite systems of meaning and value where no transcendental reference is possible.”

If the meta-narrative of ethics may not exist, then how can a postmodern care ethics be possible? It could only be possible in the absence of “transcendental references” (like ‘good’ and ‘right’), and if it strove to achieve a finite perspective of normativity. This perspective is what Selma Sevenhuijsen, a Dutch moral and political theorist, attempts to describe in her postmodernist ethics of care. In her book, Citizenship and the Ethics of Care (1998), in which she develops her vision of the place of ethics of care in contemporary democratic theories and societies, Sevenhuijsen advocates shared values in a differentiated, relativised and particularised form instead of transcendental

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2 Op cit, 589.
references. Her shared values are based on a postmodern brand of humanism and form the basis of her notion of communitarianism.

The question I shall be addressing in this chapter is what does postmodernism add to care ethics? To put it differently, why does modernist ethics not suffice according to postmodern care ethicists when it comes to giving an account of caring? I shall consider this question in the light of my quest for a clarification of motivation in care ethics.

Postmodernism and care ethics

Sevenhuijsen particularly emphasises the temporal (and temporary) aspect of solving ethical dilemmas. “Only attention to specificity and contextuality can keep us from expecting ethics to be a source of absolute normative truth”, she says.  

Sevenhuijsen is opposed to “foundationalism and the grand narrative of human progress”. She argues that, if we accept the postmodernist project, we should accept the fragmented, ambiguous and contingent nature of the human condition. She quotes Lyotard when he says that every attempt to describe a homogenous and unambiguous image of human nature contributes to the maintenance of an illusion. This illusion, at best, is counterproductive and at worst leads to a politics of uniformity and totalitarianism, which attempts to manage or eradicate every difference between individuals.

In this, Sevenhuijsen faithfully reproduces the central project of postmodernism: in Lyotard’s famous words, the “incredulity towards meta-narratives”. However, what does Sevenhuijsen replace modernist moral meta-narratives with? This is, of course, the crucial question. She rejects obligation, a concept which is representative, according to her, of the most destructive of all modernist inventions, the atomistic, self-governed individual. Nevertheless, she emphatically asserts the need for normative idiom in feminist philosophy. How does this idiom work to produce the humanist and communitarian effects that Sevenhuijsen desires? What are her normative alternatives to obligation?

But before we proceed, we need to understand in more detail that the combination of an ethics of care and postmodernism is by no means a self-evident one. On the contrary, as Sevenhuijsen points out in her book, the idea of an ethics of care was all too often the target of attack by postmodernist

3 Sevenhuijsen Citizenship 1998, 16.
4 Lyotard La condition postmoderne 1979, cited in ibid.
feminists. These feminists felt that care ethics only confirmed women in a traditional, one-sided identity. Care ethics was accused of bringing a general truth about women into the world, which could have a normative effect on their self-image and behaviour, and which, certainly in political contexts, could be counterproductive. In this, argues Sevenhuijsen, postmodern philosophy offered an important warning against the risks and pitfalls inherent in a feminist ethics of care. In other words, postmodernism warns that care ethics runs the danger of re-emphasising rather than eradicating stereotyped gender-associated roles and reactions in which ‘the’ woman is loving and compassionate and sympathetic and so on, and men and the masculine democratic ethos, on the whole, are not. And further, postmodern philosophy emphasises, says Sevenhuijsen, that women’s emotions need to be included in the male-dominated public sphere.

The power of post-modernism, in Sevenhuijsen’s opinion, is that it provides a number of philosophical considerations and methods of interpretation which help to make the ethics of care productive for feminism. Postmodernism as a methodology, as Sevenhuijsen employs it, undercuts identities and essentialisms like ‘women are loving and compassionate’; it differentiates, fragmentises and disperses identity. It allows her, she argues, to concentrate on every individual context rather than having to think in terms of large-scale social structures or conventions. Her ethics is then rather interpretative or hermeneutic than systematic – she concentrates on the reading of the situation rather than on the plotting of its contours, she says.

But what does she have to say about motivation? If every situation and every context is potentially unique, what does Sevenhuijsen have to say on the subject of what motivates us to act morally? Is there a human identity or ideal that transcends the uniqueness of every individual? Before I attempt to answer these questions, I shall first examine her reasons for rejecting what she refers to as the ‘liberal individualist’ concept of obligation.

**Objections to obligation**

Sevenhuijsen’s ethics of care develops out of a critique of modernist liberalism, in particular, out of a critique of liberal conceptions of individuals as atomised or detached “rights holders”. These individuals are separated from community and use ‘obligations’ to mitigate or counter the detachment that arises in a society of atomistic, self-governed individuals.\(^5\) Obligations

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\(^5\) In this Sevenhuijsen follows Giddens, who critically describes liberal conceptions of
are thus derived from the rights of modern liberal individuals, concludes Sevenhuijsen.\(^6\) This has two important consequences. Firstly, obligations are conceived of as necessary connections between individuals or between communities and individuals only as a means to *make good* the isolating and estranging effect of individualism. And secondly, the law is thus the main guarantor of the existence of morality, rather than an individual or communal normative culture. Sevenhuijsen cites the post-modernist Zygmunt Bauman\(^7\) who argues that “individual responsibility is then translated as the responsibility for following or breaching the socially endorsed, ethical legal rules”. In his analysis, modernity thrives on an “expropriation of the moral”, a process in which individuals are dispossessed of moral capacities. These capacities are transferred to the state and transformed into moral legislation. Modernity, argues Sevenhuijsen, is fuelled by a deep-seated mistrust of the moral capacities of its subjects and thus aims to legislate its moral truth claims by laying them down in moral imperatives. (Hence the continuing urge to derive legal obligations from notions of rights, argues Sevenhuijsen.) Modern morality, in this conception, is thus a quasi-legal measure of control, sanctions and penalties.

Sevenhuijsen’s alternative is as far removed from liberalism’s atomised individualism as possible: she advocates an ethics of care, a post-modern ethics of care that is *ontologically* relational. Furthermore she demands an ethics in which “*situat ed* questions of responsibility and agency” are central, in which taking concrete situations and asking what is ‘the proper thing to do’ is the appropriate way of thinking about moral interactions.\(^8\) Sevenhuijsen argues that ontology generates a far stronger compelling force to be caring (than an appeal to rights would) because, she argues, of our communitarian or relational human nature. She does not, however, go the same way as the ‘maternal thinkers’, like Ruddick and Noddings for example, inferring from the mother-child bond a necessarily relational human character. Sevenhuijsen is far more interested in the development of the subject – albeit in relation to others – into a “processional self”, something that is much more self-conscious and self-aware than the preconscious imprinting of a relation of dependence that the maternal thinkers argue happens. Sevenhuijsen’s ‘self’ is a conscious and aware self, capable of

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\(^6\) Sevenhuijsen 2000, 10.

\(^7\) Z. Bauman *Post-modern Ethics* 1992, 29, cited in *op cit*, 11

\(^8\) *Op cit*, 10.
friendship and intimacy and respect; a self that is contextualised but also distinct and distinguishable from that context.

Sevenhuijsen is not in favour of an obligation, or duty, to care because she reads ‘obligation’ as being primarily a political relationship and she fears that a government could potentially inflict upon its citizens policies that might ultimately have negative results in the interests of an emancipation policy, for example. The idea of ‘caring obligation’ in reality remains within the bounds of contractual thinking, she argues, and is thus subject to its shortcomings, namely that there is such a thing as a pre-social self, that all communication is entered into as equals, and that the individual is separated from the community. Rights are not in themselves sufficient to create a moral community she argues.

If ‘obligations’ represent only that which is pernicious and impinged on individuals from without, then what is Sevenhuijsen’s alternative to obligation? Sevenhuijsen wants to rephrase obligations in terms of responsibilities, she says, because obligations are inherently and historically connected to rights (universal, unchanging) whereas ‘responsibility’ is a flexible attitude towards diverse and dynamic situations. The central question in care ethics according to her is not “what am I obliged to do in general?” but “how must I deal with dependency and responsibility?” A government that favours the latter, she argues, will implement policy that creates preconditions for responsibility; a government that favours obligation will use its authority to compel and force responsibility.\(^9\) Sevenhuijsen rejects external pressures to enforce morality and embraces what she regards as an “internally produced normative reaction” absent of outside force, namely ‘responsibility’.

Many care ethicists, like Sevenhuijsen, reject the concept of obligation but embrace the notion of responsibility because, they argue, responsibility is a broader notion that does not have (as some moral theorists argue that ‘obligation’ or ‘obligation’ do have) a narrowly described task that can be deduced from general norms. Indeed, as the moral philosopher Margaret Urban Walker argues, the concept ‘responsibility’ consists in “many facts, in the context of judgements, perceptions, feelings, and reactions shaped in particular (and only roughly co-ordinate) ways.”\(^10\) What ‘responsibility’ is however, is not clear. Walker agrees with Bernard Williams that while

\(^9\) Sevenhuijsen 1996, 141.
responsibility clearly consists of various general, human abilities – human causal power, intention, state of mind and responses to harm or damage – “There is not, and there could never be, just one appropriate way of adjusting these elements to one another … [in] one correct conception of responsibility.”\textsuperscript{11} Despite of, or perhaps because of, the difficulty of reducing responsibility to “one appropriate way” of understanding what it is and what it does, moral philosophers like Tronto, Baier, Walker and Sevenhuijsen prefer the notion of responsibility to the notion of obligation because it can be used as a critical “tracking device.”\textsuperscript{12} Used as such, tracking responsibilities can reveal the distribution of who bears the social and familial burdens of care taking tasks, for example.

In addition to ‘responsibility’, Sevenhuijsen and Verkerk point out that there are other alternatives to obligation-based morality - friendship, mutual connections, intimacy, and respect - all of which are not needs that people can base rights on. But they are needs that make a worthy humane existence possible.\textsuperscript{13} Sevenhuijsen thus wishes to separate morality from the democratic vocabulary of obligations, rights and privileges and locates instead the motivation for normative behaviour in individuals seeking a worthy life through networks of trust, responsibility, and care taking.

**Care as social practice**

The chief concept underpinning Sevenhuijsen’s notion of post-modern care ethics is that of social practice. She defines care as a social practice in which participants experience, interpret and evaluate the need for care. She distinguishes between the activity of caring and the context in which it must take place. This makes it easier, she says, to see that care takes place in all kinds of contexts (from education to intimate relations, from professional medical care to political policy). Sevenhuijsen derives her definition of a social practice from the feminist philosophers Elizabeth Frazer and Nicola Lacey who state that “practice” refers to human action that is socially based and organised, underpinned by formal or informal institutions, usually a combination of these.\textsuperscript{14} Practices are bound up by discourses that are both produced by and produce practices. Practices and discourses exist independently of particular social subjects, yet they are also constituted by

\textsuperscript{12} *Op cit*, 77.
\textsuperscript{13} Verkerk 1994, 69, cited in Sevenhuijsen 1996, 141.
constellations of human action and behaviour. Formal and informal rules and habits, interpretative conventions and implicit or explicit normative frameworks direct practices, thus conceived. These rules and norms are not fixed, however, but subject to dispute: they are the objects of (re)signification, interpretation, negotiation and conflict.

Against this conception of practices, care can be seen as a mode of acting in which participants perceive and interpret care needs and act upon those needs. How their interpretation and acting proceeds varies according to the situation and social and institutional contexts and depends on a variety of factors, such as norms and rules about good caring and the relational dynamics between the actors concerned. This approach makes it possible to acknowledge, argues Sevenhuijsen, that care takes place in all kinds of contexts, from child-rearing practices and intimate relations, to social services, education and political deliberation. It also means that, by acknowledging the flexible and contested nature of gender and care, care can be ‘saved’ from associations with traditional and fixed gendered identities that is, according to Sevenhuijsen, an association which continues to lurk within most versions of communitarian thought.\(^\text{15}\)

Though critical of ‘most versions of communitarian thought’, like Alasdair MacIntyre’s version in his *After Virtue* (1981) for example, Sevenhuijsen emphasises that communitarianism is nevertheless the most ideal social form in that it defines people as ontologically relational. But not just any form of communitarianism. She aims at a “social-constructivist and hermeneutic interpretation of care” derived from a definition of “dialogical communitarianism.”\(^\text{16}\) This form of communitarianism proceeds from the social ontological notion that people live in communities that give meaning and interpretation to, and are important for, the forming of moral subjectivity. However, it rejects any nostalgic longing for a return to ‘old certainties’ that is associated with many types of communitarianism, says Sevenhuijsen. Dialogical communitarianism is dynamic, she argues: it proceeds from the notion that people participate in many social practices and have layered identities, and that this is a positive value in terms of morality and politics. By accentuating the dialogical aspect of social relationships in which the hermeneutic aspect is given various contexts, she argues, experience, interpretation, meaning and action become the most important aspects of morality. There is an “interpretative moment” that is mediated by language

\(^{15}\) Sevenhuijsen 1998, 21–2.

\(^{16}\) Frazer and Lacey 1993, in Sevenhuijsen 1996, 34
and marked by the psychic or emotional dispositions of those involved. And there is also a politics of “need-interpretation” - which needs should be met and how? - in which moral and epistemological aspects of care like listening, responsiveness, attentiveness and commitment form the basis.\textsuperscript{17}

Though having rejected MacIntyre’s communitarianism, Sevenhuijsen appeals to us, as MacIntyre does, to reconsider the virtues: she insists on regarding care as a virtue.\textsuperscript{18} Yet Sevenhuijsen is very critical of MacIntyre’s rejuvenation of the virtues. She argues that he separates morality from its bearers, that he puts high moral demands on moral practices and argues that moral practices\textit{ in themselves} set goals and demand virtues. She rejects what she calls the “teleological image of human nature” and the idea that forms of social life have an “intrinsic purpose”, as MacIntyre claims.\textsuperscript{19} Instead, Sevenhuijsen emphasises the need for perception and interpretation in constructing meanings of care. The perception of people’s need for care is not directly determined by those needs themselves or by any “necessity”, she argues.\textsuperscript{20} They are mediated by the language in which we talk about them and by the vocabularies deemed applicable to care practices. They are also marked by the psychological and emotional dispositions of those involved and by their psychodynamic interaction patterns.\textsuperscript{21}

To summarise: care, according to Sevenhuijsen, is a social activity that consists of a myriad of different interpretations and can best be understood in practice. This practice is produced by many discourses (for example, professional care, education, intimacy and family - each with its own set of norms and priorities). The care-taker must use his power of interpretation - namely commitment, listening, responsiveness and attentiveness - to find the appropriate practice of caring for every different context. Caring is, on the one hand, representative of an activity that is so diverse as to impossible to define; on the other, Sevenhuijsen wishes to regard caring as a stable and unequivocal moral value – a virtue.

\begin{footnotesize}
\begin{enumerate}
  \item Sevenhuijsen 1993, 144.
  \item Sevenhuijsen 1996, 37. Sevenhuijsen wishes to regard caring as a virtue because virtues offer the opportunity to sustain “unequivocal moral certainties” (though she does stress that virtues should not always be taken ‘at face value’).
  \item Sevenhuijsen 1998, 21.
  \item \textit{Op cit}, 22.
  \item \textit{Ibid}.
\end{enumerate}
\end{footnotesize}
A postmodern care ethics

It shall by now be apparent that Sevenhuijsen’s ethics of care is an eclectic combination of diverse ethical approaches: it combines first, ontology; second, post-modern feminism and humanism; third, communitarianism; fourth, epistemology and fifth, virtue ethics. First, it is ontological in that she proceeds from the basic and unavoidable relational aspect of humanity: she argues that care is the core of human life because everyone is vulnerable and/or dependent at some stage in their lives, and that this must be given a central place in individual and collective behaviour. Feminist care ethics, says Sevenhuijsen, proceeds from “an existential fact of mutual dependence”. Second, Sevenhuijsen’s plea for care ethics is a plea for a post-modern form of humanism in which she argues that people strive towards a worthy and humane existence. She emphasises diversity and alterity as key features of that humanity: she refers to “psychodynamic” notions of moral subjectivity in which the self is not preconceived of as a thing but as a protagonist in a life story that can exhibit all kinds of ambiguities and unexpected developments. The self is ‘processional’, a self that is always being formed; very different to the pre-social self of liberal ethics, says Sevenhuijsen. And it is a feminist ethics in that it reassesses the traditionally ‘female’ virtues, such as trust, kindness, responsiveness, responsibility, and care while rejecting exclusively masculine discourses on rights and privileges and obligations. Third, Sevenhuijsen talks about ‘dialogical communitarianism’ in which moral identity is continually being developed and revised in relation to others. Morality is inherently a social practice, she says: something we do within social interaction and relations and specific social and political contexts. Fourth, Sevenhuijsen’s epistemological approach lies in her accentuation of two aspects: she argues that moral knowledge is derived from the situation rather than from any preconceived notions, in other words, that knowledge of how to act proceeds from a perception, or interpretation, of a specific situation. Furthermore, she favours a narrative approach that, she argues, refuses to separate needs from those who are its subject and proceeds from the point that people do (or can) possess knowledge about their own subjectivity and are in principle

22 Sevenhuijsen 1996, 140.
23 Op cit, 41.
24 Op cit, 73.
26 A much fuller discussion of moral epistemology will take place in the following chapter (Chapter Three).
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capable of expressing who they are (or want to be) and what they need.\textsuperscript{27} Sevenhuijsen, fifth, also wishes to treat care as a \textit{virtue} because she intends care to fulfil a new position in society – together with the newly-won position of emancipated women in the public sphere - and she would like caring to be instated in the public sphere as a moral ideal. To conclude this list, in her own words, “care is epistemic, dialogical, communicative and interpretative”.\textsuperscript{28}

Sevenhuijsen’s postmodernism lies not only in her eclecticism\textsuperscript{29} but also in her historical perception in which she typifies a time \textit{after} modernism. She argues that historical changes have rendered much of modern morality irrelevant and out-of-date. In particular, she mentions “demographic changes and the enormous speed of globalisation and different forms of mobility (that) cause ruptures and sudden changes in patterns of ‘caring about’ and ‘caring for.’”\textsuperscript{30} The conflicts and dilemmas arising from this, argues Sevenhuijsen, form fruitful starting-points for considering the values that can be seen as relevant for future society and for political decision-making about the direction of social change. The society of the near future will, she says, in one way or another have to adjust to a plurality of lifestyles and moral orientations and the resultant social and political frictions. She argues that it is more productive to use this fact as a constructive starting-point for reflecting on current value systems than it is to fall back on old and secure patterns or, conversely, to fear that a positive evaluation of care will carry women back into tradition. This is why, she warns, it would be a historical mistake to neglect the meaning of motherhood and care for women. Or to dismiss it as incapable of normativity from the perspective of a post-modern fear of the notion of fixed identities.

Feminists, according to Sevenhuijsen, have in the past focused too much on identity and not enough on agency and morality. In a key passage in her book, Sevenhuijsen gives us her vision of motherhood under post-modern conditions. It can perhaps best be conceptualised, she says,

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  \item \textsuperscript{27} Sevenhuijsen 1996, 79. The notion of life as a narrative can also be found in the writings of another ethical epistemologist, Margaret Urban Walker and the moral philosopher Bernard Williams.
  \item \textsuperscript{28} Sevenhuijsen 1996, 81.
  \item \textsuperscript{29} Eclecticism, the gathering together of a number of very diverse elements derived from various sources and pasts, without necessarily specifying the origin of these elements, is arguably a feature of some post-modern art forms. In particular, literature, architecture and the fine arts.
  \item \textsuperscript{30} Sevenhuijsen 1998, 25.
\end{itemize}
(…) as a series of changing social practices. Motherhood, both as a social institution and as an experience, is expressed in various settings: cultural representations, ideals of child-rearing, legal discourses, medical-technical inventions, the regulation of labour and care, norms of professionalism and the possibility of being able to combine these with care…and the way in which care is valued as an aspect of the human condition. …Motherhood should not be seen simply as an identity, but as a series of relationships within which identity and commitment are expressed.” (Citizenship and the Ethics of Care 1998, 26)

She accentuates the need to treat caring as a social practice because, she argues, care relationships alter continuously. From a perspective of women’s lives, the issue of care has long since ceased to be merely the dilemma between paid work and motherhood. Care relationships are a continual part of adult life, she argues, in work situations, in friendships, and in relation to children, parents and relatives. Furthermore, children are no longer, as a rule, born and raised in a life-long relationship between a man and a woman. In dealing with issues of care we have to consider test-tube babies, artificial insemination, egg donation, surrogate motherhood and prenatal screening, and the way in which the modern reproductive technologies influence kinship cultures. Upbringing and care take place in the most diverse family and kinship relations, and in the public debate we are continuously challenged for our opinions on such issues.

Not only has the family altered radically in form, it also has lost the normative patina of a “haven in a heartless world”.\(^{31}\) Marital rape and sexual abuse have attained the status of ‘citizenship questions’, says Sevenhuijsen, but for a long time these issues were either ignored or repressed by liberal political philosophy or had a discreet veil drawn over them. We encounter these sorts of contests about care every day in the media and television, often linked to problems such as poverty and insecurity. Thus care and caring relations in situ are by no means unambiguous representations of virtue. She describes how shame, guilt or aggression can lurk behind the best well-intentioned caring.\(^{32}\) Sevenhuijsen thereby problematizes the relation between norm and reality.

\(^{32}\) Sevenhuijsen 1998, 37.
Furthermore Sevenhuijsen also problematizes the dichotomy between ‘public’ and ‘private’. She argues that the diversity of experiences and moral questions relating to the quality of care has far outgrown the traditional dividing-line between the private and public spheres. This line had for so long marked the separation between care and politics and which in fact is continually being disputed and redrawn. The argument that we now find ourselves in a “heterogeneity of public spheres”\(^{33}\) provides a more satisfactory starting-point for characterising the post-modern condition in general and also with regard to the social organisation of care, says Sevenhuijsen. This description does justice to the fragmented nature of the public sphere and to the fact that there are many different locations in which people shape their political agency and social involvement, just as there are many locations in which we have to deal with decision-making and authority. This description also makes it clear that in post-modern existence there are few aspects of life that can be kept private and legitimately protected from any form of public control. Against this background we are continually confronted with the task of reflecting on the meaning of the liberal ‘right to freedom’, argues Sevenhuijsen, such as the protection of privacy and intimacy. Here too the ethics of care can offer new points of departure, she says following Martha Nussbaum\(^{34}\), through its arguments that intimacy and close relationships be counted as important humanitarian values.

Sevenhuijsen’s plea for consideration of a diversity of social practices and situations from the perspective of the ethics of care prevents care from being too firmly linked to a fixed division of roles between caregivers and care-receivers, she believes. It also ensures that the ethics of care is not framed solely in terms of the caregiver’s experience and motivation (as it is in some other accounts of care ethics, for example in Noddings’ \textit{Caring} 1984). At some point in their lives, almost everyone will assume the role of receiver as well as provider of care, although the extent to which each of these roles is fulfilled may vary greatly during a lifetime. Thinking in terms of a fixed pattern quickly reproduces the mechanism whereby vulnerability and needs are located in the so-called ‘needy’, and not in ‘normal’ moral subjects themselves, argues Sevenhuijsen. This can lead to complicated patterns of interaction, such as projection or displacement of needs and responsibilities. It also reproduces a one-sided image of human nature, enshrined in the idea of a self-sufficient individual as the basis of moral existence and political


\(^{34}\) In Nussbaum, 1990 for example, cited in \textit{op cit}, 40.
regulation, an idea that Sevenhuijsen is most anxious to dislodge from its prominent position in liberal moral and political vocabulary. An analysis of morality in which only caring deeds are central and exclusively located in others can have a harmful effect on the practising of morality says Sevenhuijsen, since this contributes to an ‘externalisation’ of morality. Furthermore this is a rather thin conception of what moral subjectivity is all about, she argues. The ideal of autonomy in fact overlooks what it is that makes caring or being cared for an element of the human condition. In other words, care recognises that all people are sometimes vulnerable and dependent during periods of their lives, and that we all have to find ways of dealing with this in our daily existence and in the values which guide our individual and collective behaviour. This is one of the main themes in Sevenhuijsen’s book. In this respect, she insists, her argument for a feminist ethics of care can be seen as a plea for a postmodern form of humanism.\textsuperscript{35}

**Postmodern solidarity**

Throughout this chapter there are continual references to this or that being ‘postmodern’ in Sevenhuijsen’s ethics. But what is postmodernism and can there be such a thing as postmodern ethics? Postmodernism can most broadly, and safely, given the enormous internal variety, be described as a break with modernity. Whether it is an entirely new intellectual era or whether it is merely a phase within the modernism is the crucial question. René Boomkens, essayist, social philosopher and author of \textit{Een drempel wereld}\textsuperscript{36} for example, argues that postmodern thinking has nothing ‘real’ to offer us. Postmodernism has introduced us into a reality in which notions such as ‘truth’, ‘authenticity’ or ‘realness’ have become stranded in a sometimes nearly perverse game of pastiche and parody, he argues. This game presented itself often as being the ‘only real’ one but was never in a state to loosen itself from the grip of the only real story, that of modernity, and should only, warns Boomkens, be understood as a phenomenon of the dissolution or disintegration of modernism itself. Postmodernism is, in other words, a typically modern product, albeit a product of modernism in crisis. Postmodernism parasites on this crisis: it makes itself bigger and stronger by denying the crisis, and by declaring modernism dead. Boomkens talks about the crisis of modernism, the “new disorder”, in the words of the social

\textsuperscript{35} Sevenhuijsen 1998, 41.

\textsuperscript{36} Boomkens 1998, translated as \textit{A Threshold World}. 
philosopher Jürgen Habermas, which is characteristic of the actual ‘modern’ condition.  

However, Boomkens tempers this rather severe judgement of postmodernism by arguing that now, after fifteen to twenty years of postmodernism, we can carefully conclude that, while few admit themselves adhering to the philosophical, literary, artistic or political opinions of ‘the postmodernists’, almost everyone, some more enthusiastically than others, agrees with the idea of the failure of the ‘Metanarratives’. This term coined by Lyotard has succeeded in bringing about a “progressive problem shift” argues Boomkens. Lyotard’s concept, ‘metanarratives’, became the determining password for the postmodern movement (which can be dated back to the publication of Lyotard’s *La condition postmoderne* in 1979 though international debate on postmodernism only became established in the eighties). Modernity and modernism were portrayed, with the help of this concept, as universal myths, sort of religious structures, that had an all-encompassing and, at the same time, founding story to tell by means of which the world could be understood and furnished. ‘Metanarratives’ were the stories of science or rationality; the story of emancipation or freedom of mankind; of the Market with its promises of progress; and the Revolution, the story of solidarity with the oppressed and its promise of utopia.

Sevenhuijsen’s critique of the notion of moral identity, and her emphasis of diversity, alterity, ambiguity of social and moral practices and the importance of individual context, place her in one kind of post-modern tradition. In this she is faithful to the ‘strict’ or programmatic post-moderns who argue that we ought continuously to relativise. But Sevenhuijsen also works from within another tradition, that of social critique. She emphasises transformations that, in her eyes, are in contradistinction to modernism, especially the rupture between normative values and the reality that they are supposed to represent (for example, the family as a haven in a heartless world). In her critique she prefers a post-Marxist explanation of social

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37 Boomkens 1998, 35.
38 A term derived from the philosopher of science Imre Lakatos, who thereby tried to express what the ratio was behind the replacement of one research programme in science with another. Lakatos believed that new research programmes could only successfully follow an older programme up when they were capable of explaining the failure of the old programme on specific points and could deliver better and newer explanations for the same facts (Lakatos 1974 cited in Boomkens 1998, 33).
39 *Op cit*, 32.
Has Sevenhuijsen provided an alternative to modernism, normative as well as practical, which is not subject to the same pitfalls of modernism? Has she succeeded in avoiding the dilemma of postmodernism? Boomkens argues that it is very tempting to fall into the typical trap of post-modernism by rejecting ‘the metanarratives’ in such a way that one’s own position becomes, once again, a ‘metanarrative’. This is what happens to all those who see a new and independent vocabulary in post-modernism that is capable of replacing modernism, argues Boomkens.\(^40\) Sevenhuijsen’s alternative to universal morality and teleological types of virtue is the idea of ‘social practices’, in which the meaning of values and ideas become established through use, interpretation and context rather than by reference to pre-existing and pre-established concepts. It is ironic though that she should choose a term from a Marxist-revisionist (or neo-Marxist or post-Marxist) tradition. In her attempt to describe a fluid yet formal, established though flexible set of social relations, she refers to a political-philosophical tradition that specialised in mega-metanarratives (as critique of and alternative to other mega-metanarratives, of course).

In her social critique she has not succeeded in avoiding the pitfalls of postmodernism; does she fare any better in her relativism? The answer to this question is in the affirmative: yes, Sevenhuijsen successfully deconstructs an important element in modern metanarratives, ‘identity’ and puts in its place a contextualised and temporal agent. She insists on a “processional self” rather than a self with a teleological goal, on finite social practices rather than established normative systems, on “hermeneutic communitarianism” in which participation is based on interpretative deeds, and on “difference” and individual particularity.

Which leaves us with the dilemma of how to read her postmodern ethics: is it primarily fragmentary in that it places the particular experiences of the agent at the core of every normative judgement? Or is it less radically fragmented than that and are there nevertheless social structures and practices which exist and persist beyond a myriad of individual practices? If we take the first reading, then we must conclude that motivation for moral decisions can only be described on an individual level of experience and reaction here and now: in terms of trust and responsibility, intimacy and love. If we choose the

\(^{40}\) Boomkens 1998, 34.
second reading then we must conclude that the experiences of individuals overlap and persist to a considerable degree and that it is possible to speak of the community lending meaning to moral subjectivity, rather than the other way around. This is the unresolved tension in Sevenhuijsen’s ethics of care: between the primacy of moral subjectivity and the primacy of moral communitarianism. Obviously they mutually constitute each other, but which one takes priority? How? And why? I would argue that Sevenhuijsen’s vagueness on this point is unsatisfactory.

To illustrate what I mean I shall compare Sevenhuijsen’s ontology with that of the post-modern philosopher and anti-historicist par excellence Michel Foucault. Foucault advocated an “ontology of the present” versus, what he regarded as the desire of analytic philosophy for, truth in general. ‘Ontology’ refers to “structures of being”, to “supra-historical characteristics of existence”; ‘present’ conjures up the momentary, the acute or the actual, that which is relevant now. The ultimate reason for asking the ontological question can only exist in and as the actuality of the one asking question, argues Foucault. There is no ‘view from nowhere’, neither from the collective (which does not exist for Foucault), nor above or beyond the collective. The question is only relevant to and for the individual, thus the answer will always be different. Sevenhuijsen too rejects teleological normative concepts and emphasises rather specific responses in specific contexts to specific questions. Her ontology, nevertheless, is not radically individualist, as one might expect from a programmatic postmodern, but communitarian. She argues that our ‘structures of being’ are relational, thus placing the emphasis for the motivation for moral behaviour on communality, mutuality and relations with others (trust, responsibility and care).

Is this not ultimately a cop-out? A compromise that neither radically challenges modern normative concepts with consistent relativism, nor dares to confirm an unequivocal communitarian collectivity of values? Sevenhuijsen chooses to opt for a concept of the self that is contextual but also distinct from context, a social practice that is constituted but also exists distinct from context, a communitarianism that gives meaning to moral concepts but is interpreted and created through dialogue by those semi-independent selves. Two institutional modern ingredients are present: the self and society. What Sevenhuijsen has eliminated from this metanarrative is what traditionally connected the structures to each other: identity and obligation. We now have selves that are under no compulsion to be moral
other than their own interpretation of their own contexts and their own responsibilities; and a society that does not comprise of identities but of identifying practices.

Sevenhuijsen rejects obligation because she associates it with atomistic and minimalist individuals who are forced to co-operate with each other because of the lack of other, more meaningful ways of co-operation and instead offers us “solidarity”. She argues that this concept gives a political meaning to care and to mutual commitment. Solidarity without care is an impoverished sense of mutual commitment; care without solidarity strengthens the privatisation and “moralisation” of care. She argues that we need “caring solidarity” because everyone in different ways and to different degrees needs care at some points in their lives. What does Sevenhuijsen mean by solidarity in caring? Does it mean that we should all conceive of ourselves as needing care and/or as care givers? Or does it mean that we should all feel sympathetic towards those receiving or giving care, even if we are not in the same position ourselves? ‘Solidarity’, according to Marion Smiley, means feeling a sense of commonality with a group: sharing common attributes and expressing a form of collective responsibility. Group solidarity exists where group members identify themselves as group members and assert their shared interests and needs.

The problem with this definition for Sevenhuijsen is two-fold. First of all, she does not refer to a group as to the society (or community) at large – she argues that it is the responsibility of the community to be solidaire, or interdependent. This means that the community as a whole has to see itself as having an identity, namely a caring identity. This gives rise to the second issue: in order to motivate such a communal identity this would presuppose that the community accepts that their identity is one that needs or is expressive of caring. This might be possible if it were accepted, for example, that all human beings are (potentially) vulnerable and that the community should be designed or formed in such a way so as to express this fact. The question then arises

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41 Foucault cited in Boomkens 1998, 43.
42 ‘Moralisation’ is used here in the sense of an absolute presentation of authoritarian arguments, in which plurality of meanings are reduced to one value-laden meaning, says Sevenhuijsen. Sevenhuijsen 1998, 152.
43 Op cit, 147.
44 http://plato.stanford.edu/ “Collective Responsibility” Marion Smiley 2005. This does not necessarily imply that there is a binding or monolithic group identity.
45 This perspective is argued by Henk Manschot in Manschot and Verkerk 1994.
how such changes could be implemented in contemporary society – if we accept that these changes should be made.

The problem with such a proposal is, very generally, that vulnerability is not a politically or economically accepted identity in contemporary liberal democracies. Rather, the situation of being in need of care (and, by extension, giving care) is commonly regarded as an exceptional situation. Societies are defined from the point of view of healthy, independent, self-sufficient individuals and those who are ill, or dependent, or need care are regarded as the exception to the rule. I fear that the effect that the term solidarity might have is merely to accentuate that there is a large(r) group of people not involved in caring relationships. In this respect ‘solidarity’ resembles ‘charity’ in that the charitable can be generous precisely because they are not in the same detrimental position as those requiring charity. Sevenhuijsen argues, briefly, that the recognition of all people as temporarily vulnerable and dependent is the basis for a plea for a post-modern form of humanism. The problem, it seems to me, is precisely that Sevenhuijsen has successfully argued that people are not equal but particular and therefore fails to find sufficient grounds for arguing in favour of a common humanity or communal identity.

**Postmodern motivation**

Sevenhuijsen’s accentuation of diversity and plurality instead of identity and unequivocal role-playing, and ambiguity in the relationship between norm and reality, has direct implications for her notion of what caring is. She rejects the idea that caring is a moral obligation because she rejects the vocabulary of rights and duties; equally, she rejects the notion of necessity because the need for care, she argues, is closely connected to temporality and to the various roles and practices that we are involved in.

To further complicate matters, while acknowledging that care is to a certain extent generated by dependency and attentiveness, Sevenhuijsen also stresses the existence of conflicting and contested notions of care. Caring for others can also stem from far less noble motives than wanting to protect vulnerable

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47 Sevenhuijsen is not consistent in her rejection of necessity. She describes how care ethics offers us an alternative moral perspective: namely one that proceeds from the “existential given” of mutual dependence (1998, 140). She also speaks of “relationality” being basic to human beings. It would seem to me that Sevenhuijsen...
people from vulnerability, like the urge to meddle or to control others. The motive behind care, the product of some kind of response to human suffering, is certainly not the only factor in determining the quality of the caring activities themselves, says Sevenhuijsen. ‘Bad’ motives can lead to ‘good’ care, just as a ‘good’ motive, attentiveness to vulnerability, is no guarantee of good care. It can also lead to paternalism or undue protection.\(^{48}\) Therefore it is not the motivation that is normatively significant, but the effect that the caring action has, says Sevenhuijsen.

Sevenhuijsen’s postmodern consequentialism (when it comes to judging motivation) is not inherently problematic - as long as she also maintains that all moral action is essentially \textit{ad hoc} and a matter of trial and error. But Sevenhuijsen’s position is not that radical: her book on citizenship and caring harbours a teleological message concerning the importance of community. And this gives rise to a curious ambiguity: on the one hand, Sevenhuijsen emphasises that there are no moral or normative systems over and above individual acts. On the other, she accentuates that individuals are responsible for a sense of community and for the consequences of their deeds. She also emphasises the ontological aspect of ethics of care, namely that human beings are basically relational and that caring is an unavoidable aspect of this basic reality (though also temporary and varied). What is it to be: \textit{ad hoc} moralism or ontological communitarianism?\(^{48}\)

Sevenhuijsen’s association of ‘obligation’ is with rights and with contract thinking, in other words a particular tradition of political thought, namely liberalism. She rejects this form of obligation, as I have discussed at the beginning of this chapter, because she argues that it is normatively empty and recommends two alternatives in its place: ‘responsibility’ and ‘trust’. Her version of a compelling moral exhortation to act contains the notion of \textit{responsibility}: what she describes as a hermeneutic and interpretative moment in reaction to a concrete situation or predicament. Her ideal moral reaction – \textit{trust} – is, in her eyes, a postmodern virtue because it is in contradistinction to identity, and socially fixed or universalised values like stereotyped gender identities.\(^{49}\) In her view ‘trust’ is interpretative, rather than fixed. Like her version of care, it is a practice rather than a moral theory.

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\(^{49}\) Sevenhuijsen 1999, 220.
Is it possible to find another version of responsibility that will overcome Sevenhuijsen’s postmodern individualism? Whereas Sevenhuijsen sees responsibility as an individual reaction to diverse situations, Walker sees responsibility much more as part of mutual understandings. While Walker’s philosophical ambitions are much broader than mapping out the demands of a care ethics – she is concerned with epistemology in general and concerned to develop a concept of moral understandings, fuelled by a critical feminist standpoint, within that tradition – she does describe herself as a ‘friend of care ethics’.\(^{50}\) Her ethics of responsibility is more of a theory about practices than a systematic ethical theory: Walker uses the notion of responsibility as a meta-ethical tool to diagnose and trace moral understandings in forms of social life. She sees the notion of “responsibilities” as representative of that which we owe to each other, and her ethics specifically reveals the way in which responsibilities are gendered, in other words, what the arbitrary or exploitative fit between social contributions and recognition is.\(^{51}\)

As Walker says, she prefers the “more capacious language” of responsibility as a conceptual framework for ethics to the language of care-taking. Responsibilities trace “our configurations of social roles and the boundaries of our community” as well as “the distribution of power between those suffering and those being held responsible”. Being held responsible means being made accountable, she says; her ethics of responsibility is thus an ethics of accountability.\(^{52}\) Her ethics of responsibility captures many aspects of ethics of care also found in the care ethics of Gilligan, Baier, Noddings, Held, Ruddick, and Tronto. These ethicists also emphasise responsiveness to particular others in specific (caring) relationships. Their basic claim is that specific moral claims on us arise from our contact or relationship with others whose interests are vulnerable to our actions and choices. We are moved to respond to particular others when circumstances or ongoing relationships render them especially, conspicuously, or peculiarly dependent on us. This kind of ethics requires a view of moral judgement with significant expressive, interpretative, and (where possible) collaborative features. Walker’s ethics of responsibility also deals with specific relationships of vulnerability - but not only in terms of relations of dependency. Because it is an ethics of accountability, it is concerned specifically with issues like transparency, trustworthiness, and honesty. These are all concepts that apply to the attitude

\(^{50}\) Correspondence with Prof. Walker, June 2003.
\(^{51}\) Walker 1998, 77.
\(^{52}\) Walker 2002, 179.
of the person who has to give an answer to (or account himself) in terms of the obligation taken by him/laid upon him. And this attitude, and the information given by him, must be open and not hypocritical or distorted. In other words, Walker’s ethics of responsibility is primarily an epistemological ethics: it is concerned with the normativity of knowledge claims in general rather than the more specific relational claims that caring makes.

Walker argues that her ethics of responsibility is responsive to questions of how to steer a morally responsible course

throughout our lives among valuable things and important commitments, while giving place to the wish that our lives might express the people we in particular are. (Moral Understandings 1998, 105)

This kind of view, however, offers no philosophical standard by means of which we can determine when we have assumed just enough meaningful and sustainable responsibilities in just the right order. Rather than a defect, Walker regards this as a virtue of the view. It is a virtue because she does not believe that there is a “principled way of ordering for everyone in advance the numbers, kinds and combinations and weightings of things that matter morally, and with respect to which we may be called to account.” She thinks that the resistance of our lives to this treatment is due, in part, to the nature of things in our lives that morally matter. It is also due to the nature of these lives themselves. Morally significant things, concludes Walker, our responses to them and responsibility for them, play very important parts in our lives, but our lives are not only about or propelled by them.

Walker sympathises with moral philosophers – like Gilligan and others - who strain against a “formulaic view of selves and others, their lives and their commitments, and the role of morality in binding or shaping these”. What this alternative view involves is trying to get the meanings, motives, commitments and connections that move individuals through their distinctive lives into the right relation with morality’s guiding and constraining force within those lives, argues Walker. Gilligan, for example, argues that

54 Op cit, 106 – 9. This view of the importance of moral matters resonates very strongly with Bernard Williams’ view that “ethical life is important but it can see that things other than itself are also important” (“Morality, the Peculiar Institution” in Crisp and Slote, 1997, 184).
55 Walker refers also to Bernard Williams.
conflicting responsibilities need to be “separated from self-sacrifice” and reconciled to “the truth of their own agency and needs”. Gilligan uses “integrity” to stand for a demand, either within or against morality, for some space a self can call its own. Walker herself has a very different conception of integrity: she argues that integrity is inherently relational or other-directed because it is measured by how reliably others may depend on congruence between someone’s position, their action and their responsibility-taking. Thus ‘integrity’ for Walker is not a self space but rather a quality of the self that lies between being related to others and taking responsibility.

A major issue in care ethics is the potential that caring has to overwhelm the one-caring. Relationships thick with commitment or expectation could place overly exacting demands on a life – is there any end to the number and types of demands that can be made? Could a life responsive along these lines exhibit the commitments and concerns distinctive of the one who lives it? How could a person make, or keep, this life his or her own? This critique contains two aspects: the quantitative and qualitative. The first concerns the sheer quantity of demands, requests, appeals and pleas for attention on one caring – the idea being that this in itself could overwhelm and defeat the one caring. The second, qualitative, aspect concerns the type and delimitation of requests for care made: if they are unbounded, extreme, too far-going, unlimited or continuous then this aspect of care demands could also overwhelm the one-caring. Gilligan (In a Different Voice 1982) called this the “conflict between integrity and care”. Any person immersed in the complex, varied, and changing relationships and episodic contracts of real life might be scattered, depleted and “constantly compromised” by an unlimited demand for responsiveness. Some feminist critics think that Gilligan’s identification of an ethic with open-ended responsiveness by women (i.e. the second undermining aspect) is deeply mistaken. They think it “valorises stereotypes of bottomless feminine nurturing with self-sacrifice that continue to haunt women while politically disempowering and personally exhausting them.” A care “ethic”, in these terms, can look like the lamentable internalisation of an oppressively servile social role, argue care criticasters.

58 Cited in op cit, 138.
60 See, for example, Jean Grimshaw 1986; Barbara Houston 1987; Claudia Card 1990; and Marilyn Friedman 1993.
What Walker’s alternative view of responsibility wants to achieve is an avoidance of this overwhelming effect. She argues that her practice of responsibility can acknowledge a “moving horizon of commitments and adjustments” in which the individual can retain a distinctive sense of situation and commitment.\(^62\) This means that care givers can, from their own perspective, based on their situation and their self-determined responsibility-taking, decide which care tasks they take upon themselves. Walker is not a care ethicist in the first place. But because she is concerned with creating habitable moral spaces within changing social and experiential environments and the pre-conditions for forming moral knowledge, her conclusions are relevant for discussions of a naturalised morality in care ethics.

**Conclusion**

In critique of post-modern feminist social criticism, Seyla Benhabib says that if social critics argue that cultures and traditions are more like competing sets of narratives and incoherent tapestries of meaning than a monolithic set of criteria, then she (the social critic) must herself construct out of these conflictual and incoherent accounts the set of criteria in the name of which she speaks. “The recognition of competing and incoherent sets of meanings does not”, concludes Benhabib, “exempt the speaker from the responsibility of normative justification.”\(^63\) Has Sevenhuijsen addressed the issue of normativity in care ethics? In her more programmatic chapters in *Citizenship and the Ethics of Care* (like those on child custody and on Dutch health care policies), Sevenhuijsen strives to combine the feminist strategy of particularism with a concern for vulnerability (also found in other care ethical literature, like that of Verkerk and Manschot) and the justice approach of the public domain. What she ultimately argues of favour of is a combination of all three: that situated rights should be incorporated into health care and that social justice should be achieved by means of public provisions. This amounts to, ideally she says, a combination of a politics of needs-interpretation and ‘caring solidarity’ (which offers more potential for understanding the diversity of needs and lifestyles than solidarity based on homogeneity). And in her discussions of citizenship she argues that we should “judge with care” (the original title of her *Citizenship in Dutch: Oordelen met zorg*).


\(^{63}\) Benhabib 1992, 228.
What Sevenhuijsen is doing, to my mind, is to try to combine a post-modern ethics of care and humanism – she tries to collapse a feministic ethics of care’s emphasis on difference and particularity into the old humanistic goal of equality and reconciliation.\(^{64}\) I have argued that her attempt has not been successful because it is everything at once: metanarrative (humanism, communitarianism) and practice (hermeneutic, particular). Furthermore, I have argued that her concept of solidarity is not sufficient to the task of motivating caring as a communal activity. This is in part, I argued, because Sevenhuijsen bases her ethics of care on an ontological notion of vulnerability. If we are all vulnerable then why do we need to feel solidarity towards the vulnerable?

Walker is more consistently rigorous in her naturalised epistemology. She offers us a concept of responsibility that has as its basis an individually centred self with its own perspectives and commitments, which is capable of making choices and determining those responsibilities taken on board. Walker rejects monolithic moral principles and horizons and argues instead for a complex particularism. Morality, for Walker, is a practice that can form “a core of dominant understandings that are widely repeated but differently grasped from different positions.”\(^{65}\) Her analysis of moral understanding leads to differentiation and proliferation rather than towards a centralised discussion of normativity. The following chapter on epistemological care ethics is based on the idea that being in a caring relation to others is a unique way of acquiring knowledge about them. Walker’s naturalised epistemology will play an important part in this chapter.

\(^{64}\) (Paraphrased) Soper 1990, 11 - 7.  