

Caring's "Third": Exploring and Expanding Radical Potential

Barbara S. Stengel
Millersville University

On the surface, Peter Nelsen seeks to rehabilitate Nel Noddings's care theory from a substantial objection: a carer must sometimes resort to "appeal to non-care-based resources for guidance" when the cared-for rejects the carer's attempts to care. He seeks to effect the rehabilitation from *within* care theory, thus doubly defeating the objection. Under the surface, Nelsen invites speculation about ethics as an enterprise involving bodies that think *and* feel. I will have something to say about both topics.

Raja Halwani challenges Noddings's version of care theory using a counterexample in which a carer questions his obligation to support a cared-for's project, even when that project results in clear harm to the cared-for. The compulsion stems from the carer's "obligation" to displace her own projects and become engrossed in the concerns of the cared-for. Nelsen accepts Halwani's characterization of the situation, reports Noddings's anticipation of such objections, and exposes an unresolved "tension" in Noddings's thinking. He turns then to Charles Sanders Peirce's phenomenological analysis of what "is present to the mind" as a way to resolve the tension.¹ Following Peirce, Nelsen finds Firstness (raw feel), Secondness (perception or feel as identifiable), and Thirdness (feel as attributed meaning in relation to other elements of experience) in caring. While I very much appreciate Nelsen's introduction of caring's "third," I worry that his reliance on Peirce leads to an overemphasis of the epistemic in his articulation of caring as triadic.

So I have three questions (one narrow, one strategic, and one foundational): (1) How is Halwani's counterexample a challenge to Noddings's theory? (2) Why invoke Peirce's epistemic focus rather than, say, John Dewey's ethical one to get from a dyad to a triad? (3) What is the function of an ethic of care? Be forewarned that the questions are intertwined and thus the answers will appear throughout my brief foray.

I begin by asking *how* Halwani's counterexample challenges Noddings's theory. The simple answer is that Halwani takes care theory to be a theory of "should" and rejects the actions that the theory seems to require in one clear case. But Halwani's view of the theory sounds suspiciously like the framework for moral action that Noddings seeks to loosen, if not dislodge. This may be why Noddings takes Halwani-type counters seriously, but does not directly respond. In fact, she sidesteps objections about specific differences between carer and cared-for by invoking interpretation and dialogue, and by refocusing attention on the form our rejection takes.

Recall that, in "natural caring" (the naturally occurring root of ethical caring), the carer's actions are marked by the displacement of her goals in favor of the goals of the cared-for's, and by her engrossment in the needs of the cared-for. These

features of natural caring morph into the elements of ethical caring, but in what form? Is it warranted to delineate ethical caring in terms of what ought to be?

Both Nelsen and Halwani sound to me like Kantians talking caring. I do not think that this is Nelsen's intention. But the Kantian bug lies dormant in all of us, and it is not surprising to me that it crops up at inopportune moments.

Halwani speaks of the "requirements" of caring. In characterizing Halwani's position, Nelsen says, "Caring *demand*s that the one-caring support and promote the goals of the cared-for" (emphasis added). One gets the sense that "should," "demand," and "obligation" are the crux of caring. But then hear Noddings, as cited by Nelsen: "Interpretation and negotiation are required with expressed and inferred needs alike.... [Carers] initiate a dialogue that should result in a decision that is acceptable (or nearly acceptable) to both parties."² Read the "should" in that passage as "probably will," and note Noddings's use of "nearly acceptable." Noddings's feminist pragmatism is evident.

Halwani's example is only a challenge if ethical caring requires that we honor the cared-for's aims. But caring does not *require* anything. If the cared-for does not accept the carer's actions as caring, "then we have failed to care in a substantially important way." The point is not individual ethical "failure," but the reality that the caring relationship no longer exists. There can be no failure of one; there can only be the absence of relation.

What, then, is the status of an ethic of care? Is it one competing answer within a moral theory terrain that is dominated by deontological views, teased by teleological concerns, and instantiated in virtue theory? Or is it a reconceptualization of what ethical theory can be, and what it offers us? Take Noddings's feminism and her pragmatism seriously, and we have to entertain the notion that this is simply not a theory of individual obligation. And if it is not such a theory, then the Halwani challenge has lost its potency.

Nonetheless, I think Nelsen wise to introduce a "logic of relations" here with respect to care theory. Nelsen turns to Peirce to say that "anything that exists [consists of] three categories." But greater precision of expression seems needed. Peirce knew that our *epistemic access* to that which exists can be analyzed into three categories: Firstness (the "present, immediate" which is also the "evanescent"), Secondness (immediately recognizable *as* something and therefore cognitive in character), and Thirdness (acknowledged as *caused* through mediating reasoning).

Nelsen creates confusion because he applies Peirce's analysis of awareness of events in the world to Noddings's phenomenological analysis of the realized caring interaction of embodied persons — and does so with respect to abstracted descriptions of caring rather than concrete instances. His title suggests that we can rehabilitate caring if we think about it in an epistemic way. My fear is that care theory loses its radical potential if we do.

I caution care in applying Peirce's logic to caring as experienced relation, because that logic is not intended to unpack the affective, embodied, and encultured

layers of actual relations of care that Noddings insists on. Nonetheless, this analysis does reveal a neglected third in a caring relation, that is, the valuation of care — or the shared conception of what counts as caring in *this* relation. This valuation is the subject of negotiation, dialogue, and judgment. Consider a teacher giving students a break after a difficult morning of standardized testing. The carer's raw feel may be a stirring, her perception may be that "these worn out children need a break," and her causation may be that "these students are under my care." The cared-for's raw feel is "Yay!" his perception, "Break time," and his causation, "Ms. Stengel is a nice teacher; she always takes care of us." In this case, the caring relation is intact; both teacher and student value care commensurably. But imagine the student who reads the teacher's action differently, with similar raw feel and perception, but different causation: "Ms. Stengel is so lazy; she's just taking another break." Or complicate it further. The students want a break and Ms. Stengel wants to give them one, but it's raining heavily and her caring about them suggests (but does not *require*) that she keep them dry. Here is where the dialogue of creative integration, a dialogue requiring interpretation of circumstance and concern, is indispensable to maintain the shared valuation of caring and, therefore, the caring relation.

The point is not that the awareness of agreed-to value (the epistemic third) constitutes a relation of care. There either is such a relation or there is not. Rather, when there is a relation of care, *there is agreed-to value*, whether conscious or not. Rendering our shared value-making conscious through dialogue and collaborative interpretation expands one's power to invigorate relation in the direction of "natural caring." This is what Nelsen's analysis offers us.

But Nelsen suggests further that judgment "motivates" a relation of care. Through his Peircean analysis, we gain an awareness of relation as caring, but we run the risk of diminishing the centrality and quality of the caring relation itself. Epistemically, relation *as* relation is tertiary, but morally and existentially, it is primary. It is Noddings's feminist and distinctly nonKantian point of departure that enables her to suggest that we know what the moral looks like in at least one instance: the relation between mother and child, marked as it is by engrossment and displacement. And so she starts there and asks what we can glean from this "ideal type" that might help us *respond* richly, morally, in other circumstances, and in less intimate and more far-reaching relations.

An ethic of care prompts us to ask if a caring relation, that is, a state of ethical well-being, is in place. The absence of a caring relation suggests the need for dialogue and interpretation. And it is in her careful and insistent articulation of this that Noddings herself provides the resources that we need in order to respond to situations where shared valuation breaks down.

The power of Noddings's work on caring is not in its details but in its starting point, in its potential for lifting the Kantian veil of obligation and obedience, naturalizing ethics, and clearing a space for affect, bodies, and culture in responsive and responsible action. Nelsen offers a useful corrective in detail but, for now, leaves care theory's radical potential largely untapped and unrealized.

1. Charles S. Peirce, *Principles of Philosophy*, section III.1.284, vol. 1 of *The Collected Papers*, eds. Charles Hartshorne and Paul Weiss (Cambridge, Mass.: Belknap Press, 1932), http://www.textlog.de/peirce_principles.html.

2. Nel Noddings, *Starting at Home: Caring and Social Policy* (Los Angeles: University of California Press, 2002), 65–66.