Feminine Virtues or Feminist Virtues? The Debate on Care Ethics Revisited 1

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ABSTRACT

In this paper, I would like to offer a reinterpretation of care ethics both as a feminist perspective on moral reflection and as an interesting remapping of the moral domain in itself.

The feminist nature of care ethics can be understood in different terms. The leading idea of this paper is that the effort of distinguishing these terms may have important implications for a more structured philosophical understanding of our account of care ethics (and therefore of ethics). As I hope will become clear in what follows, this can be thought of in terms of distinguishing – at least metaphorically, if not technically – between considering care ethics as an ethics which puts at its centre (more traditional) "feminine virtues" or alternatively (some new) "feminist virtues".

KEYWORDS

Care, feminism, sense of one's own limits.

Introduction

Care ethics is nowadays considered one of the most thought provoking contributions of feminist thought to moral reflection and an interesting moral paradigm in itself. In the wake of Carol Gilligan's first attempt to envisage an alternative – conceived in terms of responsible care for relationships – to the universalist, rationalistic, impartialist and individualistic moral paradigms (which characterise – to say it with Anscombe – "modern moral philosophy"), a significant literature has emerged. In fact Gilligan's suggestions, but also those made in the same period by Sarah Ruddick and Nel Noddings, are considered insightful by many moral philosophers and have been further elaborated along different lines of development.

As is well known, a rich, ongoing debate among feminists and among philosophers who are, in their turn, critical of universalist and impartialist moral

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¹ I would like to thank Catherine Bearfield for her help with the nuances of English language and her thoughtful advice.

conceptions, has developed, focusing on the possibilities for understanding, refining and using those initial insights, giving them a more definite philosophical structure and considering the breadth of their implications for restructuring the field of moral philosophy.

Care ethics has in fact been developed as a distinctive moral paradigm (for instance by Joan Tronto and Virgina Held), but also many critics of universalist and impartialist moral conceptions have shown an interest in this proposal and in the consonances to be found with forms of moral sentimentalism and virtue ethics (see for instance Annette Baier's and Michael Slote's work), with moral particularism (as in the work of Lawrence Blum), or – more recently – with moral perfectionism and ordinary language ethics (as in Sandra Laugier's writings). These encounters have produced fertile dialogues.

This wide debate notwithstanding, I think there is still room for offering another contribution on care ethics, focusing on some of its salient aspects, but also its limits. In this paper, therefore, I would like to sketch the main lines of such a contribution, aimed at offering a reinterpretation of care ethics both as a feminist perspective on moral reflection and as an interesting remapping of the moral domain in itself.

It should be made clear from the outset however, that the main object of this paper is not that of drawing a comparison between the above-mentioned different lines of research, or to argue in favour of one or the other of this vast array of philosophical positions. Rather, my attempt is to grasp more clearly, from a particular point of view, some elements which are relevant to a fuller understanding of care ethics, and therefore of this wider philosophical debate. This viewpoint will involve going back to Gilligan's initial insights and considering them in the light of some more recent feminist considerations. Accordingly, while engaging in dialogue with certain well known (mostly sentimentalist) interpretations of care ethics and maintaining a rather superficial reference to the moral language of virtues, my main effort will be that of offering an illustration of some recent developments in feminist thought, which I find interesting both in themselves and as a contribution to a fuller understanding of care ethics and thus of ethics as such.

The feminist nature of care ethics, though often invoked, is not straightforward. It can in fact be understood in different terms, and the leading idea of this paper is that the effort of distinguishing these terms may have important implications for a more structured philosophical understanding of such an account of ethics (also in relation to other attempts at giving shape to non universalist and non impartialist accounts of ethics). As I hope will become clear in what follows, this can be thought of in terms of distinguishing — at least metaphorically, if not technically — between considering care ethics as an ethics which puts at its centre (more traditional) "feminine virtues" or alternatively (some new) "feminist virtues".

It should be made clear that the idea of considering whether and to what extent care ethics and feminist thought are intertwined does not proceed from an ideological standpoint: there is no assumption that one should be feminist, nor any request of coherence for philosophers who declare themselves feminists, as many protagonists of the care ethics debate do. It proceeds instead from my opinion that feminist thought, in its development, offers some important considerations to be taken into account in the kind of reflection on ethics that care ethicists undertake (of value also in a wider philosophical debate on ethics). As will be argued, I believe that the evolution of feminist thought offers some important insights, not only with regard to the problem of women's oppression but also with the need for a reconsideration of the human condition, of subjectivity and of morality, all of which are relevant to mapping the moral domain. A deeper analysis of what care can come to mean in the light of these feminist considerations (on subjectivity, humanity, morality or epistemology), may therefore be of some interest. The core issue of this paper is, thus, to assess whether care ethics, in the specific understanding I will be trying to carve out, is able to accommodate some of these considerations. At the same time, I will be arguing in favour of the value of these kinds of considerations in themselves.

Of course, the idea of focusing on this parallelism was inspired by the declared feminist nature of many reflections on care ethics, and by the ongoing debate that has developed in order to characterise this. In fact, as will be described in the following pages, there are at least two different ways to consider the feminist meaning of care ethics. One interpretation is that this approach to ethics is a way of doing justice to women: recognising in them a specific moral "voice", based on the particularity of women's experiences or on specific feminine endowments (in this sense we can consider care ethics as envisaging a specific form of "feminine ethics", based on particular "feminine virtues"). The other interpretation is to consider care ethics as an account of ethics which is able to deal with the particularity, difference and concreteness of all human beings. This is one of the themes feminists elaborate by reflecting on women's experience in order to give shape to a more adequate account of ethics for all. An account of ethics which, unlike universalist abstract accounts, is able to consider the importance, but also the difficulties, of caring for others in their differences. My contention is that clarification of the sense in which care ethics is feminist - and I will argue it is feminist in this second sense – is a way to clarify care ethics as such.

In what follows I would like not only to distinguish these two interpretations from each other but also to elaborate on the second, in an attempt to delineate what is required in order to consider a (feminist) care ethics not as the elaboration of a peculiar feminine endowment but rather as a form of discourse on ethics which is able to accommodate those feminist contributions in relation to all human beings, and, as such, as important contributions to moral reflection.

In the final section, I will therefore try to develop a few suggestions, but also to leave open certain questions which may hopefully be of interest both to those concerned primarily with the debate on care ethics and to others who are attempting to map the moral domain in ways that offer alternatives to universalist, rationalist, and impartialist approaches.

1. Circumscribing the problem: the core contents of care ethics and the feminist context

In order to characterize the nucleus of care ethics I will go back to Gilligan's work, since I see her work as offering the raw material on which care ethics as a distinctive moral approach has been developed, but also as offering some specific clues (not always maintained in subsequent developments), as to what renders such an approach so interesting. I will try to show how Gilligan's claims can be read as a specific kind of feminist claim, contextualising them within a (personal) reconstruction of the development of feminist thought.

It was 1982 when Carol Gilligan published *In a Different Voice*,² the book containing the results of her work which, starting from empirical psychological studies on the development of moral judgement in adolescents of both sexes, launched the idea of a different voice in ethics and started to configure it theoretically.

As she says at the beginning of her book, it was in years of "listening to people talking about morality and about themselves", that she came to hear a distinction between: "two ways of speaking about moral problems, two modes of describing the relationship between other and self"³, and it was in trying to account for this second voice, that of girls and young women, or rather, in trying to solve what she considered the puzzle of female morality, that she came to think of "care" or, more precisely, of "responsible care" as a crucial notion for a different conception of morality.

As is well known, it was mainly with reference to the results of the work done and ideated by Lawrence Kohlberg, concerning the moral development of adolescents, that she started her research. This aimed at considering the difference caught in the female voice, and at resisting the verdict of an inferior or defective moral development of girls and young women which resulted from Kohlberg's studies (a verdict which – as Gilligan argues in her book – was in line with the widespread representation of women's development and role in the psychological tradition, but which is – one can add – also in line with the commonsensical

² Carol Gilligan, In a Different Voice. Psychological Theory and Women's Development. (Cambridge, Mass.: Harvard University Press, 1982).

³ Gilligan, In a Different Voice, p. 1.

representation of women in the history of Western philosophy and Western culture).⁴

Resisting the idea of female minority, Gilligan tried, in fact – with what can be defined as a feminist gesture – to characterise the answers of girls and young woman not as a deficient version of the male ones, but as giving shape to a different "voice", with specific contents, and to recognize this different "female" moral development as valuable in thinking the human condition and morality.

A crucial tenet of her work was the idea that it was indeed the representation of morality and humanity implicit in Kohlberg's research, and not the girls' and young women's answers to his questions (or women as such), which was limited (this seems rather obvious to us now, but it was revolutionary at the time). More specifically, what was limited was Kohlberg's scale⁵ itself. This scale is representative of the long history of the characterisation of human subjectivity in terms of isolation and separation, and of morality in terms of abstract and impersonal rules able to put those separate and sovereign selves in relation to each other, and also able to give an (impartial, objective) order to their moral determinations: rules and norms which are obtained by detaching oneself from one's own particularity and inclinations and those of others, thus adopting an impersonal point of view from which to fix the representation of each moral problem as that of a relationship between "generalised others", gaining at the same time the status of full moral agent.6 Gilligan's idea was instead that what was worth inquiring into was precisely what rendered it difficult for women to give an account of their own experience that fitted these terms. Her thesis was therefore

⁴ See Gilligan, In a Different Voice, chap. 5. For a similar comment on women seen as "defective, deficient and dangerous beings" throughout the history of Western philosophy see Virginia Held, The Ethics of Care. Personal, Political, and Global. (Oxford-New York: Oxford University Press, 2006), p. 59. For wider analyses on the subject see: Genevieve Lloyd, The Man of Reason. "Male" and "Female" in Western Philosophy. (Minneapolis: University of Minnesota Press, 1984); Francoise Collin, Evelyne Pisier, and Eleni Varikas, Les femmes de Platon à Derrida. (Paris: Plon, 2000).

⁵ As is well known, Kohlberg's studies proceeded by measuring the moral development of adolescents on a scale of six stages, each characterised by a different conceptualization of justification of moral judgements, ranging from an initial stage of egotism, through one of heteronymous adherence to conventional norms, to a final stage of post-conventional universalist moral thinking.

⁶ In order to express these ideas Gilligan makes explicit reference to George Herbert Mead's formulation as do many others after her, see for instance: Seyla Benhabib, "The Generalized and the Concrete Other. The Kohlberg-Gilligan Controversy and Moral Theory," in Ead. Situating the Self. Gender, Community and Postmodernism in Contemporary Ethics (Cambridge-Molden: Polity Press, 1992), pp.148-177. Sandra Laugier efficaciously exemplifies the alternative between detachment and connection in a paper on Gilligan's care ethics, see Sandra Laugier "L'éthique d'Amy: le care comme changement de paradigme en éthique", in Carol Giligan et l'étique du care. ed. Vanessa Nurock (Paris: Puf, 2010). On the negative and positive role of inclinations see Adriana Cavarero, Inclinazioni. Critica della rettitudine. (Milano: Raffaello Cortina, 2013).

that those characteristics which were considered as factors limiting the moral capacity of women, such as, for instance, "their care for and sensitivity to the needs of others" or the "emphasis on connections rather than separation", (characteristics she herself noted in her interviews), should instead be brought to light and considered in positive terms. And this in order to achieve, not only, or not primarily, a better representation of women and their experience, but rather a more accurate view of morality and human relationships.

The disparity between women's experience and the representation of human development noted throughout the psychological literature, has generally been seen to signify a problem in women's development. Instead, the failure of women to fit existing models of human growth may point to a problem in the representation, a limitation in the conception of human condition, an omission of certain truths about life.⁸

Here the "truths about life" worth taking into account are those concerning the relational nature of each life and of life itself. These truths endorse a moral standpoint which casts problems and their solutions in terms of responsible care for relationships, an attitude acquired through solicitude and sensitiveness and from a consideration of humans as deeply interdependent.

The truth of relationship, however, returns in the rediscovery of connection, in the realization that self and other are interdependent and that life, however valuable in itself, can only be sustained by care in relationships.⁹

In general terms, the proposed model can be described as characterising moral judgement and practice as emerging from connection, instead of from detachment (a point widely underlined by sentimentalist readers), or as binding interconnected vulnerable selves instead of separate sovereign selves (an opposition between sovereignty and vulnerability which opens up also to various different readings, as for instance to some Aristotelian approaches, or to Wittegensteinian ones, or to those connected to radical feminist stances, as we will see). A further crucial element is the importance given to the particularity and difference of each life and each context. This is relevant if the main concern of morality is thought of in terms of maintaining the connection which ties us together, and of caring for our and the other's wellbeing or flourishing, from within this relational framework.

From different passages of Gilligan's book, care ethics emerges therefore as a moral model which puts at its centre the agent's capacity to be attentive, caring and responsive in relation to the needs of others, in their concreteness, particularity and relational nature, and which defines moral responsibility (or the

⁷ Gilligan, In a Different Voice, pp. 18-19.

⁸ Gilligan, In a Different Voice, pp. 1-2.

⁹ Gilligan, In a Different Voice, p. 127.

responsible character)¹⁰ in terms of the development and practice of these capacities.

Before coming in the following section to a more detailed account of her proposal, let me say a few words on the feminist characterization of Gilligan's gesture.

Gilligan's move can be considered as feminist insofar as she rejects and criticises a stereotyped verdict concerning women's characteristics, one which is congruent with the specific and inferior position assigned to women in "men's life cycle" a typical judgement of what can be defined as the patriarchal system. In a very broad understanding, a position is considered feminist as long as it is critical toward the idea that women, *qua* women, are different and inferior creatures (a critique eventually considered as leading to a more general discourse on difference/s).

But of course this feminist core issue can be, and has been, developed in different ways, and in this light Gilligan's move can be understood as a gesture of a precise and specific feminist kind.

The aim of claiming that women are just as human as men can be achieved, in fact, in different ways. I will make reference to at least three different strategies. On the one side it can and has been sustained, that woman are substantially equal to men (at least concerning the relevant human capacities, as for instance reason), and therefore not inferior, and that if they seem different and inferior it is only because of unjust social conditions that have limited their opportunities. Women's minority is therefore only the result of centuries of discrimination. If Gilligan's feminism were of this kind she would have sustained that girls and young women scored low on Kohlberg's scale only because they had been socialised in a discriminating environment; had they had the same opportunities and socialization of boys they would have achieved the same results.

But this is not what she argues.

Gilligan, in fact, following a more radical understanding of feminism, maintains that it is the scale, and the ideal of morality it enforces, that are misplaced, since they do not represent human experience and morality in their complexity: they do not, for example, take into account women's experience or women's ways of expressing themselves. She recognises a difference but non an inferiority in women's development, and hence the necessity of a reconfiguration of morality. In these terms her gesture can be defined as of a specific feminist kind. Broadly speaking one can say that this second kind of feminism maintains that women are different from men, but not inferior, and that the difference they

¹⁰ Although Gilligan speaks more often of a "morality of responsibility", I think that the reference to a "responsible character" is not misplaced in this context.

¹¹ See Gilligan, In a Different Voice, chap. 1, entitled "Woman's Place in Man's Life Cycle".

represent is worth inquiring into. Valuing women's difference opens up to a reconsideration of what it means to be human, and thus to an enrichment for all.

For the sake of my argument it is worth mentioning that although considered forceful, this kind of feminist strategy has been made the object of different criticisms.

The main criticism raised against it is that it seems to imply the possibility of offering a common definition of women or of women's experience, which is precisely what has hitherto been contested. It is alleged that claiming the value of women's difference, although a powerful gesture in destabilising the supposed neutrality and the false universality of patriarchal discourse, could in its turn become similarly oppressive, as it seems to convey the possibility of a universal description of women, thereby duplicating the monological structure of patriarchy.

The debate has been broadranging, not only on the nature of the supposed difference – whether it is essential or socially constructed – but also (and more interestingly) the definition of this difference itself has been put under pressure. Is "women's difference" that which was defined by the patriarchal system, which should just be freed from its negative evaluation, or should it be completely redefined and explored? And could such a redefinition be seen as embracing all women? If so, what happens to the other relevant axes of difference which operate among women and more generally among humans (typically, race, class, sexual orientation, and so forth)? In the light of these problems, a third feminist strategy has emerged which can be thought of as taking on and attempting to offer an answer to these questions, thus opening up the problem of differences, and not only of women's difference, for ethics.

This is an important issue for the kind of analysis I would like to offer, namely an attempt to consider to what extent Gilligan's ideas, and care ethics as such, could be collocated in this latter framework. That is to say, whether care ethics should be considered as emerging from the second kind of feminist strategy, or whether it can be seen as a way to tackle these broader questions.

Let me go back to Gilligan: in assuming, characterising and valuing women's difference and morality it has been said, for example, that Gilligan disregards differences between women and other relevant differences among human beings (social class, whether one is at the margin or at the centre of the social system, etc.). She is thereby accused of ascribing a common nature or common features to women, features which besides mirror those ascribed to them traditionally (e.g. the traditional feminine virtues), albeit in a positive light. This is a typical issue put forward by the so called power-centred feminists, but also by recent (and in my view more interesting) developments of feminist thought. I will argue, in what follows, that these critiques are disputable, with regard to Gilligan's work or to possible interpretations of it, at least to a certain extent. But I will also argue that to situate care ethics within a different feminist framework implies (and suggests) a

very articulated set of considerations, which have not always been taken into account in the ensuing debate.

In this respect, although on the nature of the "different voice" put forward in her work Gilligan shows a sort of ambiguity, it must be said that in the end she tries to take a definite position. In the end she is explicit in claiming that while it is important to recognise that women have a voice, as a way of doing justice to them, what she is mainly interested in is that in acknowledging this different voice we are recognising the existence of differences among human voices, or — as she has recently argued — the existence of a more humane voice, which is only contingently more easy to individuate in (young) women. ¹²

In fact, already in *A Different Voice* she claims to be interested more in the "theme" than in the "gender" of the different voice she was hearing, and she acknowledges that the association between women and the particular vision of moral development she traced there was empirical and not absolute. ¹³ She claims not to be interested in defining women's difference as such, but in the more general aim of giving an account of human differences that is not couched in terms of "better or worse". ¹⁴ This is intended to be the main result of her work: a criticism of the supposed neutrality of the scales commonly used to measure human (moral) development, as part of a more general critical stance on the assumed neutrality of the categories of human thought, knowledge and language (and in this respect she talks of the "relativity" of the "categories of knowledge as human constructions", while, as I will clarify, I prefer to talk of the "instability of categories"). ¹⁵ This opens up the possibility of a positive use of this criticism. Thus she claims:

My interest lies in the interaction of experience and thought in different voices and the dialogue they give rise to, in the way we listen to ourselves and to others, in the stories we tell about our lives.¹⁶

With this kind of claim, in my opinion, she clearly commits herself to a particular radical stance in relation to the abovementioned debate within feminism, a position which is compatible with more recent forms of feminist thought, those offering an understanding of feminism not as limited to the problem of mending women's oppression or affirming women's difference, but as critical of patriarchy as a more generalised form of oppressive structure, as a system of power which disciplines hierarchically not only women, but both men and women, human beings in general, on the basis of supposed differences in status, whilst at the same time obscuring the value of differences that matter, that is of different

¹² See Carol Gilligan, *Joining the Resistance* (Cambridge-Molden: Polity Press, 2011).

¹³ Gilligan, In a Different Voice, p. 2.

¹⁴ Gilligan, In a Different Voice, p. 14

¹⁵ See Carol Gilligan, *In a Different Voice*, p. 6 and Sandra Harding, "The Instability of the Analytical Categories of Feminist Theory", *Signs*, 11 (1986), pp. 645-664.

¹⁶ Gilligan, In a Different Voice, p. 2.

voices. Gilligan seems therefore to regard care ethics as an ethics which deals with humankind in this differentiated sense.

This is clearer in her later writings (including the letter to readers of the second edition of *In a Different Voice*), for instance where she claims that "difference [is] a marker of human condition and not a problem to be solved"¹⁷ and that it is in this light that we should recast our discourses on separation and connection with regard to individuals and relationships, rules and responsibilities.

We may take it then that Gilligan is not so much interested in claiming that women have a different essence or nature as in claiming that what she finds in their development is important in order to recognise women's possibility to express themselves and at the same time in order to reconsider a morality for both men and women, a morality which in turn is more open to differences. If this is the case, we can consider her argument as being made in three steps.

In my view, Gilligan's contention that the scales employed to measure human morality are not neutral, and that humanity is more complex and differentiated than has been assumed in uncritical representations, is a specific feminist move which can be described in the following way: as the idea that (1) recognising women's difference will open up to (2) a recognition of human differences which will both allow women to gain a voice and allow for a more interesting representation of human experience, through (3) a wider reconfiguration of morality and humanity. This reconfiguration will mainly be concerned with the recognition of the frailty and difference of human experiences and of the ways in which we express them. As we will see, in fact, care ethics entails care for humankind in its difference and frailty and is in itself a frail voice.

Yet this complexity of levels is not easy to express and many ambiguities remain to be clarified, but it is important – and this is my point – to vindicate the complexity of the feminist move described above, in its different aspects. Often, however – particularly in the wider debate on care ethics – this has not happened.

It should be noted, as a final point in this regard, that even in Gilligan's writings the treatment of this complexity is not always clearly articulated. In fact, while Gilligan seems to consider the difference she recognises in previously unheard women's voices as a new voice, only empirically womanly, at times she appears to describe it precisely as the difference that has been traditionally ascribed to women, as if it were sufficient to rehabilitate terms attributed to women, such as those of their "goodness and virtue", to describe the most humane voice.

Gilligan notes in different places that the very same traits of "sensitivity" and "solicitude", which she places at the centre of a different moral paradigm for humans, are the same traits which were traditionally considered as, on the one hand, characterising the "goodness of women" or as "feminine virtues" and, on the

¹⁷ Carol Gilligan, Letter to Readers, in Carol Gilligan, In a Different Voice. Psychological Theory and Women's Development. (Cambridge, Mass.: Harvard University Press, 1993), p. xvii

other, as preventing women from achieving full moral maturity.¹⁸ As she says, this is a paradox that she wants to disentangle, bringing those traits fully into the light and putting them at the centre of a new vision of moral concern, in order to free women from their marginal position and, at the same time, to gain a different understanding of morality.

In this case, Gilligan's proposal seems to involve two moves. First she recognises a moral worth to the concerns which emerged from the girls and young women she interviewed in her studies, those which coincide with the traditionally undervalued "feminine virtues". Then, as she claims in the same book and more clearly in the following works, she recognises these "virtues" as human rather than specifically feminine, thus recognising their role in a more comprehensive account of morality. What is lacking from this description is an analysis of what we can learn from this transposition, in terms of a broader reconfiguration of morality, that is to say, in terms of the instability of categories and of the frailty of human descriptions or voices. This is what is made explicit, instead, in the three-steps framework suggested above where a more general reconfiguration of the field of morality together with a more complex representation of human condition is implied.

My point here is to ask whether the retrospective description that Gilligan gives of her own work is accurate, or whether in fact what she is proposing can be considered as something rather more complex than just moving certain questions from the margin to centre. In this movement, in fact, something is gained (or better lost): the very idea of a universal and neutral truth is lost, but the idea of a more unstable centre of morality is gained. The implication is therefore that the entire moral landscape should be reconfigured or, more radically, the notion emerges that it could never be configured once and for all, and that only in recognition of this can we try to account for human lives in all their differences.

Is there any connection between this kind of epistemological standpoint and a morality of relational sensitivity? I would try to suggest something similar.

In other words, going back to Gilligan's claims concerning the "goodness of women" or the "feminine virtues", one might wonder whether recognising their full value is a sufficient move from a feminist point of view, or whether something must be added in order to gain the refined understanding of care ethics as a post-patriarchal morality for both men and women along the lines we have just described, i.e. as an ethics for humans in all their particularities and differences.

To argue that this is the case, it is necessary first to consider more in details how Gilligan describes the different moral voice she has listened and envisaged.

¹⁸ See for instance Gilligan, *In a Different Voice*, p. 18 but there are similar claims on many pages of this book as well as in many passages from her, *Joining the Resistance*.

2. Interdependence and responsible care

What Gilligan finds in analysing girls' and young women's reactions to moral dilemmas can be described as follows: girls and (young) women are generally more aware of the role that relationships play in human life; they trust the human capacity to maintain and restore the web of interdependence which sustains human life, so that everybody and — she says — "life itself" may flourish. She claims that attention to interconnection leads girls and women to be more attentive and sensitive to the particular needs of others and to feel responsible for them, rather to abstract rules or principles of fairness or rights, as well as to the relational dimension which characterises the practice of this responsibility and not only its genesis. Women, or at least the women she has interviewed, once they are free to express themselves and to find their own voice, see moral problems in a different way, and find different solutions, which call for different concepts or different abilities. Gilligan therefore claims that if we do listen to women's voice we will be able to envisage a different morality.

It is worth mentioning that as Gilligan notes, envisaging such a different moral voice is not an easy task, because what makes the women's voice relevant for morality results also in its weakness: that is, its recognition of the frailty of the human condition and of the web of relationships which nourishes it, and also of the relevance of the particularity of contexts, thus it is always a tentative sound that is produced. "It depends" is the common female answer in the case of moral dilemma, and this can be considered either as a confused answer or as a meaningful one, depending on what lies behind it. Gilligan attempts, out of her own attentive and caring listening, to envisage a framework which makes the power of such an answer visible, namely the attention and care it shows.

Thus, in the famous example of the two children, Jake and Amy, who are asked to deliberate on the dilemma of a man, Heinz, who has to decide whether or not to steal a drug he cannot afford in order to save his wife's life, while the boy reduces the dilemma to a conflict of rights (to life and to property) and solves it easily by adopting a detached and impersonal point of view according to which life has a logical priority over property (therefore not only should Heinz steal the drug, but if arrested the judge should reason according to the same logic and not condemn him as a thief), Amy seems at a loss and confused. She asks a lot of questions considered unnecessary according to the standard procedure adopted in such tests. It is only out of an attentive listening to her words, and by conducting the interview differently, that her voice emerges positively, and that Gilligan can claim that the girl sees the problem in a different way.

For Amy, in fact, the dilemma arises – Gilligan notes – not from the conflict between the druggist's rights and the rights of Heinz wife, but from the druggist's

¹⁹ Gilligan, Letter to Readers, p. xxi; In a Different Voice, p. 38.

failure to respond to Heinz and to his wife's needs. Furthermore, it appears that this is not so much a problem that has to do with the druggist himself, as with the relationships between him and Heinz. The problem lies in a lack of communication, a communication which could render the druggist able to see the consequences of his refusal.

In Amy's vision, therefore, the problem and the solution lay in the relationship between particular persons in a particular context. In this sense, Gilligan claims that here we are faced with a different moral language and a different moral logic: the language of responsibility and the psychological logic of relationships.

Yet the world she [Amy] knows is a different world from that refracted in Kohlberg's construction of Heinz's dilemma. Her world is a world of relationships and psychological truths where an awareness of the connection among people gives rise to a recognition of responsibility for one another, a perception of the need of response. Seen in this light, her understanding of morality as arising from the recognition of relationship, her belief in communication as the mode of conflict resolutions, and her conviction that the solution to the dilemma will follow from its compelling representation seem far from naive or cognitively immature. Instead Amy's judgments contains the insights central to an ethic of care, just as Jake's judgments reflects the logic of the justice approach.²⁰

I think that this example is crucial in order to gain an insightful account of Gilligan's care ethics. For this reason I will need to go into it more deeply.

Gilligan continues offering the following comments:

Her [Amy's] incipient awareness of the "method of truth", the central tenet of non violent conflict resolution, and her belief in the restorative activity of care, lead her to see the actors of the dilemma arrayed not as opponents in a context of rights but as members of a network of relationships on whose continuation they all depend. Consequently her solution to the dilemma lies in activating the network by communication, securing the inclusion of the wife by strengthening rather then severing connections.²¹

It is worth noticing that for Amy not only should Heinz's wife be included, but that in this process the druggist is not left aside either, as he would be in the alternative case in which his rights should give way to those of the sick woman, considered in an impersonal way as having greater force (as, for instance, in Dworkin's understanding of rights as trumps).

In fact, in the end Amy's answer is that stealing is not the best choice Heinz could opt for, while communicating would allow the druggist to have a wider and

²⁰ Gilligan, In a Different Voice, p. 30

²¹ Gilligan, In a Different Voice, pp. 30-31.

more compelling representation of the situation. The problem thus cannot be solved by a single person, it requires instead the maintenance of a space for a relationship in which the vulnerabilities of all the actors are considered, starting from that of the sick woman, but without obliterating the others. The moral responsibility of everybody is therefore in maintaining this space of communication, engaging in relationship and committing oneself to care for the vulnerable.

The ideal of care is thus an activity of relationship, of seeing and responding to need, taking care of the world by sustaining the web of connection so that no one is left alone.²²

This is in the end the idea of moral maturity – with its different language and logic – that Gilligan proposes, not only as a feminine one, but as an important ideal which should be recognized and valued, as indicating the way to develop an alternative and valuable pattern of moral development.

Gilligan therefore puts forward a vision of moral maturity in contrast with those based on detachment, impersonality, impartiality and universality, those which rely on norms that are abstract and acquired through reason and which purport to breach the gap between ourselves and others. Girls, not seeing the gap, are rather concerned with the responsibility emerging from relationships, and with the need to respond from within the same relational tissue, working on those same relationships from within, in their concrete particularity, in order to improve them, to render them adequate for the survival and flourishing of their participants. On this view, moral maturity does not consist, therefore, in the capacity to abstract or detach oneself from the particular context of a moral dilemma, from one's own role in it, or in reducing it to the issue of balancing conflicting interests on the basis of impersonal, abstract and formal procedures, considered as universally valid (abstract procedures or principles once gained are superimposed on the circumstances of everyday existence). Rather it consists in the development of sensitivity and solicitude, of attentiveness and interest in the needs of the other in their concrete particularity, in the awareness that it is possible to answer to these needs only by entering the same dimension of concreteness, communication and relationality.

Finally, it could be said that, in order to grasp the core content of an ethics of care, Gilligan's attitude is in itself an appropriate starting point: her gesture of entering into a direct relationship with the girls, in order to listen to them, abandoning pre-established interview procedures, is in fact a clear example of the

²² Gilligan, In a Different Voice p. 62. As we will see this reference to taking care of the world is present also in Joan Tronto's definition of care, although she seems to be less interested in the relational aspects of it. See Joan Tronto, Moral Boundaries. A Political Argument for an Ethic of Care. (New York: Routledge, 1993) and see infra in this paper for a discussion of her position.

putting into practice of precisely what she went on to theorise as a result of her deep listening to those girls. Hers is a caring attitude, *the* ethical attitude in the new horizon she tries to depict.

Let us now turn to certain other aspects of Gilligan's work in order to better characterise ethics of care as a moral paradigm.

Firstly, it should be made clear that while the "ideal of care" proceeds from the recognition of the interconnection and vulnerability of human lives, Gilligan seems to acknowledge the space for individual responsibility: the responsibility for participating in the web of relationships which sustain life, i.e. being responsive to the needs of others in their particularity. This sense of responsibility proceeds from a compelling and intimate representation of one's own position in relation to others and to their needs.

Secondly, with regard to acquiring this intimate representation, although she generally speaks of "sensitivity" and "solicitude", Gilligan also indicates more specific kinds of capacities as crucial, such as: verbal communication, narration and listening; sentimental communication, empathy and sympathy; attention and imagination (differentiating these from identification and generalization).²³ She doesn't establish a hierarchy among them, nor does she offer specific characterizations, but calls for all these capacities together; while of course they have been conceptualised differently and are attributed varying values in different philosophical developments of care ethics. It may be important to note that at least in her last book, Gilligan seems to give more weight to empathy (also referring to neurobiological and anthropological studies), thereby opening the way mainly to sentimentalist reconstructions of care ethics.²⁴

Finally it is worth considering that, in her understanding, relationships can be sustained only in their particularity and should not be encapsulated within abstract rules, and therefore attention to differences and details is fundamental. Moreover, this attention to particularity is taken to be important for each (that is to say, for any kind of) relationship in which we might find ourselves, and is not limited to characterising some particular or specific kinds of relationships (such as for instance personal affective relationships). This is a significant development: at least in my understanding, the point Gilligan is making is that the needs of each participant in a relationships (that is to say those of each human being) should be met in his/her particularity, and not according to idealizations, generalisations,

²⁴ See Gilligan, *Joining the Resistance*, where she refers to the works of Antonio Damasio and

Sarah Blaffer Hardy.

²³ Regarding "empathy" see Gilligan, *In a Different Voice*, p. 8 and 11, where she characterises girls as having a greater store of it; she speaks of sympathy only when quoting George Eliot, at p. 148. General reference to sentimental communication as well as to verbal communication, narratives and listening are ubiquitous in her work, as well as to attention. On imagination and generalization see p. 59.

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etc.²⁵ Conversely, however, care ethics is more often thought of as a model that advocates the importance of meeting the needs of (some) particular others, namely those with whom we have particular affective ties (see for instance the considerations concerning the opposition between partiality vs. impartiality in our obligations, developed following the above interpretation). While of course there is a problem, and not a trivial one, in understanding how we can represent and feel the particular needs of persons we do not know directly, it is clear that this forms part of what Gilligan is aiming at. It is not a casual fact that the core of Heinz's dilemma does *not* turn around a particular affective relationship (or around the conflict between an impartial responsibility and one emerging from a particular tie), but lies in the encounter between two strangers (Heinz and the druggist), which, as Gilligan explains, can be explored in its moral aspects in two ways: out of an abstract logic of rights or out of care for the particular needs of all involved. This is a critical point in my understanding and one of the core issue of this paper.

Thus in Heinz's dilemma these two children see two very different moral problems – Jake a conflict between life and property that can be resolved by logical deduction, Amy a fracture of human relationships that must be mended with its own threads.²⁶

Similarly, it is important to make clear that, while appealing to the capacities and qualities of each to care for others, or to sustain the web of relationship in which one is enmeshed, in Gilligan's account care ethics is not a form altruistic ethics, calling for benevolence or love and risking self-sacrifice. Gilligan clearly states that the different morality she has identified, in listening to girls and young women, is a morality that results from a development, just as much as that identified by Kohlberg, whose final stage results precisely from the overcoming of self-sacrifice or "maternal care". In fact she is not merely making reference to the sort of greater openness to relationships, or willingness to communicate, or empathy, which she traces in the psychological development of girls (supposedly due to the connection with the maternal origin, a position which differs from that

²⁵ See for instance where she claims: "only when substance is given to the skeletal lives of hypothetical people is it possible to consider the social injustices that their moral problems may reflect and to imagine the individual suffering their occurrence may signify or their resolution engender", Gilligan, In a Different voice, p. 100. On this issue, Gilligan quotes George Eliot, from The Mill on the Floss, where Eliot lets her main character, Maggie Tulliver, claim that "the truth of moral judgments must remain false and hollow unless they are checked and enlightened by perpetual reference to the special circumstances that mark the individual lot" (Gilligan, In a Different Voice, p. 148). This is an interesting reference, for instance in the light of a sentimentalist reading of care ethics, since, as is well known, Eliot appreciated David Hume's philosophy. Of course there are also other possible readings of the importance of particularity in different traditions, see for instance Blum's and Laugier's interpretations of care ethics.

of separation of boys),²⁷ and calling for a morality of (natural) compassion, benevolence or altruism. She is rather making reference to a progress which involves different stages, the latter of which, the one corresponding to moral maturity, is defined in terms of the ability to care for the other as well as for oneself through realising that "responsibility now includes both self and other, viewed as different but connected rather than as separate and opposed".²⁸ Here lies the ideal of the responsible care, which differs from a preceding stage of altruistic "maternal" care (which is in turn comparable to Kohlberg's conventional stage).²⁹

It is worth mentioning — expanding this latter thesis — that stating that one cannot care for others at the expense of oneself is not a claim derived from the value of one's own rights or sovereignty, but emerges again in the form of a "relational truth": the idea is in fact that relationships will not hold if one member is only giving, and in so doing looses all her energies. In the same way, interest in the others' suffering or flourishing is not derived from an external injunction to care for them or to be benevolent, but from the connection between our own flourishing and that of the others, between our feelings and those of the others. Finally it should be noted that idea of the need to overcome care of a maternal kind is a sign of what I was arguing above, namely that Gilligan is not only acknowledging the (moral or general) value of traditional feminine attitudes (or virtues), but envisaging a complex new paradigm emerging from, and able to deal with, the recognition of the human condition of interconnection.

In the same light, maintaining the web of relationships does not automatically mean that no one will be left out, as if it were a zero sum game. Of course there can be costs and hurts and harms, and even separations and failures, in the effort to maintain interconnection. Coping with the vulnerability and contextuality of (human) life and experience means coping with the evaluation of these costs, but also with the acknowledgement of their inevitability. These costs and hurts can be thought of as in some way individual but, in the light of the conception of porous subjectivities underlying this vision, they cannot be easily ascribed to one or the

²⁷ In later writings she has revised this claim, disentangling the development of empathy and communication from the gender divide, and considering these capacities as "natural" for both girls and boys, but obliterated by the patriarchal superstructure which girls for a number of reasons resist a bit more than boys. These qualities could lead instead to a different human moral approach. See Gilligan, *Joining the Resistance*. Chap. 2 and 4.

²⁸ Gilligan, In a Different Voice, p. 147.

²⁹ And it is worth noticing this point, since other care ethicists instead have heavily relied on mothering as the relevant metaphor to exemplify caring attitude and to specific relationships its domain (see for instance Ruddick, Noddings and Held).

³⁰ Again Gilligan's quotes Eliot: "Since 'the mysterious complexity of our life' cannot be 'laced up in formulas', moral judgement cannot be bound by 'general rules' but must instead be informed 'by a life vivid and intense enough to have created a wide, fellow-feeling with all that is human'." (Gilligan, *In a Different Voice*, p. 130). Again Humean echoes are more than present.

other.³¹ One could say that, in Gilligan's view, the core (individual) responsibility is not that of facing and answering the other's needs as given, or as the other represents them, but that of maintaining the possibility of an exchange (sentimental and dialogical) in which the needs emerge, are represented and cared for, as far as this is possible, and that this will not necessarily lead either to an easy solution or to the expected one.³² Survival, flourishing and the reduction of suffering are intrinsically relational; they should not be represented as the individual claims or needs of certain separated selves that can be answered or met by certain other benevolent selves, but as issues emerging and finding answers in the context of relationships, personal and social, which keep together individualities and life. Notwithstanding this accent on interrelationship I think that, as has been said, there is space in this account to conceive of one's personal responsibility in the shape of taking part in the interpersonal exchanges which emerge from the interconnection, and returns to it.

In Gilligan's words:

The changes described in women's thinking about responsibility and relationships suggest that the capacity for responsibility and care evolves through a coherent sequence of feelings and thoughts. As the events of women's life and history intersect with their feelings and thought, a concern with individual survival comes to be branded as "selfish" and to be counterposed to the "responsibility" of a life lived in relationships. And in turn, responsibility becomes, in its conventional interpretation, confused with a responsiveness to others that impedes a recognition of the self. The truth of relationship, however, returns in the rediscovery of connection, in the realization that self and other are interdependent and that life, however valuable in itself, can only be sustained by care in relationships.³³

The central tenet of responsible care as moral maturity – that is to say of an ethic of care – is therefore that of caring for the relationships among oneself and the other/s, caring for oneself and for the other/s *in* the relationships, and caring for life as a web of relationships, woven from the capacities which emerge from a "coherent sequence of feeling and thoughts". And of course a deeper analysis of this "sequence of feeling and thoughts", at least at the personal level, is necessary from a more structured philosophical point of view.

³¹ This point emerges clearly from the study on abortion, see Gilligan, *In a Different Voice* chap. 4. See also Baier on responsibilities which cannot be easily divided into what is mine and what is yours. See Annette Baier, *Moral Prejudices. Essays on Ethics*, (Cambridge Mass.: Harvard University Press, 1995), p. 266.

³² See where she claims, commenting on the words of some interviews: "then the notion of care expands from the paralysing injunction not to hurts others to an injunction to act responsively toward self and others and thus to sustain connection." (Gilligan, *In a Different Voice*, p. 149).

³³ Gilligan, In a Different Voice, p. 127.

In this light, a final point concerning the object of our care or responsibility requires a mention here, because this is again the point at which different readings of care ethics are possible. While Gilligan places a strong emphasis on the importance of personal involvement in relationships, in meeting the needs of the others or sustaining relationships in their particularity, I wish to stress that, at least in her later writings, the needs or support she refers to are not only those involved in the physical survival of each, or in relation to a physical or psychological (inter)dependence, but also - at a deeper symbolic level - those relating to the recognition of one's own personhood and voice. In this light, taking into account the other's and our own "suffering" can be viewed in many ways. These can include taking into account the pain caused by physical harm, the pain of being left alone or not having significant relationships, or that of not being recognised as having a voice or as being a person. The notion of care thereby shifts from the sphere of simple (naturalist, psychological) kinds of attitudes and activities, as for instance those exemplified by nurturing and the like, to that of a more complex symbolic play of interrelations that are clearly linked to the social and cultural level.

What is interesting, in my opinion, is the link between these different levels, and the idea that there is personal responsibility involved in considering all these different levels, while caring for the others, or for our relationships with the others. In other words, for example, we should cultivate a sensitivity towards different levels of violence and disapprove of them. So our being attentive to others can be configured as being attentive both to the others' and to our own vulnerability at different levels, an attention that finds its roots in our own vulnerability, and one that can take the shape of a personal responsibility to answer to the others' needs in order to maintain a rich texture of relationships which is in turn respectful of people's differences and contributes to their flourishing (as we will see later a consonance can be found here with most recent feminist awareness, but also with certain refined sentimentalist considerations, such as that found in Baier's work on cruelty in morals).³⁴ Here again is where, in my opinion, a difference between just revaluing traditional feminine attitudes (as for instance nurturing) and the value of a wider (and multilayered) meaning of the proposed caring attitudes becomes important.

To sum up, in my interpretation, Gilligan's ethics of care can be understood as stemming from a conception of humans as interconnected, fragile and vulnerable subjects who constitute and maintain themselves, at different levels (from their own physical existence, to their own identity, to their sense of separation and

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³⁴ Baier, *Moral Prejudices*. Chap. 13 entitled "Moralism and Cruelty: Reflections on Hume and Kant".

independence, their flourishing and to the satisfaction of needs of different kinds), through relationships. Porous to one another and — also through personal relationships — to society, to culture and to various forms of discourses, they are for that same reason in need of and capable of morality. A morality which can be thought of, in the end, as the practice of attention to others in their particularity and difference, woven from solicitude and care toward the relationships in which we are all enmeshed.

The point now is how to configure this solicitude and care, so as to accommodate the complexity just mentioned.

Here is where an account of the subsequent – and more philosophically structured – debate on care ethics becomes relevant, along with the reference to recent developments in feminist thought.

The general point I would like to make is that, in giving an adequate philosophical account of the insights proposed by Gilligan, one should pay attention to two important issues among those I have mentioned: that concerning the existing ambiguity between caring for others in their particularity and caring for particular others; and that regarding the different levels at which we can think of the needs (as a way to express in brief what we should care for) of others and our own. While the first question seems to me rather straightforward, I will offer a few further considerations on the latter. I have tried to argue that, on the one hand, the needs at stake in care ethics can be conceived as the pleasures and pains which we might represent or feel or imagine in various ways. Either, for example, on the basis of a common grammar of pain and pleasure upon which given human faculties operate, or on the basis of a certain "knowledge" of human nature (as in quasi-Aristotelian accounts), 35 or finally on the basis of certain forms of easily shared narration and communication. On the other hand, the needs at stake can be considered more broadly as ranging across different levels of experience, thus presenting the problem of the visibility or accountability of particular ways, or forms, of living, of being human, of being a person, of having a voice or of feeling pleasure and pain. To conceive of needs in this latter sense implies taking into account the problem of the representation of different grammars of pleasure and pain and that of the recognition of different voices, in a word, the radical problem of difference and, as we will see, also that of the instability of the categories in which we express all this.

It is my conviction that the existing debate on care ethics might be pushed forward with regard to these two issues, and that useful contributions could be drawn from feminist authors who are not engaged directly in the debate on care ethics. In what follows I will be rather sketchy on the debate on care, and more detailed on the feminist contributions.

³⁵ Tronto in *Moral Boundaries* offers this kind of reference.

3. The debate on care ethics

As has been said, there have been many attempts to develop more encompassing or more philosophically structured elaborations of an ethics of care.

Among the many it is worthwhile to recall Virginia Held and Joan Tronto's attempts to offer a comprehensive account of an ethics of care, considered as a distinctive moral paradigm,³⁶ as well as the important work of Michael Slote (developed mostly with reference to Nel Nodding's writings on care), in which he inquires into the consonance between an ethics of care and a sentimentalist approach to ethics, also in relation with a reflection on virtue ethics.³⁷ His proposal of an ethics of care and empathy, his work on the breadth such an ethics could encompass, reaching out also to more traditional moral dimensions (such as deontology) and, more recently, his work on its limits (in the form of the dialectic between partial and impartial or personal and impersonal values or virtues), constitute one of the most comprehensive attempts to give shape to an ethics of care.38

Another crucial reference, of course, is to Annette Baier's work.³⁹ Although Baier didn't offer a comprehensive account of an ethics of care, dedicating her research – as is well known – mostly to the development of Humean themes (and being - as is also well known - rather diffident with regard to ethical theories), in my opinion she offers many of the most interesting clues to the possible consonance between care ethics and a distinctive and particularly refined reading of David Hume's sentimentalism.⁴⁰

Finally, among the interesting philosophical researches made on care ethics, one should not forget the work on moral particularism, in part with reference to themes deriving from Iris Murdoch's thought, as put forward by Lawrence Blum, and the recent work of Sandra Laugier in France, who offers an interesting reading

³⁶ See Held, The Ethics of Care; Tronto, Moral Boundaries.

³⁷ See Michael Slote, The Ethics of Care and Empathy. (London-New York: Routledge, 2007); Michael Slote, Moral Sentimentalism, (Oxford-New York: Oxford University Press, 2010) and also Michael Slote "Virtue Ethics", in Three Methods of Ethics: A Debate, ed. Marcia W. Baron, Philip Pettit, and Michael Slote (Cambridge: Blackwell, 1997), pp. 176-237.

³⁸ For the dialectic between partial and impartial values and care see Michael Slote, The Impossibility of Perfection. Aristotle, Feminism and the Complexities of Ethics. (Oxford-New York: Oxford University Press, 2011).

³⁹ Baier, Moral Prejudices.

⁴⁰ This is not the place to go into the debate around Hume's ethics, though many other contributions to this volume testify to its richness. It is however clear that in attempting to give a more philosophically accurate account of care ethics in sentimentalist terms, different interpretations of Hume do become relevant. I will hint at particular points in what follows.

of care in terms of ordinary language ethics and moral perfectionism, in Stanley Cavell's sense.⁴¹

In what follows, I will concentrate mostly on the works of Held, Tronto and Slote (leaving aside for the moment the other works mentioned, despite their relevance), as these are more widely known, and can be said to have contributed to the mainstream understanding of care ethics that is under investigation here. As already said, I will not enter into the details of these various analyses; I will instead limit my inquiry to considering whether or not, and if so in what ways, the richness and the complexities of the implications of Gilligan's work that I have tried to show have been accounted for in these elaborations, sketching in a very schematic and external comparative analysis.

The most relevant point I would like to make here concerns the fact that – at least in some contexts (for instance in Held's and Tronto's development of a moral model based on care) – the nature of care itself seems to go rather unquestioned as it is defined in terms of an experience or attitude we all already share (as for instance in the case of the care exchanged in the private sphere of personal and affective relationships). In these accounts, the existence and characterisations of the human attitude and activity⁴² of care is rather unscrutinized, or considered simply in terms of a shared experience, while the analysis is centred on the issues of developing a moral paradigm based on recognition of its moral worth, that is to say, on the value of the well know human ability to care, and of considering the breadth of its domain of application (and this holds true also for Slote's analysis, although it is different in other respects).

Held for instance in her book, *The Ethics of Care*. *Personal*, *Political and Global*, ⁴³ makes clear that an ethics of care as a normative perspective is based "on

⁴¹ See Sandra Laugier, Le sujet du care: vulnérabilité et expression ordinaire, in Qu'est-ce que le care?, Pascale Moliner, Sandra Laugier, and Patricia Paperman. (Paris: Petit Biblioteque Payot, 2009), pp. 159-200 and the recent: Sandra Laugier, Etica e politica dell'ordinario (Roma: LED, 2015).

⁴² It is worth mentioning, as an aside, that both Held and Tronto insist on considering both the dispositional aspects and the practical ones of caring, they see caring in a moral sense as involving not only being solicitous but also acting, engaging in practices of solicitude. For them this characterization poses a difficulty to the possibility of reading care ethics in terms of virtue theories. Although interesting this is not an issue I will discuss, partly because I do not think it impossible, from within some virtue ethics approaches, for instance those derived from sentimentalist approaches, such as Humean ones, to take into account actions and their consequences when considering virtuous traits of character of individuals; and partly also because I am more interested in the question I am trying to define here, which seems to me rather more fundamental, that of the possibility of to meeting the others' needs.

⁴³ Held, The Ethics of Care. Other relevant publications are Virginia Held, Feminist Morality. Transforming culture, Society and Politics. (Chicago: The University of Chicago Press, 1993); Virginia Held, ed. Justice and Care. Essential Readings in Feminist Ethics. (Boulder, Co.: Westview Press, 1995).

the truly universal experience of care".⁴⁴ An experience common to everybody, at least, as she says, in that every human being: "has been cared for as a child or would not be alive".⁴⁵ The ordinary and daily nature of the practice of exchanging care is evident, and this is witnessed for instance – she claims – by the North American expression "take care" as a common way to take leave of people.⁴⁶

While for Tronto care should be understood in terms of a group of activities which characterise our human functioning, at least at an experiential and ordinary level.⁴⁷ Her definition of care is often quoted:

A species activity that includes everything that we do to maintain, continue and repair our 'world', so that we can live in it as well as possible. The world includes our bodies, our selves, and our environment, all of which we seek to interweave in a complex life-sustaining web.⁴⁸

For both these authors, care is thus an activity and a competence which is already present and functioning in our lives, although it is often invisible or wrongly considered as confined to certain spheres of experience (that of particular relationships characteristic of family context, education or health care etc.), or else as delegated to certain individuals (women or minorities). They present it as an activity and competence whose practice and value should instead be recognised and placed at the centre of a more encompassing moral vision (and social transformation), suggesting that the qualities and competences characterising caring persons should become more widespread, and that the value of care should be recognised and translated from the personal to the social level, informing social institutions.

In both their analyses the value and the possibility of this type of expansion of an already given capacity and activity of care seems to be the main issue upon which to exercise a philosophical effort, while the characterisation of the qualities, or virtues, ⁴⁹ constituting the practice of care, as well as the inquiry into the human

⁴⁴ Held, The Ethics of Care, p. 3.

⁴⁵ Held, The Ethics of Care, p. 3

⁴⁶ Held, The Ethics of Care, p. 29.

⁴⁷ The ordinariness of care is defined also by Tronto in terms of the common presence in our language of the formula "I care" in opposition to "I don't care", as denoting "some kind of engagement". See Tronto, *Moral Boundaries*, p. 102. For an interesting analysis of a possible ontological level of Tronto's analysis, with an Aristotelian resonance, see Stephen K. White, "Care and Justice. Ontological, Ethical and Political Dimensions", (paper presented at the International Society for the Study of European Ideas (ISSEI) Conference, Utrecht, 1996).

⁴⁸ Tronto, Moral Boundaries, p. 103.

⁴⁹ Although both authors do use the term virtue in this context and also make use of typical expressions of virtue theories (such as for instance flourishing, excellences and so forth), it could be worth mentioning, for those interested in the possibility of giving an account of care ethics in the shape of a virtue ethics, that both Held and Tronto are sceptical concerning this possibility. In their opinion, it is a mistake to reduce care ethics to the form of a virtue theory because such

capacities and faculties involved, is rather hastily undertaken. In their books this effort amounts to a small part of the whole. In Held it is devoted to underlining the role of attentiveness, sensitivity, and the ability to respond to needs, basing this on a sentimental dynamics to be corrected in relationships by dialogue and communication, or to be refined, on the model of exemplar practices, for example, that of "mothering". In Tronto this effort amounts to the identification of four "moral qualities", namely attentiveness, responsibility, efficacy and responsiveness, which should be integrated into our moral practice. ⁵¹

It is moreover in this context that, while recognising a continuity between the qualities characterising the caring person, such as attentiveness, sensitivity, responsibility, relational competence, and responsiveness, and the qualities traditionally ascribed to women (and devalued), both authors strongly deny that there is anything essential about this connection. An ethics of care is such precisely in as far as it puts pressure on such an essentialist connection between care and women, and recognises the human value of those qualities, which are seen as only ascribed to women.⁵²

Both Tronto and Held seem mainly interested in this latter claim. In their understanding, it is necessary to free care from an essentialist feminine connotation, which is characteristic of the old patriarchal framework (and according to Tronto also of the modern moral point of view).⁵³ Achieving some

an account would consider care only for its dispositional and intentional traits, undermining the value of the actual engagement in the practices of care. Such an account would be unable to cope with the relational and social nature of care and is pervasively patriarchal (see Held, *The Ethics of Care*, chap. 2-3; Tronto, *Moral Boundaries*, chap. 4-5). Of course in my opinion these are generic and disputable claims, but to argue in this direction would be the object of a different paper.

⁵⁰ See Held, *The Ethics of Care*, p. 20, where she claims that an ethics of care, with "its alternative moral epistemology", "stresses the sensitivity to the multiple relevant considerations in particular contexts, cultivating the traits of character and of relationship that sustain caring, and promoting the dialogue which corrects and enriches the perspective of any one individual". For what concerns care moral epistemology held makes a rather syncretic reference to Annette Baier's and Margareth Urban Walker's works. The reference to mothering as the moral experience involving "feeling and thought experienced together" is instead in Held, *Feminist Morality*, p. 30.

⁵¹ Tronto, *Moral Boundaries*, pp. 126-137. For a possible Aristotelian reading see White, "Care and Justice".

⁵² The socially constructed nature of the gender ascription of these qualities is shown, for instance by Tronto, when considering the fact, that in recent times, at least in North American society it is not even true anymore that women are those in charge of care work, which now weighs upon other minorities. On this basis Tronto criticises Gilligan's work, especially with reference to the gender divide she retraces in the answers to the moral dilemmas. See Tronto, *Moral Boundaries*, chap. 3.

 $^{^{53}}$ Tronto argues in the second chapter of her book, that the stabilization of the modern impartialist paradigm – during the 18^{th} century - has rendered necessary the invention of

distance from the "old frameworks" is therefore linked to the possibility of recognising (an ethics of) care not as distinctively feminine but as distinctively human, and also to the possibility of enforcing the transformation of social institutions that is necessary for this recognition, interlacing in some way considerations on care with those on justice. In a word, the main point in their understanding is the need for the multiplication of the practices of care and the recognition of their value. But, in all this, the functioning of care as such, or the functioning of the human qualities it requires, remain somewhat unexplored.

I'd like now to take up the two points made at the end of the previous section. On the one hand it could be said that in these readings the issue of delineating care not only in terms of recognising the special value of "particular relationships", but also in terms of the attention paid to the "particular needs of all" has been resolved through the transposition of the value of care from the personal to the societal level; while on the other hand, the difficult issue of the visibility and the invisibility of needs has not been adequately examined. The epistemological complexity revealed in the re-elaboration of the concept of care hinted at before, and present in Gilligan's work, seems to have been left aside.

Similar, but not identical, considerations can be put forward in relation to other developments of care ethics.

In Slote's interpretation, for instance, care ethics is developed as a specific form of sentimentalism where what is crucial is the psychological mechanism of empathy, whose functioning and central role in moral development he retraces both in recent psychological literature, and in eighteenth century moral sentimentalism. His analytical effort is therefore more far-reaching in this sense. Yet, although Slote offers a more structured philosophical reconstruction the core functioning of an ethics of care, his main interest seems nevertheless to be in the problem of how, and to what extent, one can give account of more traditional normative and political distinctions, such as obligations to distant others, deontological distinctions and the like, from within such a paradigm. He illustrates the way in which care ethics can offer an account of these distinctions and where instead it diverges and conflicts with impartialist accounts, since, in his understanding, care ethics privileges (and this is a point of difference with the readings previously discussed) mainly particular relationships. 55

Still, it seems to me that, while the issue of particularity and partiality is tackled, although not in the same way as Held and Tronto, there is again less attention to the problem of the different levels in which the reflection on personal

[&]quot;feminine morality", and the definition of "feminine virtues" in order both not to abandon an important dimension of human life, that of care, and to control women.

⁵⁴ See Slote, Ethics of Care and Empathy and Slote, Moral Sentimentalism.

⁵⁵ See Slote, *Ethics of Care and Empathy*. See for instance his reference to Williams' problem about the integrity of agents, p. 33 and chap. 5.

responsibility in caring for the well being of others, and for the flourishing of the web of relationships sustaining life, should be articulated.

In one of Slote's most recent publications however he develops this point in a particular way. In his recent book *The Impossibility of Perfection* he argues that it would be opportune to adopt a balance between different philosophical methods and ideals, accounting for "masculine' concepts like autonomy and justice", and "feminine' ideals such as caring about and personal connection". This can be thought of as one way, although not the one I would suggest, to deal with this problem, i.e. that of recognising a limit to the paradigm of care, that is to say the partial value of both care and justice. ⁵⁶

Of course Slote is not assuming that "feminine ideals" means, in this context, that what is socially constructed as feminine pertains only to women, and in fact he adheres to the feminist idea of considering these ideals not only as morally relevant, but also as characterising the moral thought and practice both of men and women. Interestingly, moreover, in this most recent book, relying more on the work of Gilligan than in the previous ones (where he relied more on the work of Noddings), Slote defends as particularly feminist the idea he is proposing, that we should think of ethics as seeing "partial values that are equally relevant to men and women", ⁵⁷ and argues in this sense for imperfection.

This epistemological assumption, for which ethics in general consists of partial and different values and methods, although interesting in the light of the considerations I have put forward, nonetheless seems to me, in its application to care ethics, still to limit the understanding of this latter to a rather direct possibility of knowing how to care for particular others (a possibility which, in my opinion, should be subjected to theoretical scrutiny).

While I agree that some feminist thought does suggest the idea of the partial and incomplete nature of our values and of our moral theorising, or alternatively the idea of thinking of moral life as tragic and imperfect (although Slote rightly indicates Berlin as the champion of this latter point), I think that on the basis of a certain feminist awareness we might push forward this idea of instability. From this perspective, we might challenge the idea of care as a "partial value" with relation to justice, but as a complete value in relation to certain interpersonal settings, e.g. when we are caring for our beloved. This latter is, in my opinion, an option which does not account for all of the implications which can be derived from Gilligan's insights, on the basis of which a more encompassing vision of an ethics of care could be developed, both regarding its interaction with justice (i.e. the problem of distant others), and in relation to a less romanticised vision of the limited domain of personal relationships: in other words, a vision requiring a more complex reconfiguration of the moral domain.

 $^{^{56}}$ See Slote, The Impossibility of Perfection, p. 4 $\,$ and the entire volume.

⁵⁷ Slote, The Impossibility of Perfection, p. 34 but see the whole first chapter.

What can usefully be derived from Gilligan's work, at least in my opinion, is that the emphasis on interconnection or interdependency goes together with that on vulnerability, which in turn can be also expressed in the form of the difficulty of meeting the multilayered needs of others or even one's own. In this sense, as I have tried to show, caring does not mean only meeting the needs of our nearest and dearest, construed as a relatively easy task, or caring for them and also being able (through processes of refinement or artificial processes, conventions or institutions) to care for the needs of distant others with the same or sufficient attention (or in the most tragic version being split by the two partial values of care and justice). Given the different levels of human vulnerability and needs we have considered before, it is in fact impossible to consider the needs of our beloved as more easily identifiable and as severed from those of the others. Caring means therefore engaging in enough care to keep the fragile fabric of connections together and in the difficult task of recognising the difference of the other in its many aspects, the particularity of each life and the specific voice of each individual. This brings into question in both cases (near vs. distant others) the limits of our sensitivity and imagination, and of our listening, although these are fundamental and necessary resources. If - as I believe - the solution does not lie in calling for a (complementary or conflicting) impartialist methodology to confront these problems, since this is blind to particularity and differences due to its very structure, it is from within the same resources of sensitivity and imagination that we shall find a way to represent this kind of multilayered caring.

I think that some works on Hume's reflective sentimentalism could be of interest in dealing with these issues,⁵⁸ as well as considerations derived from Murdoch's ideas on perception, imagination and the relevance of frameworks, as developed for instance in Blum's moral particularism, or in Laugier's most recent works on moral perfectionism and ordinary ethics.⁵⁹ But I think that the clearest illustration of the problems I am trying to represent, together with some indication of the way forward, come from recent developments in feminist thought. So, even though some of these feminist reflections have been developed in dialogue with philosophical traditions that are a long way from those considered in the debate on care ethics, in the following section I will offer a brief excursus on recent feminist thought, and in the final section, return to the philosophical arena of the debate on care ethics.

⁵⁸ See for instance: Annette Baier, A Progress of Sentiments, Reflections on Hume's Treatise. (Cambridge., Mass.: Harvard University Press, 1991); Eugenio Lecaldano, La prima lezione di filosofia morale. (Roma-Bari: Laterza, 2010); Jaqueline Taylor, Reflecting Subjects. Passion, Sympathy, and Society in Hume's Philosophy. (Oxford-New York; Oxford University Press, 2015); Alessio Vaccari, Le etiche della virtù. La riflessione contemporanea a partire da Hume. (Firenze: Le Lettere, 2012).

⁵⁹ See Lawrence Blum, *Moral Perception and Particularity*. (Cambridge, Mass.: Cambridge University Press1994); Laugier, *Le sujet du care* and Laugier, *Etica e politica dell'ordinario*.

I believe that offering even such a brief analysis will serve to clarify the different senses in which care ethics can be said to be feminist, and to render visible the ambiguity often present between feminine and feminist, as in the case of the recurrent considerations regarding "feminine virtues" already hinted at. And finally, I hope to draw from this analysis, some indication – to say it with the language of virtues – as to which traits of character might be characterised as "virtuous" from within a recent feminist viewpoint, traits which, and this is the suggestion I will put forward in the final section, might be appreciated also from within a more refined version of care ethics.

4. The parabola of feminist thought

If feminist thought has anything important to offer to moral reflection in our times, it has not, in my opinion, or not only, to do with the rehabilitation of certain human experiences linked to the traditional activities of caring, considered rightly or wrongly as feminine (as in Held's claim concerning the "truly universal experience of having been cared for as a child"), but something more subtle that we can learn from the history of feminist thought.

What I find interesting in this history (but I do not claim that this is exclusive to this line of thought) comes from the considerable range, or parabola, of different positions and competing claims within the tradition, and in particular from the oscillation over time regarding the categories of equality and of difference in the vindication of women's subjectivity and freedom and from recent elaborations which take into account the complications that results from this alternating trend.

As is well known (and as mentioned in the first section), in order to vindicate women's full subjectivity and freedom, feminists have put forward a series of different strategies. These can — in very broad terms — be said to characterise different phases of the history of feminism, intended both as the political movement and as the theoretical reflection which has developed around it. As we will see, one way of giving an account of these different strategies is by referring to their different treatments of the question of "feminine virtues" — as to whether or not they exist, whether or not this is important.

The beginning of the feminist movement and thought is commonly thought of as coinciding with the suffragist movement of the second half of the 19th century (although one might go back also to Wollstonecraft and De Gouges), and for the sake of this argument we will consider this as a valid claim.⁶⁰

⁶⁰ On the history of feminism and the possibility of mapping the differences between Wollstonecraft and De Gouges I have written elsewhere. See Caterina Botti, *Prospettive femministe*. *Morale*, *bioetica e vita quotidiana*. (Milano: Mimesis, 2014).

Following the line of argument of this paper, it can be said that the suffragist movement was asking for a fuller recognition of women as human beings and as citizens, while at the same time claiming recognition of the worth of the "feminine virtues". The suffragists argued that the inclusion of women would enrich humanity and citizenships precisely because of their specific virtues. So the suffragist claims, whilst being a plea for equality in status, resulted also in a sort of acknowledgment of an important and not negligible difference among men and women.

Coming back to care ethics, it is noteworthy that many authors, for instance Tronto, hold that some theorizations of care ethics can be reduced to this same schema, and can in this sense be criticized.

Why criticised? Because it has been suggested that, since the requested acknowledgment of feminine virtues is in line with patriarchal framework, such a vindication, in the end, would not lead to the acknowledgment of the full human, moral and political status of women. As Tronto – among others – argues, the feminine virtues have here been defined by men and imposed on women, obtaining the double result of having a part of humankind dedicated to the necessary work of care, and at the same time not recognising this work as being of any moral worth or even as being characteristically human. 61 In this light, if women are asking to be included as moral subjects, or as citizens, on this basis, they will not substantially change their situation: they will continue to be the ones in charge of care and will continue to be somehow devalued as subjects (although they may be able, say, to vote) since care and all its inherent problems will still be considered as their lot. (Moreover, according to Tronto, this essentialist claim also results in the invisibility of the fact that there are other marginalised groups besides women, and that there are substantial differences in power amongst women themselves). A change in this situation will come about only when the shape of social life and of political institutions is changed, such that care will be recognised not only as a fully human practice (culturally and morally laden), but also as a fundamental social and political value, that is to say when the public/private divide is radically rearranged. Until then, the caring attitude, even if it is re-established as worthy, will continue to be marginalised and marginalising. 62

The suffragist strategy has in fact been abandoned, but not in the direction suggested by Tronto and others.

In the 20th century, after the two wars and the social changes that occurred, what can be defined as the true feminist movement distinguished itself from the previous suffragist movement. Exploding in the sixties, the feminist movement – which finds one of its early theorizations in Simone de Beauvoir's *Le deuxième*

⁶¹ See Tronto, *Moral Boundaries*, chap. 2. But see also Held's interesting analysis, in *Feminist Morality*, chap. 6, on how death has been considered as a "distinctively human" experience, and giving birth has not.

⁶² See Tronto, Moral Boundaries, chap. 2.

sexe⁶³, — claims equality between men and women in much more radical terms. What is vindicated is no longer inclusion in difference, but the recognition of a more substantial equality, in terms of the same open-endedness in the unfolding of life. These (first) feminist vindications are based, in fact, on the leading idea of the equal nature of men and women and demand the possibility for women to decide upon their own lives as men do. From a more theoretical point of view, the crucial tenet of this feminist strategy is that of disconnecting the possibility of subjectivity from bodily differences, which are considered to be irrelevant, and on which a discriminatory destiny has been socially constructed (according to the sex/gender distinction).⁶⁴

In this light, "feminine virtues" are feminine only in the sense that they have been imposed on women, not because there is any direct connection between having those virtues and being born anatomically of the female sex (and therefore, for instance, able to give birth to children). What is more, as attributes they should be rejected in so far as they prevent women from gaining full subjectivity, which is broadly considered as the ability to transcend one's own corporeal determinations. The ideal of subjectivity characterising this kind of feminist thought is in fact the incorporeal, reason-centred, transcendent idea of the subject of the modern tradition.

According to this kind of feminism the crucial aim for women, in order to gain freedom, is to deconstruct the discriminatory scaffolding of patriarchal society, which prevents them from flourishing in the same way as men can. In other words, it is the aim of eliminating prejudices together with all the social structures which enforce those prejudices, considered as unjust discriminations.

To clarify the point, it could be said that care activities are not only not considered as feminine traits in this perspective, but they are also devalued in general as human traits, to be substituted by social institutions or technologies which could liberate humanity from the most animal traits (or from bourgeois institutions such as the family). Think for instance of the enthusiastic reception of

⁶³ Simone De Beauvoir, *Le deuxième sexe*. (Paris: Gallimard,1949), although it precedes the actual feminist movement by two decades. On the complex relationships among de Beauvoir and the feminist movement and vice versa see for instance Michèle Le Doeuff, *L'étude et le rouet* (Paris: Seuil, 1989); Liliana Rampello, Postfazione to *Il secondo sesso* by S. de Beauvoir (Milano, Il Saggiatore, 2008), pp. 701-715.

overall and sketchy presentation (and personal interpretation) of the history and characteristics of the different feminist strategies I am offering. For general references see for instance: Linda Nicholson, ed., *The Second wave. A Reader in Feminist Theory*- (London-New York: Routledge, 1997); Sarah Gamble, ed., *The Routledge Companion to Feminism and Post-feminism*. (London-New York: Routledge, 2001). For the personal interpretation I am offering and its references, see: Botti, *Prospettive feministe*, chap. 1-2.

new reproduction technologies which characterised the work of certain American feminist thinkers in the 1970s.⁶⁵

As I have already said, if this had been, which it was not, the kind of feminism guiding Gilligan's research, she would have claimed that a discriminatory socialisation prevented girls and young women from proceeding to what Kohlberg had defined as moral maturity, and that women's minority, though correctly measured, found its roots not in a different and inferior feminine nature (which was mistakenly sustained), but in the unjust and discriminatory treatment of women.

But this is not the point made by Gilligan. Gilligan's feminism distinguishes itself from that vindicating equality, and is instead indebted to, as well as contributing to, a different kind of awareness.

In fact, starting from the mid seventies of the last century, a sharp change occurred in feminist thought, or at least in part of it. For the sake of this argument, I am offering here a very simplified and generalised account of a more complex process involving geographical, political and theoretical differences.

What at least some feminists came to realise and to theorize was that in vindicating equality in the form of women's equality to men, the earlier feminist strategy had adhered to a model of humanity that – while supposedly neutral – was in reality partial and therefore inadequate: inadequate, for example, in terms of representing women's experiences and subjectivity, or their freedom, and therefore, or more in general, also in terms of representing humankind as such. On this view therefore, the conflict should be brought to this new level. ⁶⁶ This is a move which is, as we will see, substantially different from that of going back to the suffragist idea of the rehabilitation of traditional (i.e. patriarchal) feminine virtues.

Women's experience of pleasure, the conflicts of the sexes in the private sphere, the experience of pregnancy and of making decisions about it, for instance, were seen to be misrepresented, or as impossible to represent, within the bounds of the categories to which women had adhered in, for example, the general and abstract notions characterising liberal or Marxist conceptions of justice. Feminists of this persuasion therefore recognised the partiality and non neutrality of the categories and concepts used in scientific and political discourses, or in philosophy, and felt the need to develop new ones in order to describe a more comprehensive ideal of humanity, able to acknowledge that humankind is made of men and women, or to focus on the partiality of women's experience and subjectivity. In a

⁶⁵ See for instance Shulamith Firestone, *The Dialectic of Sex.* (New York: William Morrow, 1970). 66 Again, it is impossible to offer here even a small bibliography, I will mention a couple of authors that in my opinion witness this turn in a peculiar way: Carla Lonzi, *Sputiamo su Hegel, la donna clitoridea e la donna vaginale e altri scritti.* (Milano: Scritti di rivolta femminile, 1974); Luce Irigaray, *Speculum. De l'autre femme.* (Paris: Les Editions de Minuit, 1974); Luce Irigaray, "Eguales à qui?", *Critique*, 480 (1987), pp. 420-437.

nutshell: what was put forward in this feminist strategy was not a claim for the recognition of women as having the same nature as men, but the need to question the whole idea of considering men as the measure of humanity or subjectivity, and question at the same time the different nature ascribed to women by men. In other words, the way in which that founding notion of human nature was represented, namely its being accorded universal status, was challenged.⁶⁷ This meant finding new words and new categories to account for women's existence and experience, and to account for human existence and experience. It is in this framework, that Gilligan's elaboration of a different moral point of view can be understood, as both representing the moral development of women and at the same time, as envisaging a moral viewpoint that is able to cope with differentiated subjectivities.

So again the problem of women's difference had been posed, but in a different way from that of the suffragists. What is at stake in this more radical strategy, is the idea of looking for new words, new concepts and categories, or for general symbolic frameworks, in which to represent women's and human experience, as well new forms of political practices and relationships in which to develop them. If for de Beauvoir the feminist objective was not to become a woman in order not to be the "second sex", the target considered here is to become at last Woman, the once obscured one, now a strong one, who is different from the "women-Other" considered as the second sex, but also different from the "man-Subject". 68

While claiming once more that humankind is made up of men and women, these radical feminists demanded and took for themselves time and space (to be spent mainly among women, in consciousness raising groups, at least this was so at the beginning), in order to find the words to signify women's and human subjectivity in a new way, putting aside the old patriarchal considerations on women and men and their difference. And this meant, of course, not only offering new meanings for women's existence but also for human existence, and new descriptions of the world.⁶⁹

Although there are many differences between the French and Italian versions of "sexual difference theory", and developments of this kind in the USA, relating also to their different philosophical backgrounds, it can be said that, in general terms, in this kind of feminism the central question is not to recuperate and sustain the value of what has been considered feminine and devalued in previous

⁶⁷ An interesting account of this passage is offered in Rosi Braidotti, *Pattern of Dissonance* (Cambridge-Molden: Polity Press, 1991), chap. 6-7.

⁶⁸ See: Irigaray, *Speculum* and De Beauvoir, *Le deuxième sexe*, where she claims: "Il est le *Sujet*, il est l'Absolu: elle est l'*Autre*", vol. I, p.15.

⁶⁹ This is clearly explained in Rosi Braidotti, Nomadic Subjects, Embodiment and Sexual Difference in Contemporary Feminist Theory. (New York: Columbia University Press, 2011), mostly chap. 3, 4, 5. See also: Gisela Bock and Susan James, ed., Beyond Equality and Difference, (London-New York: Routledge, 1992); Eleonora Missana, Introduction to Donne si diventa. (Milano: Feltrinelli, 2014); Botti, Prospettive femminste, chap. 2.

situations, but instead to vindicate a completely new consideration of women, one which will allow them to name and to think their own experience. Such a rethinking will result in a different description of human experience or of the world. This entails a reconsideration not only of social structures (or social powers) but also of symbolic ones, and therefore a reconsideration of the way in which the human condition, subjectivity, knowledge and morality should be thought of and enacted.

Care ethics has been read at times as this kind of effort, and in the previous pages I have tried to show how Gilligan's works might be read in this way. But, it has also at times been criticised precisely for not being an effort of this kind: being read only as a way of reasserting the patriarchal definition of women. This criticism remains valid even when care is assumed as a human value or virtue and yet not substantially requalified, when no major reconfiguration of the moral point of view is offered. This holds true for authors who, like Noddings, insist on asserting the feminine nature of an ethics of care; but also for those who, like Held, while identifying care as the basis for a human morality, see in practices such as mothering, construed as typically feminine, exemplar practices to be expanded to other contexts. The problem here being where the definition of what mothering is, is not distinguished from its patriarchal configuration. ⁷⁰

Care ethics can in fact be read in terms of this ambiguity: either as a new paradigm offering new contents to moral reflection, or as an old content (that of the traditional feminine virtues) brought to light and revalorised. And of course, when conceived as a new paradigm, also the extent of its domain has been configured in different ways, as we have seen in discussing Held, Tronto and Slote, as has its feminine or human characterisation. In fact many ambiguities do persist.

While many feminists have suggested abandoning this paradigm for these reasons, ⁷¹ I personally do not consider these ambiguities to be sufficient grounds for abandoning it. In my opinion, the claim that humanity in its entirety is interdependent and vulnerable, and that this fact should mark morality, which ought therefore to be thought of more in terms of responsibility, care and relationships, than in terms of sovereignty and respect, or fair or contracted rules, is indeed an important new content and new starting point for moral reflection. It is clear however that these claims should be clearly framed in order to avoid such

⁷⁰ On the patriarchal configuration of motherhood see for instance Adirenne Rich, Of Woman Born. Motherhood as Experience and Institution. (New York: Bantham, 1977).

⁷¹ See for instance: Catherine Mackinnon, Feminism Unmodified: Discourses on Life and Law. (Cambridge, Mass.: Harvard University Press, 1987); Sandra Harding, "The Curious Coincidence of Feminine and African Moralities: Challenges for Feminist Theory" in Women and Moral Theory, ed. Eva Feder Kittay and Diana T. Meyers. (Totowa, N.J.: Roman and Littlefield, 1987); Barbara Houston, "Rescuing Womenly Virtues: Some Dangers of Moral Reclamation", in Science, Morality and Feminist Theory, ed. Martha Hanen and Kai Nielsen, Canadian Journal of Philosophy, 13 supplementary volume (1987), pp. 237-262.

ambiguities. Their novelty depends on their articulation, which for this reason should be very accurate and thorough (which is not the case, in my opinion, in many existing accounts of care ethics).

One way to articulate and to disambiguate care ethics might be – this is my suggestion – to set up a dialogue in which its own insights are confronted with those of the feminist parabola. In other words, it would be interesting to take into account the most recent considerations put forward by those feminists who have inherited the tension existing between the awareness of the instability of our categories and the need to argue for a transformation of society, of our self-understanding as humans, and of morality.

I will (briefly) describe this third strategy as that which has radicalised the notions of interdependence and vulnerability in such a way as to involve not only our physical or relational existence but also our abilities to think, to feel and to care. I am referring here to what has became known as the third feminist wave.⁷²

This form of reflection (here again I am simplifying and reducing to an ideal type a wide range of opinions and theories, that are indebted moreover with different axes of reflection according to which 20th Century philosophy has challenged the modern conception of the subject, of knowledge and morality) can be said to have arisen in reaction to the move described above of assuming and claiming the value of a different feminine subjectivity, particularly when the latter has been defined in new terms with respect to patriarchal definition of women.

Although the idea of recognising a different female subjectivity has been acknowledged as a powerful one, and although it has been modulated in different ways, (for instance as a mimetic-strategic move necessary to contrast the binary and hierarchical patriarchal order, or as able to open up to the recognition of many differences, and not necessarily to the definition of a real difference in essence), it nevertheless implies – and this is what has been contested – a common definition of all women (as subjects). On this view, forms of feminism based on sexual difference theories run the risk (common to any identitary position) of obscuring relevant differences among women, and of conveying a stereotyped and partial description of the feminine, yet again taken as a norm which renders invisible other forms of subjectivity, even of feminine subjectivity, replicating the same problem of the false universalism of the monological patriarchal order.

Examples of criticism of this kind can be found in the critiques and elaborations of lesbian feminists, black feminists and post-colonial thinkers, in the rich literature produced from the 1980s onwards. And incidentally, these critiques have faced in turn the same problem concerning the "different" identities.⁷³

⁷² The first reference to the idea of a "third wave" occurs in Rebecca Walker, ed. *To Be Real: Telling the Truth and Changing the face of Feminism* (New York: Anchor Books, 1995).

⁷³ See for instance the works of Adrienne Rich, Monique Wittig, Gayle Rubin, Teresa de Lauretis and Judith Butler, for the criticism developed in terms of lesbian and queer positioning, and

The result of this turmoil is a new evolution in feminist thinking. Aware of these risks, both the project of claiming equality, and that of asserting women's difference as something essential or definable in terms of its contents, have been abandoned. Different authors have come to consider feminism as an (epistemologically aware) undertaking which moves from and tries to account for the many differences between subjects, opening up the space for each individual to live and flourish, and considering difference not only as a principle through which to describe human (and non human?) existences, but also as a space and a mode of thought.⁷⁴

From this perspective, the relevance of different axes of differentiation – as characterising each individual – has been recognised, together with the fragmentation this implies in the representation or self-representation of each individual, generating fragments which may have differential attribution of value in relation to power. This complicates the pattern of one's own position in terms of dominant or subaltern status (for instance my being a white, Western, woman...).

At the same time, the same binary structure which characterises these axes, has come under pressure from the deconstruction of binary oppositions such as woman/man, white/black, western/non western, etc. A binary structure suggests erroneously the idea that it is possible to account for human variability in a number of fixed positions through these binary options, not recognising instead the existence of a *continuum* of differences which eludes any such rigid definition.⁷⁶

In these terms, the possibility of representing human beings once and for all, in their particularity, even in the first person (my own particularity), is radically challenged, not only because there is this multiplication of elements, but also because it is difficult to grasp, to maintain and to order these elements in a meaningful and definitive way. Since the possibility of accounting for this multiplicity and these fragmented selves varies according to time, to experience, to relationships and to social and cultural structures, it is difficult to individuate those elements which are meaningful for one's own account, and at the same time

those of Barbara Smith, Angela Davies, bell hooks, Audre Lord, Chandra Mohanty and Gayatry C. Spivak for black and post-colonial feminist stances.

⁷⁴ See Braidotti, *Nomadic Subjects*, chap. 5. For difference as "a mode of thought" see Maria Luisa Boccia, *La differenza politica*. *Donne e cittadinanza*. (Milano, Il Saggiatore, 2002), chap. 2, where she interprets Lonzi's reflections on difference in this way, as an existential principle. See Lonzi, *Sputiamo su Hegel*, p. 20.

⁷⁵ See for instance the elaboration of the category of intersectionality developed among others by Kimberly Crenshaw; Patricia High Collins, and Nira Yuval Davies.

⁷⁶ See Judith Butler, Gender Trouble: Feminism and the Subversion of Identity (London.-New York: Routledge, 1990); Judith Butler, Undoing gender. (London.-New York: Routledge, 2004); Judith Butler, Precarious Life: Power of Violence and Mourning. (London-New York: Verso, 2004).

there is no possibility of evading this multiplicity, or reducing humanity to a few constitutive elements.

Who we are, what we need, and even our sex, gender, sexuality, is only a fragmented and contradictory experience, composed of internal drives and external constraints, of which we can offer only partial and temporary descriptions. Descriptions which maintain a degree of opacity as compared with a possible access to an authentic nucleus of identity.

Opacity is, in fact, the notion I am coming to: that opacity which places a limit on the possibility of giving an authentic, complete or even accurate account of oneself and one's own needs, and therefore on the possibility of representing the identities and needs of others. A notion which of course is crucial in my understanding of the possibilities and of the difficulties of care ethics.

Of course, I am not claiming that this notion is a unique result of feminist thought. I am only interested in the way in which it has occurred in the feminist parabola. One could, in fact, analyse the deep consonances between these feminist claims and many philosophical and not only philosophical — think of psychoanalysis — developments in the thought of the $20^{\rm th}$ century, to which feminism is indebted, but this is not of relevance for the aim of the present paper.

What is interesting in this most recent feminist line of thought, for the purposes of this paper, besides its usefulness in underlining the importance of acknowledging the plurality and variability of human experience (which is what is defended by all care ethicists), is that it also suggests the need to acknowledge the laborious process of representing human experience in its particularity, even in the first person; that is to say, the laborious process of representing one's own experience. To give an account of oneself, or of each life in its particularity, Judith Butler would say, is to engage in a continuous process of "doing and undoing" the human, in order to open a space for the recognition of the particular unfolding of each life; a never ending process in which it is impossible to give a final word, or to grasp a source of authenticity, once and for all. A process which is collective and individual, since dominant or innovative representations of human experience, of what is important to maintain and let flourish each human life, are determined by each single repetition of those shared or alternative representations.⁷⁷ A process which is, finally, according to many feminist thinkers intrinsically relational, as we define ourselves only in relations with others, as Gilligan had also recognised.

Each singular identity, its needs and characteristics, will emerge in the interplay between the permeability and resistance of the inner material and relational drives to language and constraints. In other words, one's own subjectivity is defined only temporarily and partially in this play of resistance to – or adoption of – given descriptions, a play in which the different levels of corporeal

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⁷⁷ Similar considerations, though in a different philosophical context, can be found, I would like to suggest, in Laugier's works on ordinary and care ethics.

materiality, psychic dynamics, interpersonal relationships and socio-cultural dimensions, all have a role that can be in turn positive and negative for one's own well being.

What is interesting here, and this is the core issue of this paper, is the question – already reiterated a few times – of whether the consideration of this radically multilayered, vulnerable and fragile subjectivity can be accommodated in an understanding of care ethics, or – better – how it can be accommodated, since I think that this is possible, and that care ethics is one of the chances we have to envisage an ethics for such subjects.

My suggestion is that care ethics should be more clearly articulated in the light of this complex framework. It is clear, for instance, that viewed in this way talking of "feminine virtues" no longer makes sense, while it is still possible to think of care and solicitude or attention, even in the form of virtues, although their meaning should be developed on the basis of the abovementioned elaboration. From this perspective, in a nutshell, the core ideal of care ethics of meeting the others' needs, or sustaining the web of relationships in which we are all enmeshed, should be seen in a more complex way than as just an appeal to the kind of attention everyone has been made the object of as a child. This is, by the way, what I have suggested above in giving my account of Gilligan's work.

If then relatedness, interdependence and vulnerability are considered as the fundamental dimensions of humanity, dimensions in which care ethics finds it roots and to which it offers guidance, (as for instance Held claims when she writes: "It is the relatedness of human beings, built and rebuilt, that the ethics of care is being developed to try to understand, evaluate and guide"),⁷⁸ then they should be articulated along the lines of the same radically complex understanding considered above.

Yet, this is not a simple question.

Given the intrinsic limits of our capacity to apprehend our own needs and those of the other, as we have seen, not only may universalist approaches encounter difficulties, but also some alternative accounts, and some versions of care ethics.

Actually, considerations such as those developed in recent feminism do not constitute a difficulty only for universalistic or impartialist ethics, which are blind to human particularity and interdependence, as many care ethicists and many other critics of universalist accounts of ethics have claimed; they are also difficult to deal with from within any moral model which, while putting at its centre the agent's responsibility to be solicitous toward others' needs, assumes in a rather unproblematic way the agent's (psychological, sentimental or dialogical) capacity to recognise and meet those needs. In this sense, the idea of considering care ethics as an ethics based on the possibility of meeting others needs, letting them and us,

⁷⁸ Held, The Ethics of Care, p. 30.

together with our shared world, flourish in relationships, might be weakened – even when this effort is limited to particular others who are closer and more connected to the agent.

If even one's own identity and needs, one's own feelings of pleasure and pain, are accountable only against the background of a series of linguistic, historical, socio-cultural, psychic and relational ties, it might seem impossible to meet the needs of others in their particularity, at least in a simple way: for example, by assuming the existence of a common grammar of pleasures and pain, or a common structure of functionings and needs, or an easy and direct way to communicate on a sentimental or verbal or corporeal basis. In other words, it might be thought to be impossible to overcome the intrinsic limits of our own and the others' ability to speak, think, know, or even feel and imagine.

Yet I think that care ethics can evade this problem, but this is true only if it is accurately designed in its forms, or – to use the vocabulary of virtue ethics – in its identification of traits of character considered as virtuous, or else in its definition of the architecture of the virtuous character.

In the next paragraph I will try to offer a few suggestions, and some open questions, on the way in which it might be possible to read care ethics in this light (still relying upon some feminist suggestions, but also going back to the debate on care ethics). The basic idea I will focus upon is that of transforming the limits of one's own accountability and that of the other, recursively, in a positive effort to meet the others' needs, or better, to keep and maintain the web of relationships which nourishes life.

4. Feminist virtues? Open questions and tentative conclusions

Resisting the temptations of a nihilistic or a relativistic conclusion based on the implications of the just described feminist parabola, different feminist authors – in different contexts – have tried to envisage an ethics that is able to take into account these implications and yet to offer some normative indications. In many cases the ethical dimension is even seen as a necessary supplement to politics, as it allows – notwithstanding all the difficulties – to recognise the singularity of each life and to open the possibility of interconnection and encounters, as permitted only by the concrete and embodied personal involvement experienced in relationships.

In fact, even when converging with post-modern or critical theories, and even appreciating the difficulties of defending shared aims, many third wave feminists have claimed that, although epistemologically weakened in its theorisation of the subject of politics and morality, feminism is characterised by, and should not abandon, the aim of transforming society, cultures and ways of living. And this in such a way as to cope with, ease and take care of the vulnerability and frailty of

humans, of forms of coexistence and of the planetary life. In this sense it should be able to give shape to an ethics and a politics.

In this view, one of the shared convictions is that this aim can be maintained and fostered, not by finding a way to overcome the instability, partiality and variety of (feminist) categories, but, on the contrary, by considering (the awareness of) the instability, partiality and variety of categories as a resource for politics and ethics.

Interesting attempts to overcome such an impasse, are for instance those put forward by Rosi Braidotti or Judith Butler, despite the difference in their elaborations, or by Gayatri Chakravorty Spivak in the context of her post-colonial feminism.

Broadly speaking, in their reflections, they distance themselves from conceptions of ethics which are mainly defined in terms of the activity of giving judgements on others' behaviour or proposing norms and rules for the behaviour of all, and also from attempts to find a shared vision of the good according to which we should live, or upon which we should base our benevolent attitude toward the other. They are even more critical of ethical models taking the shape of the defence of one's own or universal rights. Conversely, in their own reflections, ethics is conceived mainly as an exercise operated upon one's own mind in order to recognise the other/s, that is, the other/s to whom we are continuously exposed and connected in the context of concrete relationships, whilst at the same time not forgetting that one's own mind is porous to relational, social and symbolic environments.

From this perspective, even if the arguments put forward by these authors are different, what is crucial is the capacity to criticise and to abandon one's own prejudices, and, to pay attention to and to deconstruct what one takes for granted when trying to meet others and their needs, or when defending one's own rights. And it is important to note that this critical attitude, that is to say, the possibility of overcoming prejudices and the possibility of meeting the others, should not be seen as a search for convergence on the basis of shared or general comprehensions of humanity, or on fundamental values; on the contrary, the aim of this exercise is precisely that of the representation and maintenance of differences, which alone can render it possible, in an encounter, to communicate and to collaborate. What is required, then, is not the exercise of detachment from one's own partiality to gain some fixed and stable standpoint from which to look at one's own and the other's suffering or flourishing; what is required is rather an exercise of humility and of awareness of one's own limits and partiality, which can be thought of either as emerging from the interplay of the differences which inhabit our own multilayered or fractured subjectivity, or from the experience of difficulty itself, from the feeling of puzzlement experienced in encountering others we are not able to understand, or even from our resistance to imagining ourselves as that other, or as bound up with that other, to whom we are nevertheless linked. It is in this feeling of the

impossibility of a meeting, Spivak would say, that, paradoxically, the possibility of opening up our minds so as to meet the other lies.⁷⁹

Crucial for an adequate conception of morality, according to these thinkers, is therefore an awareness of the limits and of the partiality of one's own feelings, categories and norms. Feelings, categories and norms which are nevertheless necessary to the having of a morality, but which at the same time cannot be considered immune from limits. The suggestion is then, neither that of surrendering to the partial nature of these feelings, or categories, and ending up in a relativist position, nor that of insisting on searching for a way to overcome their partiality completely through convergence on presumed shared understandings, but that of being able to transform these limits themselves into a positive moment for morality, using the awareness of the limits as a way to transform ourselves and open up to the possibility of meeting the other, of communicating, to achieve at least the temporary possibility of understanding each other. Morality, it has been said, resides more in this process of self-transformation and reciprocal transformation than in the possible results; in this sense it is an open ended process.

According to all these authors, the moving force of such a process is not to be found in (abstract) knowledge or in forms of reasoning: but rather in the concrete experience of encounters with others and in the concrete experience of our own resistance to given definitions. It stems from the practice of "positioning" oneself (namely, the practice of recognising – as far as this is possible – the specificity of one's own position), ⁸⁰ as well as from the feeling of one's own vulnerability and of interconnection (that is, need and desire of the others)] in the end, from emotions, feelings and imagination. These are very intriguing suggestions, I think, and worth taking into consideration in a reconfiguration of care ethics.

It is clear that the philosophical frameworks in which many of these suggestions are developed are often derived from philosophical paradigms rather distant (to say the least) from those characterising the debate on care ethics. Accounting for them in this context would therefore require detailed analysis, not possible here, but I think, nonetheless, that it might be possible to find points of contact and to translate the main indications which are suggested – mostly that of

⁷⁹ See Gayatri Chakravorty Spivak, "Terror: A Speech After 9-11", Boundary 2, 31 (2004), pp. 81-111; Gayatri Chakravorty Spivak, "Thinking Cultural Questions in 'Pure' Literary Terms", in *Without Guarantees: In Honour of Stuart Hall*, ed. Paul Gilroy et al. (London: Verso, 2000), pp. 335-357. See also: Jamila Mascat, "Etiche post-coloniali", in *Le etiche della diversità culturale*, ed. Caterina Botti, (Firenze, Le Lettere, 2012), pp. 149-179; Laura Boella, *Il coraggio dell'etica* (Milano: Raffaello Cortina, 2012), Chap. 7.

 $^{^{80}}$ See Adrienne Rich, , "Notes Toward a Politics of Location", in ${\it Blood}, {\it Bread}$ and ${\it Poetry}: Selected {\it Prose 1979-1985}.$ (London: Virago, 1986).

a recursive use of partiality and instability – into the language of philosophical accounts more traditionally associated with care ethics.⁸¹

Of course it is not the aim of this paper to provide a detailed account of such a reframing, its main aim was in fact more that of indicating a problem, than of solving it. Nevertheless, I will try to offer some suggestions, and open up a few further questions.

In fact, in so far as one wants to consider care ethics as a feminist approach to ethics, or to invoke feminism to justify certain claims concerning the importance of care in an account of morality (and possibly in order to consider care ethics, in more general terms, as an adequate account of morality), there is only one point that - in my opinion - might be proposed as a result of the analysis developed in the previous pages, and this is that one should take into consideration the abovementioned implications of the feminist parabola; that is to say, one should consider the different levels involved in our attentiveness to others and to the web of relationships in which we are (all) enmeshed. In other words, the different levels - bodily, psychological, social and symbolic - in which our own and others' vulnerability unfolds should be taken into account. Furthermore, in this light, it might be interesting to consider the feminist suggestion of a positive role for the awareness of one's own limits, that is, the awareness of the instability of each viewpoint and of personal landscapes - however enlarged and rendered accommodating through imagination, attention to details or through listening and dialogue - since biases, misunderstandings and opacities are always present.

Going back to title of this paper and playing with it, it might be said that *if* we consider recent feminist insights concerning the value of the awareness of one's own point of view and the partiality of one's own standpoint in morality as giving shape to a form of "feminist virtue", as a kind of epistemological virtue that has to do with instability, critique and humility, *then* such a "feminist virtue", more than the old "feminine virtues" (of nurturing, caring for the household, etc.), should be put at the centre of a sound care ethics. This is the main point here. It is in this sense, this is my opinion, that care ethics should be considered as a form of feminist ethics.

With regard to the possibility of a major articulation of such a reframing of care ethics, I will offer only some tentative final considerations and a few suggestions.

As I have already argued, we can retrace as far back as Gilligan's work the idea of care ethics as an ethics mainly centred on the cultivation – as a form of personal moral responsibility – of a form of sensitivity or attentiveness to the vulnerability of others and to our own, at different levels. Even in Gilligan's writings, in fact, caring means something more than simply being porous and responsive to the suffering of others at what is seen as an easily apprehensible

⁸¹ I have argued in more detail for a similar reconfiguration in Botti, Prospettive femministe.

physical or psychological level; that is to say, a suffering that — using a figure already hinted at — might be reduced to a common or universal grammar of pains and pleasures. Gilligan herself has underlined that caring — as an ethical ideal or practice — also involves caring and being attentive to the violence which derives from one's not having been recognised as a person, from not having a voice or not being considered fully human, or from lack of recognition of the plurality and the opacity of the grammars of pains and pleasures. And it is in this sense that I have suggested that her rather complex gesture of recognising a moral voice to girls and young women shows the caring attitude.

Viewed from this angle therefore, there is a possible convergence between the tenets emerging from recent feminist stances and the development of an ethics of care.

Of course, if the major tenets of care ethics are those of considering, as the most appreciable attitudes or traits of character, awareness of the relational fabric which binds together humans and personal sensitivity and solicitude toward the others' flourishing (or to the flourishing of given relational contexts and of the web of relationships sustaining life), then something should be added to define this sensitivity and solicitude. Here are some few suggestions.

In order to offer a more philosophically structured account of an ethics of care, care ethicists should not only – this is a first point to be made – make reference to sympathetic or empathic psychological mechanisms, but also – as many refined sentimentalists do suggest – to the fundamental human capacity of imagination. Imagination, that is meant as a faculty able to transform and widen our sensitivity to the suffering and needs of others, or of the poverty or richness of a relational context, and to open up our mental landscape and overcome the limits of those same psychological mechanisms, so as to render us able to recognise even the small details relevant for (or in contrast with) the flourishing of given relationships and single lives.

In this connection, and this is a second point worth mentioning, if we are trying to reconfigure ethics in the light of the considerations put forward here, such an account of ethics must be reframed to deal with the texture of our lives in their concrete and particular aspects. From this perspective, it is important to stress that even minimal actions or interactions, and not only major dilemmas such as those concerning, for example, which lives to save (often considered in the analytical tradition of impartialist morality), should be considered as of moral relevance. Even small gestures, or the words we use in our everyday life, become important if contrasting dominant oppressive representations of humanity – i.e. of single human beings – is to be part of the framework of our ethical attitude. Reflecting on the kind of images of humanity that are hidden in our judgments, in our behaviours, in our language, even in apparently innocuous contexts, is in fact important, in that – as has been argued – oppressive or less oppressive accounts of

humanity are made or changed through each single repetition of these representations.

Finally, in reflecting on the connection between collective and individual dimensions of these processes, it is also possible to consider whether part of our moral responsibility is to contribute to a collective effort to produce representations and images that convey a larger sense of the possibility and variety of human forms of life. In this way we may nourish our imagination; of course not regarding those representations and images as definitive, but simply as enlarging, and not exhausting "the realm of the possible", to say it with Pindar. In this sense even establishing an alternative lifestyle might be considered as invested with moral responsibility.

Of course, neither the general claim concerning the role of imagination, nor the few considerations above may seem particularly innovative in the contemporary arena of philosophical reflections on morality, although they are not so present in the mainstream debate concerning care ethics. In effect, there have been many attempts to envisage, for instance from refined sentimentalist points of view (e.g. those which, in the wake of Hume's ethics, focus on the possibility of returning reflectively on one's own first level sentiments), similar accounts of the role of imagination, attention to details, collective responsibilities, and narratives and dialogues, all viewed as means able to enlarge the possibility of a mutual understanding and of solicitude toward the others, notwithstanding the contingency of our categories. I think there is room here for interesting consonances. But interesting consonances can also be retraced with the other philosophically more structured developments referred to above as potentially interesting for reframing care ethics. These issues can be dealt with, for example, from within perfectionist accounts centring on the importance of the effort of transforming oneself and one's own images of humanity and of paying attention to "what is important" for oneself and for others. There are also numerous possibilities of exploring the role and the importance of communication, dialogue and narratives, as these too are fundamental resources to which one could appeal to in order to develop an interesting reframing of an ethics of care. I will not comment further on these consonances here; instead I will concentrate upon a single final aspect, characteristically feminist, which - in my opinion - is worth to be taken into account in order to provide a better account of care ethics (and eventually in order to develop it in tune with sentimentalist or with perfectionist approaches).

As we have already seen, feminist thought offers, in my reading, a final and different suggestion. This is the above-mentioned idea of considering as an ethical attitude, or a resource for ethical attitudes, the importance of developing an awareness of our own limits in being able to feel, to sympathise and to imagine, and also to listen and being attentive. This is something which is distinctive in recent feminist thought, and is less represented, at least in my opinion, in

sentimentalist and perfectionist developments, and even less present in the mainstream debate on care ethics. Both approaches focus more on the positive possibility of expanding one's own point of view or capacity of attention, while here the emphasis is, on the contrary, on being aware of the limits of this possibility, as a recursive form of attention.

All these instances - sentiments, feelings and sympathy, imagination and attentiveness, communication and dialogue - are in general seen as important resources that may serve to widen our comprehension or experience, and therefore enable us to participate in the suffering of others and to correct our egoism and biases; in a word, to allow us to be in contact with the other in a positive sense. As such, they are considered as a means to add something to our mental landscape that will allow us – without recourse to reason or to a metaphysical understanding of human nature and values - to acquire a more stable and wider point of view from which to decide how to act and live morally, or from which to approve or disapprove our own behaviour or that of others, to make our ethical judgements. Conversely, feminist attention in the reading I have tried to outline here is more dedicated to the partial nature of our achievements in this sense. In fact, as we have seen, feminists have cast doubts on the possibility of achieving fully positive results through these resources, although these resources are the only ones we have. So one can wonder if, together with the idea of using all these resources to enlarge our sensitivity, one might also envisage a different use of them, so as to render continually present to us the limits of that same sensitivity, also recursively and paradoxically - as a way to foster it.

What I am suggesting is the idea that the caring individual should cultivate not only his/her sensitivity, understood in the more traditional terms seen above (i.e. developed through psychological mechanisms, sentiments, imagination or communication), but also cultivate an awareness of the instability of his/her mental contents or feelings; that is, one should keep open the aching sense of one's own limits, while seeking out all the possible ways to overcome them.

Such an awareness of our limited capacities might be thought of as a resource moving us toward the recognition of the tentative nature of our doings. This is not to deny the urgency we may feel to act, but to question the certainty of the results, thus rendering us more careful, in the continuous search for new ways to maintain the relationships we are in, and allow them to flourish. We can think of it also in the shape of a feeling of puzzlement. Such an awareness may play several important roles in the genesis of moral attitudes: as the engine of imagination; as a resource which pushes us to suspend our judgemental attitudes without suspending our care for others, and to engage ourselves in the effort of searching for more adequate judgments; as a drive for caring about the way we care, but also as the resource which pushes us, all things considered, to continue to care, to be interested in the wellbeing of others, as it is linked to a shared sense of vulnerability.

Coming to a characterization of this awareness, two very tentative suggestions can be offered. The first is that, as already underlined by many feminist theorists, it should not be viewed as resulting from knowledge or abstract reason, but from experience and feelings. It can thus be thought of as a form of sentiment, or as a sentimental progress or reflection upon more basic sentiments.

A second and more interesting idea, I think, is that concerning the possibility of linking this awareness to the passion or sentiment of humility, thinking of this passion as an architectural bastion of the moral character (in opposition to the often quoted passion of pride). A possibility which might be of interest, for instance, for anyone wishing to articulate a sentimental reading of care ethics.

In conclusion, in drawing together the threads of this discourse, I would say that to bring care ethics back to its original feminist matrix, but at a higher level, an attempt must be made to read care ethics as a reflection on morality centred both on care for others in their particularity, and on the recognition that such care implies the questioning of pre-established views of both self and the other. Care for others, attempting to meet their needs, has its roots in a sentimental and relational characterization of subjectivity, but there may be obstacles in the way of such care, in the form of distances, or of opacity of vision. Though it may never be possible to fully overcome one's self and one's limits in this sense, the attempt to do so, to discover and engage with one's limits, and become more clear-sighted, should be explored as a dimension of the ethics of care.