Is Caring Inherently Good?

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With her powerfully resounding and emotionally charged voice, Celine Dion sings an intensely moving and inspiring song about devoted caring entitled, "If That's What It Takes." This song resonates with me because I highly value caring and recognize it as a pivotal and influential ideal in my life. My close friend, however, a woman who I strongly suspect is being psychologically abused and financially exploited by her male partner, also loves that song and identifies with it. And this concerns (moreover, confuses) me, because I know that it is her devoted caring, otherwise such a laudable part of who she is, that contributes to her being vulnerable to such mistreatment. What is more, incidents of this sort force me to question my own attachment to caring and to wonder how such an allegiance prevents me from recognizing and challenging my own oppression. So when Barbara Houston writes about the dangers involved in advocating an ethic of care for women, I stand up and pay close attention.¹

Houston applauds recent efforts by feminist theorists such as Carol Gilligan, Nel Noddings, Virginia Held, Sara Ruddick, and others to bring a women's ethic to the forefront of ethical theory.² Yet she also underscores the dangers that such an ethic poses for women. The strong focus on persons-in-relations in which relatedness is seen as "a fact of human existence which is endowed with moral significance," and a valuing of caring without taking the economic, political, and historical context of caring into consideration, result in an ethic in which the nature of moral agency is ambiguous, which encourages self-sacrifice and which impedes the development of an ability to distinguish legitimate from illegitimate caring.³ Such an ethic, Houston maintains, makes women vulnerable to abuse and perpetuates oppression. Houston's intent is to reconceptualize caring so that such an ethic will create more light than obscurity and will not hide, but, rather, reveal injustice. Houston argues that the dangers of the moral reclamation of an ethic of care for women stem from an endorsement of three things: gender essentialism — that womanly virtues are virtues which only women can have; moral essentialism — that women's moral values have intrinsic worth; and moral monism — that women's moral values are the only values which have intrinsic worth. Houston, therefore, recommends that "in identifying womanly virtues as womanly, one has to avoid asserting that these are virtues which only women can have, or virtues which all women have" and avoid "implying that the values are intrinsically good, good independent of any special context in which they occur," and we must keep in mind that "caring is not the only value: freedom is important too."⁴

In what follows, Houston's recommendations for a more comprehensive ethic of care will be discussed, giving special attention to her rejection of the intrinsic goodness of caring. Reasons it is important to care about an intrinsic goodness of caring will be advanced. Then, borrowing from William Ross's notion of *prima facie* goodness, an understanding of the intrinsic goodness of caring that does not

perpetuate oppression will be suggested.⁵ I maintain that not only do feminists need a theory of caring which creates more light than obscurity and must not hide, but reveal injustice, they also need a theory which is not an obstacle to raising awareness of dominance. In addition, my characterization of the inherent goodness of caring will be shown to escape the three-pronged dangers of essentialism, ahistoricity, and false generalization.⁶

WHY SHOULD WE CARE ABOUT THE INTRINSIC GOODNESS OF CARING?

It is Houston's second recommendation for a more comprehensive ethic of care, that is, to avoid moral essentialism, that requires close attention, because it may seem to imply that there is no intrinsic worth to caring. I emphasize "seems to imply" because Houston does not explicitly commit herself to that position. Upon closer examination, Houston's second recommendation is clearly directed to those who identify womanly virtues as womanly and, thus, its subject is caring as reclaimed by women. It is important to be clear about what Houston's second recommendation is. Houston is advocating that *when we talk about women and caring*, we must avoid understanding caring as good without considering the context in which it became good *for women*, we must avoid implying that womanly moral virtues are *good independent of* any special context in which they occur. The focus is on caring *and* women.

Although Houston does not explicitly make this distinction, it is helpful and important to differentiate between a focus on caring as a womanly virtue and a focus on caring *per se*. Only on the basis of such a distinction can one discern between the claims that there is no intrinsic worth to *women's* caring and that there is no intrinsic worth to caring. Houston's recommendations are directed to those who identify women's moral values as womanly and, thus, she is interested in the former, not the latter, claim. She is exhorting women to avoid the intrinsic goodness of caring when *they are attempting to reclaim care as an ethic for women*, but she is not necessarily dismissing the intrinsic goodness of caring *per se*.

Indeed, there are a number of points in Houston's argument which support the assumption that she would defend the intrinsic goodness of caring *per se*. First of all, in considering the implications of rejecting caring, Houston contends:

To try to argue that caring has no moral value or should not be an important element of a moral theory is simply a moral mistake. No society or group of people could survive for long without extensive and constant caring being done. Most of us find it difficult even to imagine human lives devoid of any caring relationships.⁷

This quote seems to indicate Houston's affirmation of the intrinsic value of care, caring that is not necessarily tied to women's voices. Indeed, as far as Houston wants to salvage an ethic of care for women by reconceptualization, she could be understood as supporting the intrinsic value of caring. If caring lacks intrinsic value, then why try to revise it, just get rid of it as a value for women?

Furthermore, Houston's recommendations are premised upon her contention that social contexts can systemically deform caring relations.⁸ This reference to "deformed" values implies that Houston believes that there is something undeformed by which the deformed can be judged to be defected. In light of these considerations,

it seems clear that while Houston is recommending that the intrinsic goodness of an ethic of care as reclaimed by women must be avoided, she is not necessarily negating the intrinsic value of caring *per se*.

Nevertheless, there are good reasons why feminists might be suspicious of any notion of "intrinsic goodness" and why such a notion may be abhorrent to them. "Intrinsic goodness" may imply essentialism and/or an ahistorical universalism. Given that society has traditionally attributed to women fixed, immutable natural essences which serve to subordinate their position vis a vis men and limit their social and psychological capacities, feminists' reticence towards any notion of intrinsic goodness may seem warranted. All the more so, if intrinsic goodness ignores the socially constructed/contextual/historical nature of certain social ideas, standards, and values. Since feminists are, in general, acutely aware that universalized theories which ignore diversity and ahistorical claims which assume a "view from nowhere" have often been complicit in reproducing patriarchal values and of rendering unjust social roles as immutable and necessary, it would come as no surprise if they recoil from the notion of "intrinsic." The issues this essay opens up for discussion, then, are whether rejecting an intrinsic notion of goodness is advisable for feminists and, if not, whether a conceptualization of "intrinsic goodness" which would not necessarily lead to these dangers can be delineated.

One final preliminary note: It is important to emphasize that I am not disagreeing with Houston's excellent analysis of an ethic of care, nor do I intend to disparage the importance of the dangers she so astutely points to. Rather, my analysis aims to call attention to the need to consider the intrinsic goodness of caring *per se*. I submit that a notion of intrinsic goodness of caring *per se* contributes to women's understanding of how they become implicated in their own oppression and points to directions in which legitimate and illegitimate caring can be effectively discerned. Thus, without a discussion about the intrinsic goodness of caring *per se*, I argue, Houston's call for a new conceptualization by women of an ethic of care may be inadequate. In addition, I maintain, that the notion of the intrinsic goodness of caring *per se* will minimize resistance to acknowledging dominance.⁹

The reasons for defending the intrinsic goodness of caring *per se* require further articulation. Moreover, the importance of such a notion as the intrinsic goodness of caring for feminists who are reclaiming an ethic of care for women needs to be fleshed out. The first reason for defending the intrinsic goodness of caring *per se* has already been alluded to above. If there is no intrinsic value to caring, why just not abandon it when its dangers are exposed? Yet, as Houston concurs, we do not want to dismiss caring but, rather, to reconceptualize it, to salvage it, not to oust it *tout court*.

Another, more personal concern for me, so succinctly described by Nancy Hirschmann as the "paradox of social construction," is illustrated in questions that I constantly find myself asking.¹⁰ Although I acknowledge the socially constructed prescriptive nature of caring especially for women, the implication that my caring for others, moreover, my caring about caring, is simply a product of my feminine socialization, is problematic for both those I care for and for myself. For those I care

for, if they thought for one moment that I care for them because I have been socialized to do so, would this not diminish the significance of my care for them? For myself, if my caring is a result of my gendered molding, it is as if I have not *chosen* to care. Again, does this not reduce the worth of my caring? When caring has an intrinsic worth, however, there is something I can choose, even if that choice conforms with what society teaches me to value.

Furthermore, it is possible to argue that one of the reasons why women are so willingly socialized to care is because there is an intrinsic goodness to caring. If true, this claim would partially explain how women are tempted into playing a role in their own oppression. This insight may also assist women in developing criteria for distinguishing legitimate from illegitimate caring. Thus, having an intrinsic notion of the goodness of caring may help the oppressed recognize how they get caught up with supporting their own oppression and may even facilitate their doing something about it.

Once we acknowledge the gendered construction of caring, the question to ask is, "Is women's caring good because women are socialized to believe it is good or is caring really valuable?" Without some sort of intrinsic notion of the goodness of caring, it hardly makes sense to even ask this question. Thus, a feminist examination into the intrinsic worth of caring seems in order and, even, overdue.

A third reason for questioning any total rejection of the intrinsic goodness of caring, one which rarely receives attention but which is important nonetheless (and which initially prompted this essay), concerns the educational aim of raising awareness of dominance. The significance of exposing women to the dangers of caring is partly related to the need to combat psychological or internalized oppression in which the oppressed oppress themselves.¹¹ Yet it is not only urgent that the subordinated become aware of how they perpetuate their own oppression, it is also imperative to make the dominant aware of how their dominance subordinates others. Feminists have shown how womanly caring is embedded within an oppressive system. Those who are members of the oppressor group may hear this criticism as condemnation — as if feminists are demanding that the tainted virtue must be denounced. Consequently, this may increase resistance to recognizing dominance by reinforcing the assumption that to acknowledge dominance, one must renounce and relinquish the values extolled by the dominant group. Indeed, it is often difficult for dominant group members to realize that many critical theorists are not necessarily advocating a rejection of traditional values and concepts, but, rather, are demanding that they be revised or reconstructed. It therefore seems to be important to explore carefully whether some notion of "intrinsic goodness" can be redeemed so that the notion of revisioning and reconstructing is coherent and so that dominant group members can realize that some of their most cherished values and beliefs are not to be totally dismissed. As a result, I suggest that dominant group members may not be so hesitant to acknowledge their dominance.

Therefore, I adamantly submit that feminists must not reject the intrinsic goodness of caring. Rather, they must be concerned with articulating an understanding of "intrinsic" goodness that will not result in the dangers for women that

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Houston, Claudia Card, Sandra Lee Bartky, and others have so insightfully pointed to and that will avoid the traps of essentialism, ahistoricity, and false generalization.¹²Moreover, feminists must work to envision a notion of intrinsic goodness that does not perpetuate or conceal dominance *and* which will not obstruct educational efforts to raise awareness of dominance. In what follows, I suggest one way of explicating such a notion, which I refer to as the "inherent" goodness of caring.

THE INHERENT GOODNESS OF CARING

Houston exhorts feminists to reject the intrinsic goodness of women's caring. What does she mean by that? She uses the term intrinsic goodness in the sense of "a good independent of." The dangers for women of reclaiming an ethic of caring, Houston argues, stem from perceiving caring as intrinsically good, or *good independent of* the social/political/economic context in which caring acts occur.

Houston's use of "intrinsic" as "being independent of" is understandable but problematic. Understandable, because she is defining "intrinsic" by its opposite, "extrinsic." Extrinsic goodness is that which is desired or valued for the sake of something else. The value of extrinsic goodness is *dependent* on something outside itself. When intrinsic goodness is defined by its opposite, when intrinsic goodness is understood to mean that which is not extrinsically good, the focus is on goodness which is *independent* of an external source.

However, exclusive use of this sense of intrinsic goodness is problematic because it may imply absolute goodness, goodness without exceptions and/or necessary goodness. Such a notion of intrinsic goodness leaves Houston with no way to apply to caring a notion of intrinsic goodness leaves Houston with no way to apply to caring a notion of intrinsic goodness that is context sensitive. This conceptualization of intrinsic as "independent of" overlooks another sense of intrinsic just as prevalent in philosophical literature, that is, that which is desired or valued *in and for itself*. I prefer the term "inherent goodness." Since "extrinsic" is not the opposite of "inherent," the term "inherent" is a less misleading term. "Inherent goodness" does not imply absolute goodness, good which is context independent but, rather, focuses on goodness whose source is *in* the object, *in* the experience, or is *constructed in* the concept. Acknowledging the inherent goodness of caring need not imply that caring should always be advocated. Caring can be inherently good without necessitating that its goodness is context independent and always good. I maintain that appealing to Ross's notion of *prima facie* goodness can help draw out such an understanding of inherent goodness.

In 1930, Sir William David Ross published an influential book, entitled *The Right and the Good*, in which he tried to mediate between Kantian morality and Utilitarianism. On the one hand, Ross recognized the moral force (or what I will loosely refer to as the moral goodness) of Kant's moral principles or duties but rejected Kant's absolute (no exceptions) understanding of them. On the other hand, Ross acknowledged the Utilitarian insight concerning the need to weigh considerations in situations of moral conflict, but he rejected the Utilitarian claim that the weighing is solely based on consequences. Regarding the binding nature of moral duties, Ross introduced the concept of "prima facie duties," which he distinguished from "actual duties." Prima facie duties unite the moral force of Kantian principles,

without their absoluteness, and the Utilitarian notion of weighing in conflict situations yet not weighing against consequences. A *prima facie* duty, according to Ross, is the morally self-evident duty which is, on first glance, characteristic of an act, and which would make us obligated to do that act as long as there are no other conflicting duties which are also characteristics of that act. For example, the act of promise keeping is a *prima facie* duty but not always and absolutely an actual duty. If there were no other conflicting duties to consider in the situation, the *prima facie* duty to keep a promise would also be an actual duty. However, when we consider the entire situation (as much as that can be done) and we find that other *prima facie* duties are involved which are more important — perhaps the person who made the promise in fact promised to murder some innocent victim — then in this case, although still a *prima facie* duty, keeping one's promise is not the duty which one should act upon. The *prima facie* goodness of keeping promises is not compromised on the grounds that there are situations in which, all things considered, the keeping of a promise is not the right thing to do.

Furthermore, Ross maintains that *prima facie* duties are known to be true by intuition. Vincent Barry succinctly explains Ross's meaning of the intuitiveness of *prima facie* duties: "If we understand what the principles mean, we recognize their truth. We need no additional evidence to know that the principles are true."¹³ That "all acts of injury are *prima facie* wrong" is something we just intuitively understand. In other words, goodness is built into, as an inherent element of, our understanding of *prima facie* duties.

Hence, three striking features of *prima facie* duties can help explicate the inherent goodness of caring. First, that the goodness of *prima facie* duties are an inherent part of their meaning, and second, that their goodness is conditional, that is, such duties may be overridden. However, and this is most significant, even when they are overridden, *prima facie duties still retain their characteristic moral goodness!* Similarly, I submit that caring is inherently good and its goodness is not rescinded even when, under certain situations, caring is not the best thing to do. Normativity is conceptually built into our understanding of what it means to care. In short, the concept of "*prima facie*" affords us an effective tool by which to describe the inherent goodness of caring because it points to an inherent goodness which is not negated, even when there are good reasons why such moral duties, emotions, or virtues should not be acted upon.¹⁴

To say that caring is *prima facie* good is to assert that goodness is an inherent element of what caring means. Yet the *prima facie* goodness of caring does not imply that caring is always the morally best thing to do. In other words, it is not incoherent to recognize the goodness of caring *per se* yet acknowledge that an ethic of care, as reclaimed by women, has problematic facets. The *prima facie* goodness of caring remains even if it is not always good to advocate caring. Since such a notion of goodness does not imply the rejection of values they hold dear, dominant group members are not threatened and, thus, resistance to recognizing dominance can be minimized. At the same time, such a notion of goodness does not obscure raising the consciousness of the subordinated who may be unwitting accomplices in their own oppression.

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CONCLUDING REMARKS

Appealing to the notion of *prima facie* goodness as a way to explicate the inherent goodness of caring is attractive because it allows for situations historically, socially, and politically affected in which caring should not be promoted. Such an understanding of "inherent," I hope, will appeal to feminists and other critical scholars because the universalism implied is not a result of false generalizations, does not exclude or marginalize difference, or pose a false unity.

The inherent goodness of caring is universalistic only in a benign sense because although it asserts that *prima facie* caring is always good, it is not an empirical generalization at all but, rather, a conceptual claim about the meaning of caring. This universalism notwithstanding, the inherent goodness of caring, as has been described here, does not impose a false unity and allows for a wide range of views regarding how the substantive meaning of caring gets fleshed out. Although always *prima facie* good, in actuality caring may be diversely defined and although always *prima facie* good, in actuality caring may not always be good, given certain contexts and situations. In other words, I am arguing that this understanding of the inherent goodness of caring avoids the dangers of false generalization because it does not lead to exclusion or false unity. Similarly, because the inherent goodness of caring makes room for diversity and contextual elements, it avoids the pitfalls of ahistoricity.

Finally, the inherent goodness of caring is not essentialist in that it does not hide difference, but celebrates it. While admittedly the inherent goodness of caring is essentialist in the sense that it assumes a type of goodness which holds true for all cases of caring, it is only an innocuous *prima facie* goodness that is assumed. Thus, I submit that such a notion of inherent goodness is one that feminists and other critical theorists will be able to find useful.

This essay has been exploratory in nature. Questions have been raised, and I am not so bold as to think that I have sufficiently answered them. My project has been primarily to explore the importance of the inherent goodness of caring, but more broadly, I hope to have shown that feminists must confront the issue of inherent goodness and the role that denying it plays in increasing resistance to acknowledging dominance. Moreover, I maintain that an inherent goodness of caring is especially necessary for those feminists intending to reclaim an ethic of care for women.

The implications for feminist educators are not trivial. While feminists like Barbara Houston have brought to our attention the dangers of advocating caring across the board or dogmatically, the inherent goodness of caring *per se* can help teachers of certain social groups recognize when caring is legitimate and when it is not. Moreover, such a notion facilitates the understanding of why certain social groups feel guilty about not caring and grants them a way to reject caring in certain situations without entirely dismissing the value of caring *per se*.

I have maintained that defending an inherent notion of the goodness of care is beneficial and necessary for both dominant and nondominant groups. I hope that the questions and the issues advanced in this paper will be recognized as sufficiently significant to warrant further inquiry and will stimulate continued discussion. I WISH TO THANK Harvey Siegel for reading an earlier version of this paper and for his helpful comments. In addition, I would like to express my gratitude to the National Academy of Education and the Spencer Foundation for their support during the time I wrote and revised this essay.

2. Carol Gilligan, In a Different Voice: Psychological Theories and Women's Development (Cambridge: Harvard University Press, 1982); Nel Noddings, Caring (Berkeley: University of California Press, 1984); Virginia Held, Rights and Goods: Justifying Social Action (New York: The Free Press, 1984); and Sara Ruddick, "Maternal Thinking," and "Preservative Love and Military Destruction: Some Reflections on Mothering and Peace," both in Mothering: Essays in Feminist Theory, ed. Joyce Treblicot (Totowa, N.J.: Rowman and Allanheld, 1984), 213-63.

3. Houston, "Prolegomena to Future Caring," 86.

4. Houston, "Rescuing Womanly Virtues," 256-57.

5. William David Ross, The Right and the Good (Oxford: Oxford University Press, 1930).

6. Jane Roland Martin, "Methodological Essentialism, False Difference, and Other Dangerous Traps," *Signs* (Spring 1994): 630-57.

7. Houston and Diller, "Trusting Ourselves to Care," 36.

8. Houston, "Prolegomena to Future Caring," 90.

9. In supporting the intrinsic goodness of caring I will not be concerned with the reasons *why* caring is intrinsically valuable. Instead, my focus is on why the intrinsic goodness must be acknowledged, why feminists have correctly been suspect of such a notion, and how such a notion can be articulated without perpetuating the harms that feminists have pointed to.

10. Nancy J. Hirschmann, "Revisioning Freedom: Relationship, Context, and the Politics of Empowerment," in *Revisioning the Political: Feminist Reconstructions of Traditional Concepts in Western Political Theory*, ed. Nancy J. Hirschmann and Christine Di Stefano (Oxford: Westview Press, 1996), 51-74.

11. Sandra Lee Bartky, *Femininity and Domination: Studies in the Phenomenology of Oppression* (New York: Routledge, 1990).

12. Claudia Card, "Caring and Evil," Hypatia 5, no. 1 (1990):115-19.

13. Vincent Barry, *Applying Ethics: A Text with Readings* (Belmont, Calif.: Wadsworth Publishing, 1982),47.

14. Ross's moral theory has not been described in its entirety, as some parts of his theory are not only objectionable but irrelevant to the topic at hand. By appealing to intuition, Ross does not tackle the problem that people disagree concerning which duties are *prima facie* to begin with, nor is he explicit regarding how to resolve the problem of the relative weights and merits to be given *prima facie* duties in situations in which they conflict. In particular, however, Ross's exclusive focus on principles or duties as the substance of morality and his neglect of moral conflicts which are hidden by dominant moral norms/duties are both notable problems. Indeed, Ross never considered the social/political/economic context in which both *prima facie* duties and conflict of duties arise.

^{1.} Barbara Houston, "Rescuing Womanly Virtues: Some Dangers of Moral Reclamation," in *Science, Morality and Feminist Theory*, suppl. vol. 12, *Canadian Journal of Philosophy*, ed. Marsha Hanen and Kai Nielsen (Calgary, Alberta: University of Calgary Press, 1987): 237-62; Barbara Houston, Ann Diller, "Trusting Ourselves to Care," *Resources for Feminist Research* 16 (1987): 35-38; Barbara Houston, "Prolegomena to Future Caring," in *Who Cares? Theory, Research, and Educational Implications of the Ethic of Care*, ed. Mary M. Brabeck (New York: Praeger, 1989): 84-100; and Barbara Houston, "Caring and Exploitation," *Hypatia* 5, no. 1 (1990): 115-20.