

From ethics to the aesthetics of care

The last part of the *Trilogía de la privadesa, Antikerés* (Anti-Keres), arises from Marga Ximénez and Nora Ancarola's need to make the invisible visible, lend a voice to that which is silenced, recall that which is forgotten and in general, view the world surrounding us from a different perspective. In this work, focusing on the concept of care, the artists decided to "care for" (curate) the contributions of collaborators, whom they sought from among artists and professionals in different spheres who had some connection to them and MXEspai 1010, contributions that, at the same time, delved into personal experiences in caring.

Yet in *Antikerés*, Marga Ximénez and Nora Ancarola are not only seeking to gather individual experiences of care, but rather to go beyond and, on the basis of these concrete experiences, induce us to make a profound reflection on the provision of care as applied to both the private and the public spheres.

What does providing care in the public sphere mean? What do we mean when we speak of the ethics of care?

On the one hand, there is a concrete factor and obvious social needs, as indicated by Enrique Bonete in his book *Ética de la dependencia* (Ethics of Dependency): "By anthropological constitution, we have all been in the past (during gestation, lactation and childhood), can become at any time in the present (through accident or illness), and will probably be in the future (from old age, the deterioration typical of age and the process of dying), suffering and dependent human beings."¹

On 30 November 2006, Spain's Congress of Deputies, in Plenary Session and by a wide majority, approved the Law of Dependency or Act on the Promotion of Personal Autonomy and Care for Dependent Persons (Act 39/2006). This law establishes the System of Autonomy and Care for Dependent Persons as the fourth pillar of the Welfare State, after the National Social Security System, the

¹ Enrique Bonete Perales, *Ética de la dependencia. Bases morales, debates políticos e implicaciones médicas de la Ley de Dependencia*, Editorial Tecnos, Madrid: 2009, p. 14

Educational System and the Pension System that were developed in the nineteen eighties.

Dependent people are primarily cared for in the home, and this task falls particularly on the shoulders of women (who represent 83% of family caregivers in Spain, according to data from the Spanish Ombudsman).² Women who, in the majority of cases, are therefore prevented from carrying out any employment activity outside of the home.

As Maria Teresa López de la Vieja describes: “Non-remunerated health care has significant economic consequences, precisely because it is not considered ‘work’ and therefore does not generate rights nor have any clear regulation. As is the case, moreover, with domestic activity, which is not remunerated, not accounted for and is hardly analyzed in all of its complexity. It is also not considered ‘productive work.’”³

Moreover, in Spain there are currently over 1,125,000 dependent people (elderly and severely handicapped who cannot take care of themselves), a population that will increase over the coming years (it is estimated that by 2020 there will be nearly a million and a half). “The law thus establishes a new, universal and personal right of citizens, that is, the right of individuals who cannot care for themselves to be cared for by the State.”⁴

Although the intentions and needs are obvious, we will see, in the midst of the present economic crisis that some economists qualify as systemic crisis comparable to the Crash of 1929,⁵ whether the pillars upon which the Welfare State rests can bear a greater economic load and whether the law will end up as a well-intended proposal but one impossible to carry out or whether together,

² Enrique Bonete Perales, *op. cit.*, p. 15; and María Teresa López de la Vieja, “Justicia y Cuidado” in Alicia H. Puleo (Ed.), *El reto de la igualdad de género. Nuevas perspectivas en Ética y Filosofía Política*, Biblioteca Nueva, Madrid: 2008, p. 238-258

³ María Teresa López de la Vieja, *op. cit.*, p. 243

⁴ Enrique Bonete Perales, *op. cit.*, p. 15

⁵ Santiago Niño Becerra, *El crash de 2010. Toda la verdad sobre la crisis*, Los libros del lince, Barcelona: 2009

we are capable of organizing a society in which we can care for those who need it, in a balance between the so-called ethics of justice and ethics of care.

But what are the ethics of care based on? Virginia Woolf once wrote: “...it is obvious that the values of women differ very often from the values which have been made by the other sex.” And she concludes, “Yet it is the masculine values that prevail.”⁶ These quotes, cited in the book by Gilligan, serve to illustrate how accustomed we are to seeing the world from a masculine perspective and through the male voice. In 1982, Carol Gilligan published the book *In a Different Voice* (published in Spanish three years later by the title of *La moral y la teoría, psicología del desarrollo femenino*), which refuted studies on moral development, specifically those carried out by her mentor at Harvard, Lawrence Kohlberg, which were based on research and interviews done solely with male subjects as well as Jean Piaget’s contributions on the study of morality in psychology.

Kohlberg’s theory of moral development defined a model of the development of moral reasoning in stages, from the first level to maturity, that is, until the individual reaches the level of independence in moral judgment. Gilligan pointed out that these theories had not taken into account women’s experiences and that studies done by men about men had created a standard, that women were studied based on this masculine standard and therefore, if she appeared different to this standard, she was considered deficient in certain aspects. Gilligan argued that these tests did not reveal “deficiencies” of one gender as opposed to the other, but rather “differences” between the two.

In her book, Carol Gilligan “challenges the traditional concept of moral development theory in light of the voices and experiences of women, until now excluded from analysis on development and moral capacity,”⁷ refuting the theories of Kohlberg and Piaget and basing her theory on studies done by

⁶ Carol Gilligan, *In a Different Voice: Psychological Theory and Women's Development*, Harvard University Press, Cambridge: 1982, p. 16.

⁷ Irene Comins Mingol, *Filosofía del cuidar. Una propuesta coeducativa para la paz*, Icaria editorial, Barcelona: 2009, p. 31

Nancy Chodorow⁸ and Janet Lever.⁹ Chodorow showed how babies' having the same gender as their caregivers or not was a factor of influence, and Janet Lever researched children's games, observing that girls demonstrated greater tolerance, a greater tendency towards innovation and conflict resolution and a greater tendency to make exceptions to rules.

In her work, Gilligan concludes that "sensitivity to the needs of others and the assumption of responsibility for taking care lead women to attend to voices other than their own and to include in their judgment other points of view" and that "the reluctance to judge may itself be indicative of the care and concern for others that infuse the psychology of women's development [...]."¹⁰

In other words, women relate within a framework of human connections in which the function of their capacity to attend to others is taken into account. Men presuppose and devalue care as a weakness of women and not as their strength, since until then, the qualities assumed necessary for the adult stage, i.e. "the capacity for autonomous thinking, clear decision-making and autonomous action", were associated with masculinity.¹¹

From a female perspective, a morality of rights and of non-intervention can induce fear for its potential justification of indifference and lack of care, while from a male perspective, "a morality of responsibility appears inconclusive and diffuse, given its insistent contextual relativism."¹²

In other words and summing up: "The psychology of women that has consistently been described as distinctive in its greater orientation toward relationships and interdependence implies a more contextual mode of judgment and a different type of moral understanding."¹³

⁸ Nancy Chodorow, *El Ejercicio de la Maternidad. Psicoanálisis y Sociología de la Maternidad y Paternidad en la Crianza de los Hijos*, Gedisa, Barcelona: 1984

⁹ Janet Lever, "Sex Differences in the Games Children Play", *Social Problems*, 23, 1976, p. 478-487

¹⁰ Carol Gilligan, *op. cit.*, p. 16-17

¹¹ Carol Gilligan, *op. cit.*, p. 17

¹² Carol Gilligan, *op. cit.*, p. 22

¹³ Carol Gilligan, *op. cit.*, p. 22

This notwithstanding, Irene Comins, in her book *Filosofía del cuidar* (The Philosophy of Care), discusses various theories for interpreting care from the perspective of social class and not gender, as for instance those of Hill Puka, Carol Stack and Claudia Card.¹⁴ For the latter, for example, care, more than a virtue, becomes a strategy for survival. The best thing is most certainly to be able to see the ethics of care as something beyond gender, that is, as ethics for everyone. Could it then be considered a feminist ethic?

If we understand “feminist” as meaning that the subordination of women cannot be morally justified and that women’s moral experience should be expressed with the same rigor and value attached as that of men, we can conclude that Gilligan contributes a feminist ethic. The author makes a clear distinction between feminine and feminist ethics, that is, between relationships understood as a special obligation and entailing personal sacrifice or the loss of autonomy, and relationships understood as a starting point for a different morality.¹⁵

From the very beginning, this association of women and caring was demonstrated to conceal certain dangers as detected by other theoreticians. For instance, care was considered a biological trait of women, a theory that has since been revoked once the nature of this tendency was found to reside in social construction and learning.

Moreover, one factor requiring consideration was the fact that informal care within the private sphere, within the family, reinforced traditional structures, since this care was usually assigned to women. Would this association between caring and women contribute to their emancipation or reinforce the traditional roles and subordination of women?

S. L. Hoagland, in his article “Some Thoughts about ‘Caring’”, disagrees with the conventional version of care, stating that the virtues associated with

¹⁴ Irene Comins, *Filosofía del cuidar. Una propuesta coeducativo para la paz*, Icaria editorial, Barcelona: 2009, p.49

¹⁵ María Teresa López de la Vieja, “Justicia y Cuidado” in Alicia H. Puleo (Ed.), *El reto de la igualdad de género. Nuevas perspectivas en Ética y Filosofía Política*, Biblioteca Nueva, Madrid: 2008, p.247

personal sacrifice, vulnerability and unconditional altruism correspond to an ideal of dependency that is negative and in this regard, praising care could reinforce institutions that have been and are oppressive for women.¹⁶

Nel Noddings discusses the inequalities and pathologies of care, stating that injustices often arise in interpersonal relations when an exploitative relationship is hidden behind love and care. The fact that men do not provide as much care for women as vice-versa is a violation of the principle of distributive justice. This lack of mutuality is a pathology of care which has been sustained over time by a patriarchal society.¹⁷

Other, more subtle pathologies of care, both on the personal and the social levels, are, for instance: "(care) which surpasses the needs of the other, a care that, though based on good intentions, ends up disempowering the others, making them dependent on the caregiver and preventing them from autonomously implementing and developing their own capacities for self-care and satisfaction of needs. A type of care that subconsciously and involuntarily nurtures the caregivers' self-esteem, who then appear as indispensable and gradually become empowered to the same extent to which the others become disempowered upon stripping them of their own self-care resources."¹⁸ An excessive care that makes the cared-for individuals totally dependent and victims of their caregivers.

Let's discuss the limits of care: "Without respect for the autonomy of the other, care becomes asphyxiation. At the same time, care without respect for oneself becomes sacrifice and abnegation." Indeed, according to Fromm: "Mature love is union under the condition of preserving one's integrity, one's individuality."¹⁹

But once the dangers of associating women with care have been considered, as well as the pathologies arising from care without limits, Victòria Camps poses a

¹⁶ S. L. Hoaglands, "Some Thoughts about 'Caring'", in C. Card (ed.), *Feminist Ethics*, Lawrence University Press of Kansas, 1991, p. 246-263, in Maria Teresa López de la Vieja, *op. cit.*, p.249

¹⁷ Nel Noddings, *Starting at Home: Caring and Social Policy*, Berkeley, University of California Press, cited in Irene Comins, *op. cit.*, p. 65

¹⁸ Irene Comins, *op. cit.*, p. 65-66

¹⁹ Irene Comins, *op. cit.*, p. 62

basic question: “The question is as follows: Does rejection of female submission and dependence, of the fact that this dependence has forced women to be the caregivers of everyone needing care, necessarily lead to the rejection of care as an execrable, abominable value?”²⁰

If we understand care as a social construct that can be learned and unlearned, why not turn our society into a society of care? Why not consider care a factor making our living environment more just?

According to Adela Cortina, one of the greatest obstacles to overcome in the sphere of ethics and morality is the distance existing “between our great declarations of human rights and attainments in everyday life,” that is, the gulf separating theory from practice. Cortina believes that care bridges the gulf, since it consists of the “affective and effective” application of the major moral principles to everyday life.²¹ According to Martínez Guzmán: “recourse to everyday life is necessary to discover the minimum moral limits we share; the point is to discover the transcendence of immanence, to make a phenomenology of everyday experience.”²²

Nel Noddings writes about how caring for someone involves “feeling with”, compassion or empathy, following the theories of Hume and Schopenhauer, who considered that all ethical behavior arose from sentiments and specifically, from compassion as a motive for action, that is, empathy, or putting oneself in another’s place. Noddings differentiates between natural and ethical caring: whereas the former could be a mother’s care for her children (we care for them because we want to) and there is a radical coincidence between duty and what one wants, ethical care arises when there is a certain conflict between the calling we feel to care for the person in need of help and the desire to pursue our own projects or interests.

²⁰ Victoria Camps, “La ética del cuidado” in Victoria Camps, *El siglo de las mujeres*, Ediciones Cátedra, Madrid: 1998, p. 69-81

²¹ Adela Cortina, *Ética de la razón cordial. Educar en la ciudadanía en el siglo XXI*, Ediciones Nobel, Oviedo: 2007

²² Vicent Martínez Guzmán in Irene Comins, *op. cit.*, p. 68

Care can be considered another perspective, another principle that leads us to responsibility toward and solidarity with others, as a moral voice that draws attention to the needs of others. According to Carmen Magallón, “the historical analysis of the behavior of women leads us to consider that the key to a culture of peace is not generating life, a key in any case for the perpetuation of the species, but rather caring for life. And caring for life in the broadest sense, ranging from the most everyday level to the most general, can and must be the responsibility of both men and women.”²³

The author Alasdair MacIntyre, delving into the ethics of care, calls for the acknowledgement of dependence in his book, “Dependent Rational Animals,” in which he takes a new approach to ethics based on the acknowledgement of human vulnerability.²⁴

In other words, modern philosophy has placed special emphasis on the autonomy of the individual to choose and follow personal life projects, but this clearly individualistic approach should not make us forget that we need what MacIntyre calls “the virtues of acknowledged dependence.”²⁵

When we help someone in need, according to MacIntyre, we are not only contributing to the particular good of a specific person suffering disability, but also to the “common good.” In our society, in which everything is marketed, we can say that this action has no profit margin, although the benefits are much deeper than we imagine.

MacIntyre continues: “What I am trying to envisage then is a political society in which it is taken for granted that disability and dependence on others are something that all of us experience at certain times in our lives and this to unpredictable degrees; consequently our interest in how the needs of the disabled are adequately voiced and met is not a special interest, the interest of

²³ Carmen Magallón Portolés, “Hombres y mujeres: el sistema sexo-género y sus implicaciones para la paz” in *Mientras Tanto*, No. 54, cited in Irene Comins, *op. cit.*, p. 42

²⁴ Alasdair MacIntyre, *Dependent Rational Animals. Why Human Beings Need the Virtues*, Peru, Illinois: Carus Publishing Company, 1999, p. 8

²⁵ Alasdair MacIntyre, *op. cit.*, p. 119.

one particular group rather than of others, but rather the interest of the whole political society, an interest that is integral to their conception of their common good.”²⁶

Antikerés* as the Closing Piece of *Trilogía de la privadesa

Marga Ximénez and Nora Ancarola’s *Antikerés* project invites us to place on the table all of the factors we have discussed about the ethics of care through the personal experiences of a series of collaborators. The authors wished to focus on a subject often concealed within the family or the people experiencing it at some point in their lives. They realize that what we keep within our private lives also conditions our public lives. Hence they sent a letter requesting people to contribute their experiences on the subject of care in text and image formats.

Whereas in Classical mythology, the Keres represented female spirits of death, their opposite, the “Anti-Keres”, would represent spirits of care, or caring spirits. In Hesiod’s *Theogony*, the Keres (singular: Ker) were malignant spirits that should be driven away, called daughters of the night: “Night bore loathsome Doom and black Fate and Death, and she bore Sleep, and she gave birth to the tribe of Dreams.”²⁷ Tradition describes them as untiring avengers, as dark beings thirsty for human blood who would fly over battlefields searching for the dying or wounded. Their Roman equivalents were the *Letum* (‘death’) or the *Tenebrae* (‘shadows’).

In the broadest sense, *Antikerés* has become a choral project related to care in general, whether to speak of those who “care for” (curate) a space and works of art such as at MXEspai 1010, or the artists and the pieces they have exhibited over the course of more than ten years of the gallery’s history, or those caring for an ailing or elderly person or a child.

²⁶ Alasdair MacIntyre, *op. cit.*, p. 130

²⁷ For the English version, excerpt from: Hesiod, *Theogony, Works and days, Testimonia*, Glenn W. Most, editor and translator, Loeb Classical Library, Cambridge: Harvard University Press, 2006, p. 21, line 211. *Translator’s Note*.

The majority of the collaborators' experiences focused on caring for the ill or living with elderly people and therefore on topics such as pain, illness, old age and death, the main themes in many of the sincere, heartfelt testimonies in which individuals tell what they've been through and show their wounds, breaking the psychological barrier between public and private spheres.

Nothing is more private than pain, whether physical or psychological, and in art it has been a subject of experimentation, precisely in order to take certain conventions to the limit: performances by Gina Pane, by Marina Abramović with her own body, those by Pepe Espaliú, suffering from AIDS, Bob Flanagan, suffering from cystic fibrosis, or the testimony of artists suffering from cancer, such as Jo Spence or Hannah Wilke, among others.

The aspects mentioned, i.e. sorrow, fear, pain, illness, old age and death have been swept aside from our public daily lives to such an extent that when they do appear in our lives they often cause shock and a natural phenomenon becomes something incomprehensible and traumatic. The artists who delve into these themes place the viewer in a difficult position, as they reveal that which society conceals, that which we fear and do not wish to see.

Through *Antikeres*, the authors and contributors manage to carry out a difficult exercise in making the private public in order to testify to the time we have dedicated to caring or letting ourselves be cared for, making care a social element going beyond the walls of intimacy and the domestic sphere and helping us rethink the world in order to make it more human and attentive to everyone's real needs.