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CAREGIVERS TAKE CARE!

A Literary Anthology of a Journey Toward Shared Care

by

Kelly S. Landon

A thesis submitted to
the Faculty to Graduate Studies and Research
in partial fulfillment of
the requirements for the degree of

Master of Arts

Department of Sociology and Anthropology

Carleton University
Ottawa, Ontario
September 30, 2000

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Caregivers Take Care!
A Literary Anthology of a Journey
Toward Shared Care

submitted by Kelly S. Landon, B.A.
in partial fulfilment of the requirements for
the degree of Master of Arts

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Carleton University
September 29, 2000
An Abstract:

This thesis records the author’s transition from producing modern academic literature concerning the social to an autobiographical method producing postmodern social thought and theory. The author uses her self, her personal experiences and her knowledge of more formal social theory with the intent of creating an academic theoretical perspective of her “everyday.” She contributes to sociology: 1) an attempt to widen the methodological and theoretical boundaries of the discipline in creating a well-rounded epistemological understanding of the caring interaction in the workplace; 2) the concepts of alienated care in the workplace; and 3) an argument for an integrated ethic of care that may be strategically used to encourage intimacy in what she perceives as a fractured existence in a highly modern society.
For my family who have each in their way filled me dreams of extending a long legacy of shared care;

For the knowledgeable women at "the home" who taught me to care for a community;

For the exceptional children who taught me care in a world beyond language;

For the professors who pushed and challenged my thoughts;

For Wade;

For you & me.
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Chapter I

Introduction to The Problem and Question of Modern Care
Her Hands: A Forward

Under my hand is a book, in the other a peacock blue pen. It is this very image of my cinnamon painted nails that catch my attention. My fingers are delicately placed upon the first pages of the book so as to hold it open without breaking its spine. I stop reading and stare at my nails. Varnished with spice this morning, the warm hue they hold has already become chipped, unsatisfying. My memory is jogged. My imagination transforms my hand into that of another. From my own, I see my mother’s mother’s wedded hand. Her fingernails, as always, are perfectly finished in a lively and gleaming fuchsia. This hand holds an artist’s palette, the other a paint brush. As it sweeps across the canvas, the brush she grips creates an awesome image drifting in the dark and nearly swallowed by the night. The faraway lights she paints over this nightshade backdrop are cast upon the water so as to hold a hopeful vigil for this long awaited silhouette. It isn’t just any ship - It’s the ship upon which my grandfather takes command.

I see her hands again. Her hands are welcoming her children home and holding newborn grandchildren for the first time, holding my sister and me. They are knitting sweaters for us, for the bazar, watering plants and polishing silver, wrapping Christmas presents in gold foil, pulling freshly baked cookies out of the oven, scooping ice cream and offering chocolates, holding up books for bedtime stories, tucking us in, cranking her music box so we can fall asleep to its song. They are cutting my hair, stirring peanut butter and corn syrup for my sandwiches, drawing white lines on fabric soon to be sewn, teaching my sister and I how to make pompoms. They are mixing paint and holding pastels, planting bulbs and pulling weeds. These are the hands of a grandmother in constant caring creativity.

I will share these memories with you for all they are worth: more than nostalgia, more than sweet stories, more than emotional longing, more than forever clutching her hands, their hands, your hands across time and space. My hands seek to illustrate and re-create the meaning of care as I have experienced it and want to experience it. I‘ve long been watching our hands. They’re letting go, getting out of hand. Hold on to my words for they are crafted with care from my heart to my hands and from my hands to this page. Hold on to my words as they become my hands reaching out to you, telling you, creating for you, for us, a reality, my reality, our reality? Hold on tight! Follow my hands. Follow my words. Perhaps, there is a reality awaiting - one we may someday share. Perhaps, we could create the reality, our reality of shared care.
Introduction to the Problem

As health care becomes increasingly technical and commodified at the turn of the millennium, we of the Modern Western society have erected a social system that produces an unsettling consequence. This one, is a system of care that can discourage the simultaneous and congruent occurrence of caring feelings with caring actions within and between individuals taking part in the care system. Thus, we have created a system of care that indeed can encourage the break down of intimate caring interactions and at times the prevention of them all together. This consequence of this breakdown, as I understand, pushes the careworker to envision and live the ontology of a fractured caring self. The problem here is that the social systems we have inherited namely, capitalism, high modernity, and technocracy have attacked one of our most positive social interactions - care. We the members of the caring fields are not powerless and undoubtedly subject to this detrimental interactive breakdown. After all, it is from our very hands that this care is born. With the enthusiastic spirit of Paulo Freire at heart, I urge you that it is now time for each of us to stop and take account of what has gone awry and to remember that we can be the agents of our caring selves.

Introduction to the Question:

Last September I began to write a proposal for a forthcoming Master’s Thesis. My plan was to ask of others the following questions:

- Please describe what the concept of “care at work” means to you.
- Please describe your role as someone who “cares at work.”
- Please explain how you know how to “care at work.”
- Please describe why you “care at work?”
- Please describe what “caring at work” does to you.
As I formulated the questions, I not only thought of myself but I *remembered* myself. I remembered my own social being and social life. Most specifically, I remembered how my summer employment had impacted my own life. From there, the above questions emerged along with an important revelation from the theorizing about care that I was doing at the time. It became increasingly apparent to me that this project I was planning to undertake was not only about others, but very much about myself as I fit into a flawed system of care. Once again, I posed the exact same questions. Only, this time I directed them towards myself, (which to me makes the most sense as they were in effect formulated with myself in mind). It was at this point that my reflexive thinking began to yield the most useful data, then thoughts and more importantly, further questions. Herein lies a most excellent and fascinating epistemological discovery: the questions, the data and the analysis of these, find themselves in a familial co-existence lingering in the memoirs of the everyday life that I had shared with others. Notice I have not yet written anything of a conclusion. I will explain my reasoning for this later but for now, let us leave this aside and concentrate on the above questions as I have reformulated and amalgamated them into one.

**The Theoretical and Practical Question:**

Bryce Courtney entitled his novel *The Power of One*. In its simplest conception my theoretical question borrows from this title by asking: What is “the power of one”? This is the rudimentary question that I hold at the core of this endeavor. However, in its development a second, more elaborate question is born. This next question invites and involves the other in an
integral way. It is the following: Considering Anthony Giddens’ Theory of Structuration\(^1\), what is the potential power of one member to shape the meanings and practices of social interactions occurring within their society? Where is this potential for power and agency located and what is its form? How might this member locate and maximize his or potential for power and agency? More specifically, I ask these questions about my own membership and participation in caring interaction in relation to the structures and system of care.

**Theoretical Applications:**

After much field experience, reading and thought, I have come to the following response to the above stated question\(^2\). Let us begin with the theoretical backdrop upon which I will patch the material application in a layered fashion. Where Karl Marx (1992) contended that social power is determined by a classed division of labour, Foucault (1972-1977) argued that power is relational and infinite. As I see it, neither one is right nor wrong. The inherent base to this backdrop begins similarly to Anthony Giddens’ (1979) assumption that structure and agency exist in a relationship of duality with each other. This is so on at least two counts that I have found in practical terms within the field of care at work. The first is that when constructing social theory we should reserve some space for the power of the agent in relation to the

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\(^1\) For an adequate elaboration of Giddens’ Theory of Structuration please refer to: Chapter 2 Agency, Structure in Giddens (1979).

\(^2\) Note here, I am not proposing the answer to the question posed it is simply my own response. It is my own plan for a project of agency and a libertarian self transformation. While the theory I am about to construct may be applied to other social situations, it may not necessarily be appropriate. This is not to say that the theory will be of no use to anyone but myself or any situation but the present one, rather that it will need to be reworked accordingly.
structured system he/she exists within while realizing the constraints that these structures can pose. Giddens' second point, as I apply it here, is that throughout our practical quests and theoretical explanations we should realize that structure may not only be a hindrance to agency but can also be an avenue for agency.

I had first suspected that those who are most capable of exerting agency against or even in line with structure do so because they set their driving discourse and their actions in a state of congruence and synchronicity. I think I was right but this response was insufficient. Although bringing together action and discourse is a legitimate and useful starting point, assuming that one might modify the structures of a system alone seems to be a step in the wrong direction. I knew that because of the dialectical aspects of the social I would "also need to engage others in my project of shared care so that it eventually becomes not my project at all but eventually our project just as the care will be ours". I also knew that "while resistance may be necessary, it is likely to be insufficient without common participation" because the type of shared care I was looking to build could not exist in singularity. How would I get others to join me in this project? I thought I had no idea but a child reminded me how simple it could be. It seems there were others looking and holding out their hands.

Organization and Direction of This Exploration

This paper is organized by five chapters that will soon follow the present one. The next chapter is a methodological chapter that explains and justifies the use of the method employed.

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3 This statement is as I wrote it in earlier versions of this Thesis.

4 This statement is as I wrote it in earlier versions of this Thesis.
throughout this exploration. It is important to understand that my conception of theory and method maintains that they are not separate entities. What I have done over the past two years consisted (and still does) of creating several theoretical contingent foundations. The method used, autobiographical writing allowed me to move back and forth and re-create the meaning of my findings. More importantly, this method allows me to look back on the claims that I attempted to make over a year ago and locate and critique the claims, as well as, extend or adjust them accordingly.

In Chapter III I explore the first notion of the duality of structure, that is that members may have an impact on structure as well as structure having an impact on the identities and practices of the member in his or her social role. Here I will advance my concept of alienated care as is adapted from Marx's (1992) concept of alienated labour. At this point in my understanding I was still regarding the structure as posing a hurdle or threat to agency. Although this is not to be considered a misunderstanding, it was simply incomplete. Therefore, this contingent foundation was an insufficient theoretical framework for describing the full potential of the agent and the use of structure to promote agency.

In Chapter IV, I will give an in-depth exploration of my own caring self. The reason for this chapter was to help me locate my self as an agent within this structure of care. What I found and developed here was a postmodern ontology of the caring self - my caring self. In Chapter V, I will visit once again with structure and incorporate the “other” in a more integral way. It is here that the project takes on a new meaning from “my” project of shared care to “our” project of shared care. In terms of speaking about the social, this is a very important chapter as I push my self to ask not only where is my power but where is our power. In this chapter, I develop a
well-rounded understanding of Giddens' Duality of Structure (1979) as I incorporate the
necessity of structure and acknowledge that the structure from which I experience is one that has
important historical roots.

In Chapter VI, I will draw on the work of Joan Tronto and Bernice Fisher (1990) in order
to help me redefine care. Also, I will apply Tronto’s concept of the ethic of care to my own care
with the intent of showing the possibility and political necessity for integrated care. I will re-
introduce my own concept of shared care as extension to Tronto’s (1993) understanding of the
Ethic of Care. I will use Michael Ignatieff’s (1984) analysis of the needs of strangers to expose a
haunting reality of the “caregiver.” Throughout this chapter, and the entire thesis, I explore the
fracturation within my self and my understandings brought on by my Catholic schooling and my
university involvement with Women’s Studies as a discipline. Let us now move to the
methodological and theoretical contexts.
Chapter II

Methodological and Theoretical Contexts
Methodology:

Introduction

I continue here the quest we began with our Honors Class collective project entitled: *QUEST: Locating a Sociology of Oppression and Liberation.* It was our mission to locate a sociology that uncovered oppression rigorously and sought liberation creatively. I have found this liberation in the form of "self-life-writing." I have chosen this form of writing because it lends well to the feminist "by, for, and about" women type of sociology that Harding (1987) suggests. It is my hope and attempt to make a significant contribution to the widening and acceptance of broader methodological boundaries containing social study while maintaining a high academic standard. I strive now not only to locate this libera tory sociology but also to realize it both theoretically and methodologically as theory and methodology become zippered together throughout this exploration of the social. In accomplishing these goals, I will weave together "self-life-writing" and theoretical exploration in an attempt to produce an academic explanation of social phenomena related to care in the workplace.

On Feminist Theory and Methodology

As researchers of social phenomena and producers of knowledge, we need to be accountable for the work that we produce. In saying this, I mean that we must think critically and reflexively about the ramification of the bodies of knowledge that we set forth as well as

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3. This concept originates from Strauss & Corbin's (1990) concept of shifting back and forth from the fieldwork to theory production. This ability to "zigzag" through the research/writing process enhances the liberatory nature of the research process as it provides many open avenues for inquiry, avenues that may not be foreseen in the beginning stages of research.
accounting for how we know what we are saying that we know. This means that if we are to call our work feminist, indeed we will need to account for why we choose to call it so. I would like to make clear here that I am not assuming that research that is qualitative, others or my own, is or would be necessarily “feminist” by virtue of being qualitative. We need to bridge and apply feminist theory with and to the methodology we use if we should want to call it feminist. This is where the idea of by for and about women becomes important because it pushes feminist theory into practice.

I agree with Harding when she states that there is not a “feminist method.” Rather, it is the methodological context and application of feminist theory that make research feminist (1987:9). She explains adequately that bringing feminism into the methodological research mix is not simply about “adding women in” nor will I tell you is it simply about adding myself in. While adding women in was necessary, we have learned that there was more, there were epistemological questions about research that women and feminism have brought with them (1987:4-5). This is where, I will come back to agency. Harding (italics in original 1987:3) writes that “feminists have argued that traditional Epistemologies, whether intentionally or unintentionally, systematically exclude the possibility that women could be “knowers” or agents of knowledge. . .” Feminist epistemology places women in positions whereby they are considered “knowers” by suggesting alternative theories of knowledge. Further, their experience has been validated as important data that can be described and analyzed to explain women(s)’ realities. The point that there are multiple realities of womanhood is an important one because it means that researchers should be careful not to assume to know the reality of other. Importantly here, experiential multiplicity means that women and men of all backgrounds should be afforded
space and a variety of methods with which to outline and express our lived reality. Let us now take a closer look at the current method employed.

Labeling the method

For quite a while I referred to the method I was using as the auto-ethnographic method. Now after retracing my steps, I realize this was not an exact equivalent. Despite my intention of producing this particular form of ethnographic writing, I certainly did not follow the traditional ethnography recipe. First, I am not writing the life of my “ethnos.” Who would my people be - the circle of women with whom I do care work? We may all be white females\(^2\) that come together in one home to care for others for a wage, but our life histories and social circumstances vary greatly. Our reasons for caring for a wage are not the one and the same and this may profoundly affect our concepts, experiences and practices of caring for a wage. I am not trying to put into words the everyday lives of the women with whom I do care work. I am very specific about whose experience and reality I am expressing - my own. I am speaking my truth, my reality, with my words (to the greatest extent that I know how to or even can). This by my standards is part of what constitutes this research as feminist. However, this does not mean that this project is bound by singularity. Others may well identify with parts of the experiences or theoretical explanations. The present study is one of the social in that it is a study of the self (my self) within and in relation to a society (modern Western Canadian Society with interacting systems of capitalism patriarchy and technocracy).

Second, my postmodern conceptual framework allowed me to play with the spacial

\(^2\) Recently, one man has joined our care team.
borders of the field(s) and the subject of study while doing this research. In actuality, I feel like I have trespassed across many spaces of my own life. Being self-reflexive was more of a struggle than I had anticipated because the self has many faces, many places and with memory many times. I skipped out of my spacial place in the public field and into my own private family life, educational life and social life. Nearing the end, I was swirling together realities of the public and private spheres conjuring a spell of weird emotions.

Most recently, I have been introduced to the work of Laurel Richardson. (Richardson, 1997) Her kindred words have reminded me that it is this messy play in our fields that breathes life and strength into our words. My eyes began to tear as I read her most powerful words: “Fields are where ethnographer’s go; and I am the ‘field’” (1997:4) I am the field! There you have it, an historical reality forever altered. It was not that I didn’t already know that I could be the field as clearly I have been researching my self as a field far before reading these words. Nor was it that I needed her to tell me researching myself was permissible for me to do so, as I was and would continue to do so regardless of anyone else’s advice or letter grades. My undergraduate education taught me to take chances when it comes to academic style, form and content. In this way, I am fortunate to know the alma mater Richardson envisions in the later parts of her book. It was a nest that remains categorically unnamed by the “Fathers” of any one discipline or school of thought. It’s “mothers” nurtured me long enough to make me “quietly confident.” Then, knowing before I that I was readied, my alma mater pushed me free to fly the fields. Richardson’s words make doing what I was taught and determined to do (write the realities of lives - my own included) an identifiable almost comfortable endeavor. No longer do I feel like a “trespasser” in my own life as I mentioned in my earlier writing above. Richardson,
kicked down the “no trespassing” sign that modernists hung over the self, and freed me of a lurking guilt that I was doing sociology in the wrong place, the wrong way. “You can’t go against the grain all you life!” My mother has warned me since I was a young child. She was right. It is far too much work and far too lonely to keep up forever but it is also quite necessary at times if we are to develop any sort of self. Finding a literary community of writers and sociologists with whom I may, in my own way, “cut against the grain” has lessened the load and fostered a sense of belonging. Their thoughts assist mine as my new understanding emerges and the reality of shared care is co-created. Something else I will take from her writing: the use of afterwards and forwards. Although I was doing this before, I will use the concept differently as a way of introducing and situating the pieces of writing in this anthology of the self.

Other times, in between this process, were not so exciting. Even the physicality of my movement was almost nil as I sat in a form of meditation. I spent great lengths of time locked in my own head so to speak in a state of whirl winched theoretical pondering, anxiously anticipating my Committee’s every comment, question or criticism. Despite my outwardly still behaviour I was in a state of intense inward labour. In hindsight, however, my quiet efforts would have been aided by requesting the assistance of others more promptly. I have tried to be my own most ruthless critic of my ideas before they even hit the page. At other times during this catatonic labour, I leaped back in time to my childhood using my memory as a legitimate tool. I used memory, in part, for the same reasons that Patricia Hampi (1999:32) expresses in her response to the question why question authority? Why question the expert scholarly knowledge? She writes:

My answer, naturally, is a memoirist’s answer. Memoir must be written because
each of us must possess a created version of the past. Created: that is, real in the sense of tangible, made of the stuff of a life lived in place and in history. And the downside of any created things as well: We must live with a version that attaches us to our limitations, to the inevitable subjectivity of our points of view. We must acquiesce to our experience and our gift to transform experience into meaning. You tell me your story, I’ll tell you mine.\(^3\)

My own use of memoir writing differs in that it is used to produce scholarly knowledge at the same time as it questions it. When I have used memoirs, it was in relation to a theoretical context. Now, I plan to look back on memoirs I have written at different times in different spaces and locate their meanings theoretically. In other words, theoretical explanations or descriptions of lived experiences have and will become data to be called into question and further analyzed at a later time. This experience-memory-theory relationship is explored below and as I see it is a strength of this exercise, despite Hampl’s noted criticism and my own of the problematic of subjectivity.

Although rigorous self-reflexivity often brought me to times and spaces that I had not anticipated visiting or even wanted to, the product, it would seem, is a more well-rounded and rich analysis. Memory for the most part was unintentional and inevitable - at least that is the way it worked for me. One thought or sensation jogs the memory of another in a causal fashion. Other times the surfacing of memory seems to have no logical connection. Sometimes my memory storms and these floods and flashes may be an annoyance or a distraction but other times - the other times these memories inform and inspire a clarity that might never surface elsewhere. Again other times, instigate its direction, though this practice seems only to yield

\(^3\). The task at hand may begin with a game of “tell-tale” but our endeavor moves beyond as this as a negotiation of our life histories fuels our self-identities and intimate interactions.
further detail and not usually a new insight. Not to admit these connections and to lobby for their accepted legitimacy as an integral in social theorizing would not only be dishonest but also the shameful loss of our most tangible resource as writers - our selves.

I spent very little time watching the other, at least not until more recently. I concentrated mainly on my self and my experience of the field and in this way, I was the subject of my own study. The point here was to locate myself in my many fields and so that I could know and understand the position from which I was writing. This study progressed from an exploration of the self within a structured system, to one that involved the “other” in an intimate way. I think at first I knew I would at some point have to find and introduce the “other.” However, along my journey I had unintentionally left this essential task on the back burner for far too long. Until, I was reminded by my Advisory Committee that a caring interaction would probably entail the “other” and that this area would require some further attention and analysis. Once again, I set out across my life’s terrain open and ready to find the other after much self exploration. It could have been a long and perilous trek for I was looking in the wrong direction, - still inward. With one serendipitous question, the other found me, reached out for me, and informed me about the kind of care I was in search of. It is the first of some recent lovely stories I promise to tell in due time.

For now, I realize that I have some further methodological and epistemological questions to answer to. For example: Where does the study begin? Will it ever end? What is the value of narrative writing? What is my impression of the reality of these events? How am I using the narration of these life events? Does my life experience inform or illustrate the theories I am presenting? Does it do both? Am I creating a gender-unaware theory relying too heavily on my
experiences? Am I being oppressive by concentrating on my own somewhat privileged voice as opposed to creating a space for less-privileged women? For now, let us start with the beginning.

**Articulating when the study began:**

Studies, especially studies of social interactions, do not begin with proposals or even with the idea that we might conduct a study. I would argue that these studies begin long before the birth of the question that we are to pursue. I say this, first because the question itself is situated in a social and communal epistemological context as Nelson explains about knowledge (Nelson, 1993:150). The questions themselves, like the knowledge that is produced from them, are produced by “epistemological communities.” The new question is based on previous questions and questions to follow will relate to this and maybe other questions at once in the past. Notice how an intricate web of questions and knowledge is formulated. Some are personal questions some are academic questions but they are all related one to another somehow, some more directly than others. With this web of abundant questions and plausible answers, we usually need to hone in on specific questions for the purpose of not being overloaded by the whole web. Notice that I say “hone in on” and not extrapolate a question or set of responses. We cannot, nor should we try to dislocate a question from the web and think of it as existing outside of or independent from the web. Instead, we should “hone in on” the question(s) and take an astute look at where it sits within the web and further examine why and who asked what question(s). I have been searching through my knowledge web (that exists once again in relation to others’ knowledge webs) to find where this study began. I have located more than one point. Allow this example to illustrate:
As I sat with my sister and younger cousin in one of the bedrooms at my grandparents’ house, we leafed fondly through old family photo albums. Most of our own pictures were ruined in a flood but my grandmother has kept many more safe. I studied my baby pictures with care and I was thrilled to see one that I had never seen before. It was one of my mother and me; she was holding me shortly after my birth. I have been searching for a time and place where my study of the caring self began. Though it did not strike me at first, I realized as I read Stanley’s discussion of the use of photographs in biographical writing. With this photograph and childhood memories in mind, I am quite sure this study of care began some twenty-four years ago, as my mother held me close to her caring self.

Yes, this may be where I started to experience and learn about care on a personal level and it has become a legitimate place to begin in feminist literature (Reinhart 1992:260). However, this is not where my academic study of care began and it is certainly not where “our” academic study of care began. This brings me to the question: Can I separate my personal studies from my academic studies and further from their academic studies? Assuming I could (and I don’t think I can) would I even want to enforce such a break? I will explain my answer in tracing the roots of my academic beginning of this study as it is tied to that of my past professors.

I think I can actually pinpoint the root of my academic study of care work. I was in the third year of my undergraduate degree. It was in a Women’s Studies class, “Women Theory and Ideology.” My assignment was to present Charlotte Perkins Gilman’s Herland. (Gilman, 1970) At the time, I remember finding the concept that the women did not “own” the children but shared them with the community and shared the work that went along with having children, an interesting and novel idea. It was after this presentation that I started to write about motherhood and the politics of housework. Does this matter? Yes! Herland maybe had not set the stage, because I had informally studied care in my own family and at university I studied the sociology of the family and sex and gender prior to this, but Herland introduced me to what I now know as
socialist feminism, (even though that is not what Gilman called it. She called it humanism.)

(Lane, 1979) It remains with my thinking today in the form of two rather simple thoughts: How wonderful it would be to share children along with the work and love that they bring with themselves. The other thought was how rotten it would be to throw men away and all they have to offer to care (not that I think this is what Gilman was suggesting we do as she did recognize strength, among other traditionally masculine traits, as desirable).

It was not an accident, that I stumbled upon these ideas at that time. They were chosen for me by a professor who had intended feminist goals and particular views about the politics and economics of housework. My academic study of care can be linked to others’ personal and academic agendas. This current study fits within an epistemological context of personal and academic discourses that are wildly intertwined. It is very much a product of my family’s care for me and my professor’s personal academic pursuits and the social, political, historical and economic context that these occurred within. The reason that I accept this grounding in these discursively and epistemologically located beginning points is that I can use them to my and our advantage as reference points. I must question and deconstruct these reference points and their direction, as they will direct me in similar or new directions from others and are useful as such. As well, I will be able to build upon existing knowledges related to care or critique and deconstruct these existing knowledge bases.

My motivation for turning the study of care into an academic study:

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4The concept of deconstruction that I am referred to is based on Weedon’s (1986) discussion of post-structuralist analysis in that at very least I want to peel away understandings until their “political assumptions (are) explicit” (p.20).
It is not a wonder that stumbling upon these ideas has pushed my motivation to choose to study care. I come from a long legacy of caring mothers and fathers. I have studied the sociology of family, the sociology of sex and gender and the sociology of intimacy with professors who have shaped my taste for academic literature. I was raised by a mom who at different times worked inside and outside the home and an equally caring office working dad. Though their care was equal and equally wonderful to experience, it was different. Their care was indeed gendered and yet, sometimes I am sure that this care was woven with some common fiber. The point here is that through socialization my parents and others have worked to create and shape my caring self.

In high school some of my friends became mothers and I observed their experience that often seemed to be a great struggle. My experience of giving childcare has been through my summer jobs. More recently, I have taken a job as a “student” careworker at a group home for developmentally challenged people. This is one of the experiences that illustrates from where my current interest of the study of care is motivated from.

As I rock an eighteen-month-old child that I have known only for a few hours, I feel an immense connection. I have fed him, changed him, played with him and taken him with me to do errands. Now he is cuddled against me sucking his soother and his eyelids are beginning to look heavy. He seems content and trustful in my arms. I like to think it’s because of the care I gave him that day. I choose to continue rocking during my fifteen-minute break. Upon realizing that I have other mother work to do, I put the resting child to bed. The phone rings - it is his mother calling to check on him. She asks the usual questions: Did he eat well? Did he cry before bed? My response helps put her at ease. I can tell she misses him. I know I will too.

Somehow, sometime, I developed a “caring self.” Instead of having my own children I choose to write about what it is like to care for others’ children how our current set of care is deficient and often “alienating” as I have argued elsewhere.
The important point here, is that despite the entrance of feminism into my academic career I still think that motherhood is idealized and romanticized through my experience, and that is why I choose to study mother work. The idealized views on care and motherhood that I am returning to will impact my research. The cultural views that I hold about motherhood will shape the way that I interpret my experiences at the same time as how I experience mother work will shape what I know and want to say about it.

I have also noticed that this fascination with motherhood and care has shaped that language that I use to discuss and analyze care. My reality is inscribed in my language as Susan Ehrlich (1995:45) might say. Even when I am not writing about care it is interesting that I use the expressions "with care," "carefully," "Mother Earth" "for better or worse" a great deal more than I used to. The language that I once used was more pessimistic and less inviting of motherhood because I think that I was resisting what I thought of as a trap that my teenage friends had fallen into. It is not a wonder that threw in newly found words such as "patriarchy" and "male dominance" in relation to child care as much as I could. Motherhood or care a "choice?" I thought not. There seemed to me at the time nothing "choice" about it. Thus, this word was only used in the context of "choice," lack thereof.

I am quite sure that this language was shaping what the reader would or could take from my writing as will the language I will use in this current paper and it was related to my experience of care and motherhood ideals. If we look closely we may see how a reader's life experience not only colours the description and analysis of social phenomena but the very language that the researcher works with to produce the work. I am not saying that the reality of the situation is skewed by my limited language, (although this is a possibility). Rather, I am
empowering the language that my feminist voice speaks by saying that these words are tools with which I paint the reality that I will show you. I am asking the reader to look carefully at the words that I choose to write with as they are, as much a representation of my reality, as the ideas that these words come together to mean. Here, the reader may find my newly found concept of feminist agency of the subject as I have come to understand the concept through Michel Foucault’s writings on power and knowledge, and Anthony Giddens’ writings on the duality of structure (1979) and the transformation of intimacy (1992) and Sandra Harding’s (1987) discussion of women as “agents of knowledge.”

**Learning through experience - an Epistemic Fallacy?**

I will begin this section with concepts from Marnia Lazreg’s “Women’s Experience and Feminist Epistemology: A critical neo-rationalist approach” (Lazreg, 1994) I will bring other pieces in, in relation to this one. In this piece Lazreg is arguing for the acceptance of women’s experience as a valuable resource in the production of feminist knowledge. Lazreg, however, maintains that relying solely on our experience can create gender unaware epistemologies. It is precisely by using women’s experience as central that we encourage autonomy in the feminist inquiry process. And, while this is true, the voice of the “I” can often be misconstrued as a generalized or even natural voice and can, if not used carefully, be oppressive to other women. In examining the complexities of bringing women’s experiences and personal lives into academic writing, Lazreg realizes that rationalism needs to be coupled with experiential theorizing. If feminist empiricism does not challenge the scientific bias through experiential theorizing, it may fall into the same epistemic fallacy as traditional empiricism by possibly
reproducing such a bias. These experiences are too often taken for granted as reality, while thought that the experiences themselves are discursive construction is ignored. Lazreg is arguing for a knowledge of women that is scientific without being positivistic. That is, that only the researcher is the “true knower” of the personal experience and that others are less knowing. Further, what gets chosen as important to know becomes more and more subjective. This too has a duality in being both autonomy producing and oppressive. This is so because the experiences of others may be deemed as less important to know while our own experience or the experience of the subjects we are studying may be deemed to be more important. Lazreg’s concluding remarks are of great significance. She explains finally that if we are to use experience in feminist writing we should use it with multiplicity and diversity. Moreover, that we need to push our work beyond the immediacy of experience through critical, reflexive and rational thinking. At this point I would like to draw on Stanley as I begin to assert my own position on the subject matter.

Bringing in the High Value of Narrative

In a piece of work that I recently finished I wrote the following words “It is in the reflexive analysis of the experiences that the biography moves from mere journalistic reporting and into legitimate, critical and theoretical writing about the social experience.”\footnote{This quote is from a paper that I submitted in to Alan Hunt for 53.524 Consuming Passions Winter 1999 Term. The paper was entitled: Hail Mary...A Feminist Understanding of the Relationships Between Corporeality and Motherly Self Concepts in a Highly Modern Society} This is one part of what Lazreg was trying to explain I think. I agree with her point that we must reflect upon and discuss experience in order for it have any value because it is not enough to put forth
an experience without qualifying where and why it exists as such. I will have to come back to her point about multiplicity and diversity. For now I would like to bring in Liz Stanley’s highly experiential and narrative style writing. (Stanley, 1994)

I have found the work of Stanley to be quite inspiring. In fact I choose to use her elaborations in *The Knowing Because Experiencing Subject* as a model for the type of work that I would like to produce. (Stanley, 1994) In our class discussions Stanley was criticized for her work because we could not go “back and check” what she has written. I have taken this criticism about reliability and validity of narrative writing very seriously and I have given it a great deal of thought. The way that Stanley has set up this work does allow us to “check” what she has done. She has separated her experience of watching her mother’s self slip away from her analysis of the experience itself and her analysis of this methodology. She has then reconstructed and built bridges between these in order to set forth a methodological and an epistemological premise for “self-life-writing.” The question of this “going back and checking” is an ontological question about the “real” and the “Truth.” Here I am referring to the link that Stanley is trying to make between feminist epistemology and ontology.

Is the “real” attainable through research? Epistemologically speaking, Lazreg might argue that there is no one reality and that is why we need multiplicity and diversity in the voices that we bring to the academic research table. There is no one “reality” and this will become more clear as I will later draw on the work of Chris Weedon (1987). For now, Stanley writes, “the real reality is that there is no single reality” (1994:46). Here she is arguing for the

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6. This reference to a class discussion relates to the course 53.586 during the Winter 1999 term instructed by Dr. Andrea Doucet at Carleton University in Ottawa, Ontario.
ontological assumption that reality is relative and that all writing is referential to our lives and that we must bring this in to the writing and deconstruct it otherwise it will creep into our writing whether we want it to or not. In asserting the referential qualities of reality, we might decide that the true real is not as important as the interpretations of what we each and all take to understand as real. What Liz Stanley has given us in this piece is her initial interpretation of the reality of her mother’s death as she understood it and then her own reflection on this interpretation. What we should be concerned with exists somewhere between the two.

From my own stance, I am not so concerned with the exact events that took place and whether they were real or not. Stanley is checking her current thoughts and analysis using more academic theory against her initial more personal and emotionally charged ones. It is in this process of moving back and forth from experience to theory that we re/create and re/define our reality. I have found it most useful to examine the way that she has chosen to define her reality in relation to the way that I choose to define my reality. It does not matter to me if it is “real” or not because it is not so much what the narrative says as what she says about the narrative and how she says it. This from my point of view is of vital importance if I am going to share in a loose sense of the word, her reality. This brings me back to the importance of multiplicity when writing of the experiences of women, (and men too for that matter.)

The Need for Multiplicity and Diversity in Feminist Voices:

Lazreg writes, “women have never been written about by so many women, yet the riddle ‘woman’ has never loomed so large.” (Lazreg, 1994:45) I agree with Lazreg’s concluding
remarks about insisting on multiplicity and diversity. However, I do not share her stance exactly. From her work, I think that she would say that Liz Stanley's voice stands in singularity and that this type "self-life-writing" does not incorporate the notion of diversity. I however would like to suggest that Stanley's voice does represent a conscious effort in the implementation of multiple and diverse voices. If we are each given the opportunity to voice our discourses fully as well as being given the room to elaborate the knowledge that we put forth, this concept of multiplicity and diversity may be heightened through auto-bio-graphical writing.

When one researcher tries to squish in and analyze bits of other's experiences and realities what the reader gets is the subject's reality from the researcher's point of view. Whether or not the researcher is willing to admit this is another matter. The problem that I see here is that while we are trying to put forth the voice of others through short narrations of their experience we may find that if they are given the power of the pen and offered their own unlimited space we may find that their story and analysis differ from the analysis that a researcher might tack onto their experience. In quoting others, researchers dis-embed and re-embed the subject's voice into their own writing that has a political agenda in such a way that the subject's words may mean something quite different due to context.

The methodology that advocates the use of autobiography that I am putting forth cannot escape without being problematised as well. As ideal as I think it would be to have everyone and anyone's voices at the academic table, it does not fit our current social situation in academia. Not everyone exists within academia, nor does everyone even care to. The point is that while some feminists are quick to extend a waving invite to "others" around the academic table, fewer feminists hold out their hand and pull "others" in this circle in an active way. For
reasons of political inequality setting forth our own voices and experiences does not work to its fullest potential. Once other voices are brought to the table, it is imperative that we take a look at what type of language is being used and if it incorporates diverse vocabularies. For this reason I will next turn to Weedon's work on the use of language in shaping reality.

Language as it works to shape reality:

Trevor Purvis and Alan Hunt (1993) make an interesting assertion about reality existing only insofar as it is an interpretation. They use the example of an earthquake. Though there is usually no disputing that something has happened it is in the articulation of what has happened that we might find reality as it exists for others. Some have thought that natural disasters were the wrath of God while others find more scientific reasons for earthquakes. Here we see the importance of discursive locations in relation to the meaning of experience. I use these distinctions as I understand there is this thing we call caregiving. What exactly it is we do not agree on. While one discourse might find caregiving to be virtuous, the one I subscribe to understands caregiving as a political agenda that masks the invisible hand of modernity and capitalism as I will explain. Weedon writes that “it is in language that differences acquire meaning for the individual. It is in language that we learn how to differentiate...”(1993:73).

Common sense understandings (and I think that they can often be found within narrative writing) are rooted with in “a naive view of language” (1993:74) one that uses “human nature” to support its very reality. Weedon makes an argument similar to the one made above by Purvis and Hunt. She writes: “While language in the form of different and competing discourses does indeed give meaning to events retrospectively, this meaning is not the reflection of an already fixed reality
but a version of meaning.” (Weedon, 1997:75) In other words, we create the reality at the very
time of defining it with the language. I create my experience as it moves from my mind and hits
the page. I paint the reality of my experience with chosen words, unintentional words, and the
theory that develops from these experiences, illustrates them through a process of endless
recursive reflection.

This brings me back to the point that I was trying to make earlier with Stanley’s work. It
does not matter what happened “really.” Instead it matters greatly what Stanley’s interpretation
of what “really” happened is. I can use the language that she chooses in her narrative to
deconstruct and analyze her “common sense” understandings as can she and as does she.

Weedon Further writes, “The meaning of experience is perhaps the most crucial site of
political struggle over meaning, since it involves personal, psychic, and emotional investments
on the part of the individual. Weedon is right, articulating meaning is crucial to political
pursuits like feminism. Academic language bears the mark of the androcentric bias. If women
are not allowed to write in their own language (and that is certainly not to say that women’s
language cannot be academic or even that there is one women’s language) the reality that they
set forth will be tainted by virtue of this sexist language. In narrative writing, I see the selves of
women from another and an important angle, the personal angle. From my own experience of
narrative style writing I feel that I am being given a chance to play with the different languages
that I know, ie academic, personal and now workplace languages. Sometimes, I can make more
clear my reality by not limiting myself to academic language. Further, some ideas seem to flow
from my mind to the pen with greater precision when I blend academic writing with narrative
writing. And, this last point is key as it will bring back to the thoughts of Marnia Lazreg. We
must blend theory with narrative if we are to use it to its fullest potential. Setting forth the definition of the experience is hardly enough. We need to articulate why such experience exists and why it is oppressive or liberating. It is our critical analysis and reflexive thinking of and about our narrative products that will ensure that they remain academic, maybe not “scientific” but certainly academic.

**Conclusion:**

In conclusion, I would still maintain that Liz Stanley’s (1994) work is nothing short of stellar and that I will strive to produce critical, highly academic and clear pieces of writing as she has. I say this because it is my ontological and epistemological belief that raw experience exists as information or data and that it is by working this information or data with language that we can produce differing and shared bodies of knowledge. Producing knowledge and meaning through language is much like baking bread. We may throw ingredients in a bowl but we will not have bread without kneading it into dough and baking it. We need to knead experiential knowledge through discourse if we are to produce knowledge tangible to everyday realities.
Chapter III

“They Called me a Caregiver but Often I Wasn’t”

Caring for a Wage:
A Feminist Deconstruction and Theoretical Analysis of The Concept of Care at Work
Locating “Caring For a Wage”

This was a piece that was written after my first experience as a summer student at the group home. It grew from a dissatisfaction with the emptiness and awkwardness that I felt while caring. It seemed that my knowledge of care was inadequate as I did not know the clients or their needs. They were thrown in and out of my life in a very transient cold detached manner. I began picking apart the relationships and the structure of the relief care setting as I immediately knew it was a strange mix of public and private. I had no idea at this time all that the experience would allow me to uncover.

This chapter exists in essay format; I was trying to make an argument against the structure and practices of care that I was experiencing. I was still using the words of traditional persuasion such as “prove” or “conclude.” I have since changed the way that I understand the word “conclusion” to be something that is without permanence. The reason that I have left this essay intact rather than reformulating it is that it shows the beginning of my journey and my thought processes that brought me to the understanding I have now. Further, writing across time for me is somewhat like painting across time. If we leave a painting the paint sets and it becomes difficult to remix the colours we are left only to paint over if we want to change our image. It is similar with writing. By the time I understood my errors in this piece it was too late to go back and change it. I was a different person and the text had different meaning.

The essay that follows locates where the journey of this thesis or literary anthology began. Part of understanding what I have done, here, is to watch the method in progress.
Foreword:

I write the words on this page with great care. "Be careful," they would tell me. "Take time to form your letters properly and watch your spelling." By now my dexterity and spelling have developed adequately and if they have not modern technology will help compensate for any such deficiency. Today my concern for care in my writing is not so much about pen—ship or accuracy in spelling but rather I take great care in choosing my words appropriately and in articulating as clearly as possible what I mean by these words. The reason? - Because I care so much about what I am going to tell you and these words are all that I seem to have to help me in my attempt to share my understanding with you.
Introduction and Problem Statement:

Last summer I worked vigorously in a “group-home” for developmentally challenged children and adults. They called me a “caregiver” but often I wasn’t. Before I go on, let me tell you that it matters greatly to me that everyone be cared for and about in the best way that they can be - whatever that means. Let me also tell you that this is not always possible with some of the ways that we currently have set up “caring” and so I feel that it is important to tell you what I learned this summer.

Sometimes being a “caregiver” or what I call a “careworker” can be as mentally and physically exhausting as it can be rewarding. In some ways, I gave my care everyday that I worked this summer but in other extremely important ways I did not. There were situations that I gave my care freely, and in others that I did not. As time went on I became less and less of a “caregiver” and more and more a “careworker.” In this sense, I did not solely give my care, I in fact, and on many occasions, sold it. I want to tell you that I have learned that when caring interaction exists under some circumstances like the ones that I will outline in this essay, there are some very serious social implications. We must work carefully to reorganize some caring interactions as they are exchanged today.

During those weeks and thereafter I have thought a great deal about the social phenomena we call “care.” My reflexive and critical thought has brought me to the question that I am about to pose. How might the social structures of modernity and the agency of social actors influence the “recursivity” (Giddens 1979) and “reflexivity” (Giddens 1990) in caring personal interaction within a modern society? In one part of this question I mean to ask how social structures and combinations of social circumstances in some ways precondition the social setting.
in which the social actor is acting and therefore also influence the caring exchange itself. In the second, and equally, if not more important part of the question, I am asking a question about agency and to what extent the social actor is able to influence, construct, de-construct the social structures that he or she in some sense inherits in an attempt to also re-work this type of caring interaction.

a) Discussion of My Subjective Discursive Location

I will first reflect on my own position in and motivation for this deconstruction of "caring." The motivation to engage in an exploration of "caring" grew obviously as I have outlined it from a subjective experience as a "socialist-feminist-woman" of working as a "careworker" and is admittedly somewhat self-indulgent. My discursive location will bias my analysis of care as I will outline it at the same time as it will enrich it with personal and subjective experience. My aim is not so much to articulate what all women experience when caring merely to use my own subjective experience of caring interaction as an example of how modernity can shape the experience and meanings of caring interactions. Further, it is not my aim to set forth a "Grand Theory" explaining the Truth about care and how to do care but to explain my own dissatisfaction with the experiences of interactions that I have shared with others while caring for a wage in a sometimes capitalist, patriarchal, modern "technocracy." This is for me an exercise in reflexive thinking. Moreover, I encourage the reader to engage a deconstruction and de-centering of "care" and also my interpretation of it as he/she understands

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1Part of the "Problem Statement," the entire "Hypothesis" and "Discussion of My Subjective Discursive Location," and Theoretical Outline" and the "Concepts" are also used as part of an assignment entitled "Thesis Proposal" submitted to Dr. J. DeVries on December 18th, 1998 for Logic of The Research Process - 53.585. The reason for this is that the present essay is intended to be later used as the theoretical chapter or component for the Master's Thesis that I will write as Dr. J. DeVries suggested to do to his 53.589 class Fall Term 1998. I have also made this duplication explicitly clear in the second essay. Further, I will hand both essays in to both Professors.
Hypothesis:

The organization of structured care in modern society is greatly influenced by systems of modernity. Some of these systems might be: 1) language used to discuss and understand “care;” 2) capitalist systems that encourage the exchange of care for a wage; 3) patriarchal systems that socialize women into and men away from “caring” roles described as naturally feminine; and 4) “scientism” and the specialization of knowledge and techniques that make caring a technique and push it into the public sphere. These structures influence the social organization of “care” and “caring” interactions and possibly they encourage a breakdown in caring interactions. By this I mean that the structures encourage a disconnection or an asymmetry between caring actions and caring emotions. Similarly to the way that Karl Marx (1992?) suggested that labour is alienated from the worker, I am suggesting that “care” can also be alienated from the “caregiver” and especially the “careworker,” and that this is an extremely serious consequence of modernity. Most importantly, social actors need to realize their own impact on and agency surrounding changes the direction of this breakdown intimate in interaction through their own discourse and practices.

Theoretical Outline

I will begin this exploration of the social phenomena of “caring” with a discussion of related terms. These are not to be taken as fixed definitions but rather outlines of the terms as I will use them here. I will deconstruct the concepts that are often used surrounding care. I will
then discuss these concepts by borrowing from the works of Louis Althusser, Ferdinand de Saussure, as discussed by Butler (1997) and Purvis and Hunt (1993). From there I will examine modern socialization practices by discussing theories of socialization and feminist debates surrounding essentialism and difference as outlined by Gilligan (1982) and critiqued by Julia Wood (1994, 1997). The work of Karl Marx (1992?), specifically that pertaining to alienated labour will be used to discuss what I will call the “ commodification of care” and “ alienated care.” I will use Neil Postman’s (1994) discussions of “scientism,” “technocracies” and “technopoles” in light of what I think might be happening to some types of caring interactions. I will at the same time examine the concepts of power, structure and agency and resistance by using the work of Michel Foucault (1972-1977), Paulo Freire (1996), Anthony Giddens (1979) and Neil Postman (1994).

**Discussion of Terms Surrounding “Care”:**

Hillary Graham (1986:13-15) explains that the word “care” may have a duality in meaning. In one sense it may refer to a psychological or emotional feeling or state about others or things. While in another sense it may refer to a type of action or work that one does to help other in need of assistance. In some cases we are able to distinguish between the two meanings when they are used with more language for example “caring about” or “caring for.”

“Caring about” someone refers most often to the psychological or emotional feeling or state mentioned above. In the proposed work I will use the term “caring about” to refer to this feeling or emotion that one has as a result of a caring interaction. “Caring for” can refer to
action or work. I will add that this delineation is not as neat as Graham has proposed in that often “caring for” can refer to emotion exclusively or emotion and action at once. In this essay, I will use the term caring caring for as actions found within an interaction involving care. When I mean to refer to the two occurring simultaneously, I will use caring for and about.

As I will outline it, a “caregiver” is a man or woman who is understood as someone who gives caring interactions within usually a more but sometimes less privatized sphere. This care may be in the form of “caring for” or “caring about” or both at the same time. Sometimes in popular language “caregiver” can signify a paid employee within the private home. Further, it might be simplistic to think that many people, if any, act as altruistic “givers of care” without being a recipient of some kind of care.

A “careworker” is a man or woman who is paid for the care that they produce in the public sphere. This care must be in the form of “caring for” but may or may not exist in the sense of “caring for” or may be at a different level of “caring for.” The care worker will most likely be employed to act as the caregiver. Although this person may not “care about” the client in anyway, they will have to “care for” the client in order to keep their employment.

“Alienated Care” is care where there is a separation between the actions and feelings of care. It is care one produces for another who owns it because he/she/they have paid for it. This care is alienated care for both the care provider and care recipient.
Discussion

A) Caring Words

Here I will argue that the language of care itself poses both a structure that limits and controls how care at work is experienced as well as it being a site for agency. Chris Weedon outlines Ferdinand de Saussure’s theory of the “sign” by first explaining that “each sign is made up of a signifier (a sound or written image) and a signified (meaning)” (Weedon 1987:23).

Weedon further explains that the two, the signifier and the signified are related to one another only arbitrarily. Erich Fromm explains how a similar concept of language can produce alienation when what is being said (similar to de Saussure’s signifier) is not the same as what is being felt (similar to the de Saussure’s concept of signified). Consider his example:

If I express a feeling with a word, let us say, if I say “I love you” the word is meant to be an indication of the reality which exists within myself, the power of my loving. The word “love” is meant to be a symbol of the fact love, but as soon as it is spoken it tends to assume a life of its own, it becomes a reality. I am under illusion that the saying of the word is the equivalent of the experience, and soon I say the word and feel nothing except the thought of love which the word expresses (Fromm 1992:45).

Similarly, I would suggest that the term “caregiver” is somewhat arbitrarily attached to and not necessarily the “equivalent of the experience” of being in such a subject position.

Purvis and Hunt review Althusser’s concept of “interpellation.” They describe the phenomenon as “the mechanism through which ideology constitutes people as subjects (subjectivity + subjection).” This is the process through which we are hailed and respond to the hailing of subject position. They go on to suggest that it may not be the “hailing” by the powerful other that is as important as the recognition of the hailing because recognition signifies the duality of the process (Purvis and Hunt 1993:482). I agree with this suggestion as
it can be followed through with the example of the caregiver. It is no so much that the caregiver is called a caregiver (although that is important too as I will show) but that responding to it and identifying with the interpellation can be. The problem that I am trying to articulate is that while the signifier and/or the interpellation “caregiver” implies the signified identity of someone who gives freely of their care this is not always the case. Further some people that are signified or interpellated as caregivers may be more like “caresellers” or “careworkers” or not even caring for that matter yet still identify themselves as caregivers. This is more than just a “false consciousness” it is the social creation of a lived discursive reality and is in that sense perhaps not a false but a relative consciousness. A re-reading of Althusser, as suggested by Purvis and Hunt (1993: 483) and made possible by Stuart Hall (1983:64), may indicate the great influence of discourse on the constitution of social subjects.

Judith Butler as well examines the work of Althusser. She writes, “The act of recognition becomes an act of constitution: the address animates the subject into existence.” More explicitly, she writes, “the subject does not, strictly speaking, pre-exist the call” (Butler 1997:25). Here we see the importance of the “hailing.” Without it, the subject has nothing to respond to or to identify with and, in a sense, as Butler explains, the subject does not even exist. The language limits the subject position in that one can be a “caregiver” or a “developmental service worker” but not necessarily “careworker” until they are interpellated as such. However, we need to still keep in mind that being called a “careworker” might not exactly represent what I attempt to mean by it and herein lies the complications, constraints and contradictions of modern language.

Neil Postman writes: “Language itself is a kind of technique ... an invisible technology
with language” and with it “we can achieve humanity or inhumanity.” Postman further questions and warns that language has its own agenda (Postman 1993:142,124). Here Postman is outlining the structure of modern language as it exerts its force unto the subject position. Postman articulates the question with precision: “The question with language, as with any other technique or machine, is and always has been, Who is to be the master? Will we control it or will it control us?” This is where I begin to see the possibility for agency. If there is a potential for mastery over language, it is not through technique as Postman goes on to argue. I do not think that there we can gain mastery over the language. We can work within its constraints question and de-construct the constraints but to some extent the structure will still be at play.

Foucault (1972-1977) discusses power as being relational. It is not something that one can own as a commodity. In this sense, power is not a finite resource as it moves through the individual and can be created by the individual. Foucault writes “the individual which power has constituted is at the same time its vehicle.” Here I can see how language has the power to influence “care” as I wrote above, but, also I have a certain power in that I am the vehicle for language.

This is why I choose my words so carefully. I want to create a knowledge of “care at work” albeit constrained. Perhaps the term careworker is most suiting but my reflexive thinking has made me want to be called a “caresharer.” Not only do I want to be called the caresharer, I want to experience caresharing something that I do not think is available in the concept of “care at work.” I call agents to act reflexively within the recursive shaping and re-shaping of social language.
B) Socialization Into Patriarchal Structures

As discussed by Julia T. Wood, gender patterns are to a great extent learned behaviours. She uses a social learning theory developed by W. Wichel to support this claim. This theory suggests that children learn gender through the observations of gendered communication between their parents, peers and other adults (Wood, 1997:55). Here we see how the child is somewhat passive in that the gender behaviour is something that pre-exists the child and the child imitates this pre-existing structure of gender. In imitation the child reproduces the gender norms. As Wood outlines George Herbert Mead’s conception of “symbolic interactionism” she shows how the gendered identity is created through communication. Here we see how, especially through language, we negotiate our gender identity. She goes on to cite examples such as mothers telling daughters that they are “Mommy’s helper in the kitchen,” and “You’re such a strong little man.” These she explain become internalized so that the message acquired by the child is the continuation of the norm and is shown through statements as she cites, “You can’t boss me around. You’re just a girl” (Wood 1997:60-61).

This socialization into feminine and masculine roles is an important key in the discussion of oppression as it relates to encouraging or discouraging a connectedness in caring feeling and caring actions. I am suggesting that being pushed into the “caregiver” or even the “careworker” role is one that is alienating for many women because it imposes limitation on their identity. I disagree with Gilligan when she states:

“Women’s difference is rooted not only in their social subordination but also in the substance of their moral concern... Women’s moral weakness manifest in an apparent diffusion and confusion of judgment is thus inseparable from women’s moral strength, an overriding concern with relationships and responsibility, (Gilligan 1982:16-17).
This statement borders essentialism closely and is a dangerous position to take on because it presumes that all women (as there is no distinction made) have “an overriding concern with relationships and responsibilities” (Wood, 1994:80). Gilligan is suggesting that we celebrate the difference of femininity and the “moral ethic” that it brings with it. I on the other hand, am weary of this as is Julia Wood (1994:74-45, 87). My view is that there are desirable characteristics of both the masculine and feminine conceptions of gender. We need not glorify caring as feminine and appropriated as something women are skilled at because this I think alienates women who do not care or who do not want to care. As well, it ignores that men can and do out of care when given the opportunity and not silenced (Braudy Harris et al, 1997:2). Gilligan’s argument may be a step in the wrong direction because it does not propose caring as something we can share but rather something that women can and therefore should do out of some moral obligation.

If both men and women are socialized into oppression by the structures and norms of patriarchy being embedded into the socialization practices surrounding care, what are we to do? I will now borrow from the words of Paulo Freire:

How can the oppressed as divided unauthentic beings, participate in developing the pedagogy of their liberation? Only as they discover themselves to “hosts” of the oppressor can they contribute to the midwifery of their liberation. As long as they live in duality in which to be is to be like, and to be like is to be like the oppressor, this contribution is impossible (Freire, 1996:31).

We must understand that we are the “hosts” of these socialization practices as much as they are our oppressors. Reflexive thought that leads to an understanding of how we are both structured and create the structure is important in the struggle to re-connect the disconnected actions and
emotions of caring. Men and women must work together in creating the new pedagogy of care.

C) Caring for a Wage

What happens to care interaction when it becomes a commodity as it has in modern society? Marx proposed an analysis of labour in capitalist society. When a wage is paid for labour it becomes “alienated labour” What happens when this labour that is paid for is a caring interaction? An extremely pervasive form of alienation is formed. Similarly to Marx’s concept of “Alienated Labour” I would like to introduce the concept of “Alienated Care.” Marx’s explores alienation in different forms. As a worker, the careworker may experience alienation similarly to the way that Marx explains it but also as I will apply his understanding to the concepts of care and the careworker. In the first case he writes that alienation occurs from: “1) the relationship of the worker to the product of labour as an alien object which dominates him.” Consider labour where caring interaction is the product that becomes alienated from the worker. This is a caring interaction whereby the care does not belong to at least one of the members participating. Perhaps that’s why they are called the “caregiver” they are not in a position to receive the same amount of care or even any care sometimes.

Marx’s second remark, “2) the relationship of labor to the act of production within labor.” This is where workers are alienated from their own activity because it is owned by another and this is true for the careworker as well. Applied to labour as care we again see a frightening alienation. This is where the “careworker” must distance themselves and their care from the work that they are doing - the caring actions. When participating in the “mass production of care” it may not be advisable to get emotionally attached to each client because: a)
there is no time for such an attachment because there are so many others to care for, b) the 
worker must keep a professional relationship according to the protocol of how to do care at 
work, c) the client will shortly be leaving in many cases and they will have to stop caring 
abruptly and watch another, perhaps a parent take over the caring role. The paradox is that if the 
worker does get attached to the clients they may have enormous stress and possibly be alienated 
but if they do not they may be alienated anyway. This practice encourages a disconnection 
between what the worker is feeling (ie sometimes they want to care more, sometimes they need 
to care less, sometimes they do not care at all) and their working actions (regardless of what they 
feel they must act as a care worker) Here care is no longer “self-directed”

Marx’s third comment is the following: “alienated labour turns the species of life of man, 
and also nature as his mental species-property, into an alien being and into a means for his 
individual existence. It alienates from man his own body, external nature, his mental like and 
his human life.” When this statement is applied to the carelabourer we see how working as a 
careworker and producing care solely for the purposes of his or her own individual existence we 
can see how the careworker might be alienated from his or her own humanity. This is because 
the careworker’s labour and care is not directed at the human species as a whole. It is in this 
sense selfish. However, if we consider that the caregiver may be socialized into this position as 
was considered above we may see how it an oppressive demand to place on the subject. In this 
sens, it is somewhat altruistic. Such a contradiction, could produce alienation in and of itself.

The fourth consequence as articulated by Marx: “A direct consequence of the alienation 
of man from the product of his labor, from his life activity and from his species life is that man 
is alienated from other men.” This is especially a relevant statement when the product of labour
is a caring interaction because the interaction itself alienates the participants rather than producing an interconnectedness. Perhaps in a subsequent paper I will examine alienation between members of the society when the product of labour is “Man” as is the case of Mothers.

Caring that is based on intimacy and mutual reciprocity rather than dominance, control and alienation is an interaction that does not alienate the humanity of either the recipient or giver of care. This is because the caring interaction is shared, roles are exchanged and care is mutually beneficial.

Giddens explains that in the analysis of the production of meaning in interaction, context cannot be treated as merely the “environment” or “background” of the use of language. In this sense, a modern, patriarchal and capitalist context will shape the language and meaning in interaction. For example the caregiver is not recognized as a worker in the language because it serves the purpose of those structures (1979:83). Giddens further writes: “Institutions do indeed “result” from human agency: but they are the outcome of action only in so far as they are also involved recursively as the medium of its production.” Applied to “care at work” I think that this would suggest that care that exists within a capitalist institution is created by the actions of the agents. However, the actions of the agents are at the same time limited and constituted by the capitalist institution. Here we see the duality that Giddens refers to (1979:95). In this sense, I think that care that occurs in the workplace is to some extend bound to creating alienation. However I can also see how reflexive thinking and behaviour on the part of the actors can slowly shift the direction of the recursive mode of production.

D) Modern Science and Caring Techniques

Neil Postman discusses social transformation in American culture by describing with
great warning the direction of social change from a society that once used tools and looked to
religion for Truths to a technocracy. A technocracy is a society whereby members place their
faith in science and develop techniques with which to use the new technology is one that
requires members to think with reflection and act with "loving resistance." Most importantly, he
cautions the reader against scientism (a strong faith in science directed positivistic science as
applied to the social science). He cautions sociologists against attempting to produce "Truths"
about the human interactions (Postman, 1993).

Postman introduces a concept of Technopoly that I wish to apply to the concept of "care
at work." Postman writes "New technologies alter the structure of our interests: the things we
think about. They alter the character of symbols: the things we think with. And they alter the
nature of community: the arena in which thoughts are developed. This is a phenomenon that
American society is barely aware of and Postman calls it Technopoly (Postman, 1993:20). It is
further described throughout the book as specialized knowledge that becomes "owned" by certain
few privileged groups. We can see this happening with "care at work" and this is in line with
Postman's discussion of Medical Technology. "Care at work" is learned almost as a form of
"recipe knowledge" there are sets of procedures to follow in order to know how to "care at
work" and they are produced and dictated by "experts." Part of my own training for my student
position consisted of reading policy and procedure manuals explaining how to care in an
adequate and proper fashion. In this sense, "care at work" is not necessarily something that
worker develops it comes in the form of prepackaged knowledge symbolized in operational
manuals and textbook. These alter "the arena in which thoughts are developed" because they
can discourage the worker from thinking through and developing their own understanding

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instead of simply taking in the information proposed by experts who are often all too convinced they know the best way to do "care at work" when this is not necessarily part of their work.

Postman suggests that we be "Loving Resistance Fighters" (Postman, 1993:183-184) By this, he asks us to resist Technopoly. This is not to say that we should reject all forms of technology because it is not a suggestion that technology itself is inherently "bad." Some of his suggestions apply directly to "care at work." If what we want is connection between the feelings and actions of care perhaps we might follow his suggestion (note the difference between expert knowledge and a suggestion). Postman suggests that we might "refuse to accept efficiency as the pre-eminent goal of human relations and to admire technological ingenuity but not (to) think that it represents the highest form of achievement." I certainly question the impact of technology in re-producing "care at work" and along with the creation of techniques for the efficiency of "care at work." I and perhaps Postman, I think, would agree that questioning and reflexive thinking are the beginning site of our agency. Perhaps by doing this, we may begin to conceptualize a "care" that is neither oppressive nor disconnected in its feelings and actions.

Conclusion:

I have shown by means of this essay that the theoretical treatment that language, socialization into patriarchy, participation in capitalism, and technology have served to create on many levels an alienation of the caring interaction that is carried out in the work setting. However, what is most significant is our realization that we are limited by but not doomed to the current structures hand to us. In this sense, I might suggest that although our modern structures
have the potential to influence our caring interactions and create an alienating disconnection between actions and feelings of care, we are not as powerless as we may sometimes think of ourselves as being. We need to think of this power more in relational terms as does Foucault (1972). In this sense I have shown that we have the power to react reflexively to recursive structure formation. Here we have seen that we can have an impact on the structure. While keeping in mind that language is a structure as discussed earlier it may be one of our most important “vehicles” of power. And this is where I will tell you that I have learned that I wish to someday be what I have called the “caresharer” and that although this may be an extremely difficult hurdle due to structure it is something I will strive for through language, deconstruction, and reflexive thinking and acting.
Chapter IV

Hail Mary... A Feminist Understanding of the Relationships between Corporeality and Motherly Self Concepts in a Highly Modern Society
Between the Lines:

While there may have been some problems with this last essay, it did mark a starting point for a strong theoretical understanding of my everyday experience. In the chapters to come, we will see a shift in my writing as I follow Richardson's (1997) advice to take risks. In these Chapters I cease trying to prove and rather, I explore and explain my reality and our shared reality. I will refer back to “Caring for a Wage” in later chapters as I round out my understanding for structuration and begin to more fully understand the difference between systems and structures of modernity in Giddens terms.

This next chapter, was written with the aim of locating my self in caring modern relations. It is about a recognition that it is not only between selves but within selves that modernity permeates and fractures our identity. It is also about how far we can stretch the borders of our identity without causing them to snap. Looking back on the time when I wrote this chapter it was clearly a time when I was looking for a common identity in a place where my difference seemed overwhelming. It was not so much that I was different it was that I lacked solidarity between my classmates and myself and I had grown accustomed to thinking of my undergraduate classmates and professors as close friends who became closer in our study of intimacy. Although I didn’t write it up as such this next chapter is as I look back, in a sense, the mourning of the loss of an academic family that will never be again.
Introductory Problem Statement:

Feminism has taught us that the story both begins
and ends with bodies.

(Arthur Frank, 1991:42)

In contemporary social thought, theorists increasingly seem to be putting the analysis of
the body and the self to the forefront of theoretical inquiry. At the culmination of our modern
epistemology and ontological understandings there appears to be a quest for individuation, and
the concept of ownership over our “different” physical and social bodies. This quest, as I
understand it marks an attempt to distance the self from the body, as well as, the notion of
collective experience. It is this abstraction of the self from both the physical body and the
collective experience that I have recently taken to being concerned with. The following essay is
a feminist study of ontological and epistemological understandings of the body and self as they
are construed as separate in a highly modern western society. Similar to Bryan Turner (1996:37-
43), I am departing on this theoretical and exploratory journey with general questions such as:
What is the body? And, what is the self’s relationship to its physical embodiment? With these
questions in mind, I will turn to further questions that relate more directly to my current research
of the “concept and structure of care” in highly modern society. Undoubtedly, at least one of
these questions will seem somewhat odd at first, but the significance of such pondering will
hopefully make more sense as this social story unfolds. I will now present you with the
questions. They are as follows: 1) What is the social significance of the “belly button?” I start
here because the navel represents the initial symbolic break between self and other it is at once
symbolic of our human tie and our break from one self to the next. 2) How do I use my self to
care for others while receiving a wage in a highly modern society? In their exploration, these two questions along with the more general questions posed above should meld together to ask this layered question: Whether they exist as a common entity or not, why wouldn’t or shouldn’t I want to, or even need to, think of my feminized female self and body as separate entities and appropriate this separation as my everyday reality? I will warn you now. I promise no concrete or True answers, just a theoretical “joy ride,” and an elaboration of my discursively located speculation. Follow me, if you would like to.

Working Hypothesis:

After deconstructing my own understanding of the self, I have come to accept a postmodern understanding of the concept. Where once I held the notion of stitching my true self onto my physical being,¹ I now hold a more useful and complex, even contradictory understanding. As Turner explains in his introductions, (1996) the body/mind dichotomy represents a historically skewed version of the self rooted in patriarchy and capitalism, and scientism, (Fox Keller & Gronkowski, 1996; Postman, 1993:147). It is by my comprehension, not a wonder that the social actors of modernity have had to and chosen to cling to this concept and taken it for granted as their everyday reality. However, my present understanding of the self is as both fluid and fractured,² at once both contradictory and paradoxical and yet it seems

¹ This is a concept of stitching the self unto the body much the same way that Wendy stitched Peter Pan’s shadow to his foot

² Take into account the meaning of the word fractured. I mean to imply that the self is fractured, not split and broken apart never to be reassembled together again.
liberating. The process of self formation is, as I will explain, a continuous and violent negotiation. We must, remember, that this new understanding is also rooted in an epistemology and ontology and by virtue of this will be subject to limitations as was the mind/body dichotomy.

Discussion of My Subjective Discursive Location

I will first reflect on my own position in and motivation for this exploration of the concept of self. The motivation to engage in an exploration of the "self" grew from my own experience of negotiating my own caring identity in relation to the feminized concept of motherhood. My discursive location will bias my analysis of the caring self, as I will outline it, at the same time as it will enrich the analysis with personal and subjective experience. My aim is not so much to articulate what all women experience when negotiating a caring self (if they experience it at all), but merely to use my own subjective experience of caring interaction as an example of how modernity can shape the experience and meanings of the caring self. Further, it is not my aim to set forth a "Grand Theory" explaining the Truth about how we come to care but rather it is to explain my own process of negotiating a caring self identity in a sometimes capitalist, patriarchal, modern "technocracy." This is for me an exercise in reflexive thinking. Moreover, I encourage the reader to engage in the deconstruction and de-centering of "the caring self" and also my interpretation of it as he/she understands it. In my final deconstruction of my own interpretation, I have found that my primary socialization into Catholicism and my later

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This section is based on my subjective and discursive location as articulated in an earlier paper about the "concept of care at work." The reason that I have not changed it is because it is no so much my location that has changed but rather it is the subject matter that is different.
socialization into feminism has greatly impacted my understandings of the caring self⁴.

**Direction and method:**

This paper will serve as reflexive exploration of my own current understanding of corporeality and emerges from a suggestion by Andrea Doucet (1998) that we might link "methodology, ontology, theory and personal biographies" especially in the study of "care."⁵ In this piece of work, my methodology lies in my attempt to link my own personal biography, through critical thinking and social and philosophical theory to my understanding of the ontology of the "caring self." I justify this method of "knowing through experience" much the same way that Liz Stanley (1994) does. I think that our ontological understandings can be retrieved from reflecting about our body processes, as we experience them.

For example, Stanley writes "Mum died...I caught her last breath & opened the window to let it go" (Stanley 1994:146) And, Andrea Doucet writes referring to her children while she wrote her doctoral thesis "...although the Cambridge University Library does not allow entry to children, they were often found there" (Doucet 1998:56-57) From these conveyed experiences, I

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⁴ This paper was not written from beginning to end but rather I skipped throughout it readjusting my points as my location shifted in relation to the subject matter. It may or may not be apparent to the reader but the revisions made to the paper seem to me, as I reread, to have distinct even contradictory tones. I read this phenomenon as the "hodgepodge" of my postmodern caring self.

⁵ In the case of the present piece of work, my theoretical understanding had to be further adjusted in light of the experience of the death of my grandfather, as the ontology of my self and his were called into question in a most immediate sense. I revisited the ideals of the Church while listening to my family in prayer. I realized that they were equipped with something that feminism had stripped me of. That is, a faith in life everlasting.
understand that they too have found it necessary at times to hold an ontology of the self in which
the self is separate from the body in at least a metaphorical sense. It is in the reflexive analysis
of the experiences that the biography moves from mere journalistic reporting and into legitimate,
critical and theoretical writing about the social experience.

The purpose of this exploration is to articulate my theoretical understanding and to build
a "contingent foundation" (Butler 1994) explaining how I use my "self" to care for other
"selves." As Butler explains it, political agency becomes increasingly unthinkable without at
least temporary conceptual foundation. In other words, without some sort of contingent
foundation, it might be difficult to make the claim that concepts of "caring selves" are
historically, politically and socially located and that by virtue of this location, women are
oppressed as "caring selves." This foundation's existence remains only in so far as its existence
is contingent upon its own re-evaluation through reflexive thinking. Here, I am struggling for a
postmodern concept of "the caring self" in high modernity and this will be used as a building
block for a thesis on the concept of "care at work."

Paper Outline:

I will begin with a feminist extension of a "misreading" of the "belly button" that was
told by Dr. Michael Lustigman in his 1994-1995 Dialectical Reasoning class. My understanding
of the "misread" is based on Julia Emberly's "How to 'Misread' Fashion." I will explore the
concept that selves can be consumed by the self and by other selves and that the

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6 I haven't clearly articulated the pages for this piece because the copy I am
working with seems scattered.
commodification of the consumption of selves breeds not only inequality and is detrimental to any project of intimacy but also alters ontological understandings of the self. I will ground this understanding in Featherstone’s (1982) “The Body in Consumer Society.”

My conception of my self is one that exists within the context of a particular historical philosophy and a realm of socio-politics (Weeks 1981, Millet 1990, Irigaray 1993, Fox Keller & Gronkowski 1996). This idea is also an extension of the idea that if sexualities have a history (Foucault 1978) then our concepts of our selves probably also have a historically specific context as well. I am working through an understanding of my self (physical or otherwise) as existing relationally (Stanley 1994) and, communally much in the same way that Foucault (1972-1970) thinks of power as relational and as Hankinson Nelson (1993) thinks of knowledge as communal. To use Giddens’ (1991) concept of “dis-embedding,” the self in high modernity (and other societies) can be dis-embedded and re-embedded across time and space. My self is constructed in language and discourse (Weedon, 1997, Butler 1997). Further, my postmodern thinking (based on Harvey’s (1988) elaboration of postmodernity) of my highly modern selves, brings me to understand that these selves swing, shift and oscillate in multiplicity, paradox and constant contradiction as based on Wilden’s (1986) concept of ideology. As I introduce the notion of the fluid caring self I am going to argue against the concept that I can, do, and/or even should own my selves and especially that I should never own other selves because our selves in some sense belong to nature (Wilson 1991) and the society at large. I think, as I will explain, this is where the paradoxical tension exists.
The Social Significance of The Belly Button:

Let us begin this story with the body. The “bellybutton” as “mis-read” by Lustigman, (1994-1995) exists as a stamp of humanity. It is in a sense a marking that proves our physical ties and symbolizes our social ties to others. My feminist extension of this “misread” is that it is important, but not enough, to say that we are tied physically and socially to each other. I say this because although we are all tied to each other we are not all tied to each other in the same way, not physically and certainly not socially. It is women, not men, that we are tied to physically by means of an umbilical cord. Notice here how the self is being constructed as both common and individual at once. We all bear the stamp of humanity, but we are not all able to pass it on, at least not in the most direct sense of being physically tied to another. We are all born of mothers, but we are not all born to be mothers. And, if we push our thinking a little further, none of us are even born of mothers, we are born of female bodies. It is a mistake to assume as I have above that we are necessarily born of a mother for the concept of “mother” exists as a social identity, not a biological given in the way that the ability or inability to pass on the stamp is. Moreover, it is again a mistake to assume that all those who possess the potential to pass on the “belly button” possess the potential and/or the will to bear others care to do “care work.” Perhaps, those who cannot pass on the stamp of life may wish to be mothers of some sort. The point is that whilst caring selves are socially constructed as gendered (Gilligan, 1986), they should not be\(^7\). I say this because it shapes the labour of the caring self into something that women can do better than men because of their femininity. This is limiting, for men and women alike, who do not fit the identity of the caring self. From my own perspective this is where the

\(^7\) This point probably will not sit so easily with my concluding statement.
problematics of the self formation begin to germinate.

Historically, self-identities have been ascribed to bodies. I will use the maternal identity to illustrate the point. The title Mother and a caring identity have long been ascribed to many females to the point that motherhood has become an institution upheld by patriarchal economic and social relations (Andersen, 1993:159). Here is the problem: the self is not solely ascribed it is negotiated. In saying this, I reserve an important place for choice, agency, and resistance to the structured institution of motherhood. If we take Althusser's concept of interpellation, as described by Butler (1997:25), we know that there is a “hailing” whereby the actor is called say “Mother.” The agent must engage in some sort of recognition of the “hailing” “Mother.” With this understanding of interpellation in mind, one is not a “mother” simply by virtue of being hailed as one. In other words, the requirements of the identity are twofold: 1) the call or “hailing;” and 2) the recognition of the call. Likewise is true for the one who is paid to care. The concept of care has many levels. He or she is not a someone who cares on all possible levels by virtue of being called a caregiver or a careworker and by being paid to do so. This point is made clear by Clare Ungerson “caring for someone, in the sense of servicing their needs, may have little or nothing to do with caring about someone” (Ungerson: 1986).

Sometimes, we may refute the hailing, other times we take on the hailing, still other times we may negotiate the “hailing.” We may twist it around to our liking and throw it back in the face of society. In this sense, the self is relational much in the same way that Foucault refers to power. Identity, like power is not something that we own nor is it established in a finite sense. We do not own ourselves, but neither do “they.” Together we and they negotiate our selves.
While conservative Catholic ideology may have "hailed" my female body to be motherly, through feminism I have grasped the "hailing." I have twisted it around and I have thrown it back at the Church declaring, "Not me, not now, not on His terms, not as something that will only exist as less than the "Immaculate Conception."" Once again I am hailed, this time a "sinner." "Hail Mary, Mother..." I scream in silence. "Leave me the fuck alone." Notice the violence in the negotiation? As I will next explain, the bind worsens because we do not always hold the luxury of refuting our ascribed identity in the way that we might want to because selves and identities are formed not only historically, but also, politically.

**Escaping the Limitations of The Social Body:**

The self negotiation process that I described above is itself being pulled into question. It is a product of an ontological understanding of the self as relational much the same way that Foucault explains power (1970-1972). We cannot hold the self or even pinpoint its exact location physically, theoretically, or otherwise. It is sort of free floating across time and space. Because I have called the self formation process "relational" there are further elaborations that I must make. It is time to incorporate the notion of "recursivity"(Giddens, 1979) and the impact of political circumstances (Weeks, 1981; Graham, 1986). We do not have free reign over the self that we may try to formulate.

I earlier introduced the notion of choice. However, choosing the self does not exist without restriction or governance. We, in a sense, inherit a set of identity choices and while we may invent new choices, living these choices may or may not be more advantageous. Notice
here that in inheriting the choices the concept of choice is drastically altered. In this way, caring becomes less and less a choice for women as it is: "recast not simply as the setting for group consumption within capitalist societies but as the locus of gender struggle (Harman as cited by Graham, 1986:24). This set up of care creates the consumption and production of gendered selves. Drawing on Chodorow this time, Graham further writes that women through their work recreate gendered caring systems through their socialization of children. We tend to treat the public sphere as the arena of work and production and the private sphere as the arena of consumption and leisure. A closer analysis of private care shows the existence of both consumption and production, and work and leisure. Featherstone (1991:172), writes "Mass consumption has been referred to as the necessary other of mass production." Why then, I ask, did social theorists ignore the free and mass consumption of women's care? Foucault locates this production consumption process even more locally by pinpointing to women's wombs that produce and consume actively and avidly (1986:126-128). It is clever but yet I am weary of using biology to illustrate a set of social processes. However, our interpretation of the biological is indeed reflective of the social.

Using the above theoretical backdrop and my experience of Catholicism, I will illustrate the negotiation. I am my body (female) and I, what the collective (the Church) says about my body (the motherly or sisterly identity). I may choose one of the two identities. Should I chose to transgress, I run the risk of being called a deviant, a "sinner" and living the sanctions that come with this label. For many European women who were healers, wise women and midwives or independent of men in anyway during the period of Inquisition transgressing the appropriate self identity was a fatal choice. Deviance from the feminine identities that the Church had
constructed and offered, meant being called witches and the sanction was that they were to be burned at the stake (Andersen, 1993:218-219). Today, I enjoy the luxury of a wider array of choices yet these choices are still governed.

I have always known that my self has limitations and I have tried to stretch them as need be. Here is where I understand the self to be pliable, plastic and elastic. It would seem to me that there have been legitimate reasons or sets of circumstances for which I would have wanted to effectively dislocate a concept of my self from this cage I often refer to as the female body. Here is where I understand the self to be fractured.

As a child, I attended a grade school called “Immaculé Conception.” For the longest time I was ignorant as to exactly what those words meant. My mother’s house was immaculate; I thought it had something to do with the cleanliness of the school. I can recall the later explanation. Mary was hailed² by God. She was to be the Mother of His Son. And so, between Mary’s love for and devotion to her God and His divine power the Holy Spirit entered Mary’s body the Son of God was immaculately conceived (cleanly and without sin). There are three bible stories (other than the birth and death of Christ) that I remember most. This one about Mary and another one was when disobedient Eve (who was made from a spare rib, Adam’s at that) ate the forbidden fruit forever casting a curse of sinful mere mortal-bearing on all of womankind. The other was the story of a prostitute that the community stoned. Mary was the only woman to be held in high esteem; She was Mother of God. I received low grades in my Catechism classes because I refused to draw pictures of bible stories. Was I really to draw the self hatred that they were imposing?³

They were offering self hatred as one of their choice self identities. It was self hatred

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² They probably didn’t use the word “hail” in the Althusserian sense, especially since I learned the Catholic religion in French. However, I think the concept fits what they meant in their explanation.

³ I haven’t cited these Bible stories, I have referred to them from memory as I was taught them.
based on a physicality, a corporeality that was not a choice but a given\textsuperscript{10}. This body did not seem as pliable, plastic, elastic as I needed it to be, at least not at first. I was to be cursed with blood and painful child labour because she who had not a bellybutton\textsuperscript{11} apparently took her privileged freedom for granted. Eve’s attempt at re-negotiating the boundaries of the self imposed strict governance over the next generations of women. Not only would He and the Church watch us, we were to watch ourselves. We were best not to eat any “forbidden fruits” as Eve had\textsuperscript{12}.

It is here that I will begin a critique of Frank’s Typology of Body Use In Action (Frank 1991:54). It is quite a useful typology in the that it can be used to describe and explain a variety of body processes. However, it idealizes one type of body process over others. This one is the “communicative body process” and it is ideal even by Frank’s own standards in that it is not a body process type that can be easily or often empirically found. He sees it as an ideal that we as social actors should strive for whereby our selves will be in a state of social recognition.

The problem with his Typology is not that it is too complex as I first indicated in my retreat to the simple model of the body/mind dichotomy. Rather, further complexity can be added to the Typology. I am not doing this simply for the purpose of making it more complex

\begin{flushright}
\textsuperscript{10} In later revisions, I realized that I was also honoured by virtue of this corporeality. However, in my being honoured for existing as a woman who cares, men are not recognized for certain types of caring, particularly their efforts of motherly caring.

\textsuperscript{11} Adam and Eve are bellybuttonless as Dr. Lustigman explained it. For Eve this is by virtue of being the first woman and by virtue of being born of Adam’s spare rib and stuff. If we don’t need ribs from our new generations of Adams why do they still lack them? I know I’m being too literal here, it’s just an interesting thought.

\textsuperscript{12} Refer to Michel Foucault’s History of Sexuality for a more elaborate discussion of this process.
\end{flushright}
than it needs to be so that no one understands it. My reason is that Frank seems to think that this communicative body process type is somehow a better alternative to the other three. The promise of something better to strive for is not enough. The question to ask when proposing something better is not simply, “Is it better? But rather “For whom is it better?”

It is not earthshattering news that we do not live in consistently fair or just worlds. Our social spheres are not usually places where we can relish in the constant potential to take on this ideal “communicative body process.” I think that the “communicative body process” would have difficulty existing in a social sphere that didn’t host at least, mostly other “communicative body processes.” By my reading of Frank’s Typology, a society that was constructed by these types of selves might actually lack the necessary tension we need in defining our selves from others. I am not making an argument for oppression. Rather, I am arguing for social rifts. Butler, (1994) explains these rifts as “the underground, ground foundation” for critical, yet politically directed work.

Further and more importantly, it seems to me that Frank is calling his other modes of body process, “dysfunctional.” They may and/or may not be. They can be necessary and functional coping strategies at the same time as being damaging to the self and other selves. If social inequality continues to exist, as it has thus far, these less desirable, disassociated, predictable and monadic body processes will be required as exits. For example, take a hypothetical relational power struggle between the communicative and the dominating body processes. Should the dominating body process have and/or be able to generate more power

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13. This comment is written with reference to class discussion in 53.566 Fall Term 1998 instructed by Dr. Katharine Kelly at Carleton University in Ottawa, Ontario.
than the communicative, the communicative may be compelled to take on the dominating body process with force or it may retreat into the disciplined body process taking on regimentation. The point is that the reason that the communicative body process remains an ideal luxury is because we remain governed by others and by ourselves. Sometimes, our choice is almost no choice at all. Retreating to other modes of selfhood is, as I understand it, most often contingent and predictable at once. Take this option away and some of us may all have to exist in a state of conscious anguish.

Allow me to illustrate with two examples. There are two strategies that I have employed as means of escaping the cage. The first method was to tear my self from my body and to hide my self away within its corporal self. The next step in this process was to melt the body by allowing this corporal self to consume its self. The second was to move the self out of the body in an attempt to lose or deny the corporal experience of the cage. In the case of death, we often seek comfort in dislocating or disassociating our selves or others’ selves from the body. It is a harsh reality to think of one’s self as existing only with the body. These were both conscious attempts at dislocation of the mind and body. Both worked effectively for more or less short term relief. However, the self and body proved to be not so easily melded back together again.

My university career thus far, (the social experience of it as well as the academic) has been an attempt to make sense of my adolescent experience. I understand adolescence as a social time period of high self formation. My experience of it was that as children approach adulthood society, parents, friends, education systems, religious groups etc. try to make one last

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14 An understanding derived from Dr. Alan Hunt’s concept of “Governing Others Governing the Self.” I understand it to be similar to Anthony Giddens’ explanation of the duality of structure (1979:81).
and lasting imprint on the self. Although they would continue to be able to influence the self in adulthood because the self is continually negotiated, there seems to be a sense of urgency on the part of those who govern to produce "responsible" adults, whatever that means for the time. Meanwhile, the adolescent adopts, rejects, resists or re-formulates the self that "they" attempt to impose. In my case, they tried to stamp me with motherhood in the traditional nuclear family sense of the word. It worked but not exactly as they had expected or even hoped, not for most of us anyway. Lois McNay (1992:33) tells that:

Bartky is undoubtedly right to criticize Foucault for neglecting to consider in what distinct ways disciplinary techniques operate on the female body inscribing physical effects, such as restricted and hesitant body movements and posture that compound the secondary position or object status that dominant conceptions of femininity ascribe to women.

Allow me to illustrate this point through a description of our disciplinary regime as it relates to my self:

As I watched my friend's unwed and teenaged bellybuttons being pushed out by their growing stomachs, I watched my own bellybutton disappear into my concave abdomen. Their breasts grew larger and began to lactate while mine were never given the chance to grow. They passed on bellybuttons while I attempted to reverse the curse: I tried to reverse His wrath. Like my friends, I always had a boyfriend but I never brought any of them home and I made quite sure never to be alone with any of them. I had effectively imposed my own morally approved method of birth control. It was called anorexia and they say Holy women used do it.

Notice the impact of the resistance to the mothering discourse upon my corporeality. It was not nearly as simple as some people would have it. We do not just look at fashion magazines and think we are fat. In the next section I will turn to Bordo before examining the ontology of death.
The Postmodern Caring Self:

The body is more plastic than we often give it credit to be. Susan Bordo explains the process quite well in the last section of her piece about escaping the constraints of gender (1990). She also explains anorexia as an attempt to escape or take control over the institution of motherhood. What I am trying to get at with the above example is that the process that I undertook was more complicated than Frank explains it. Yes, I was exhibiting the disciplined body style that he describes, but his Typology does not fit the experience exactly because it sets up the self to exist in states of either/or and that has not been my experience. My anorectic self existed in all with all of these variables at once. Here we will have to take into account the ontology of the experience of a body and mind that on some level decided it was going to divorce itself. The body became predictable and the mind held forceful control over the body and this whole process was contingent on the social, political and historical position of my self within my society at large. See the problem? There was more than one self ascribed, rejected, taken on in relation to my one, human corporeality. I do not mean this in a psychological multiple personality sort of way. I mean to say that my self existed as a process of competing discourses. While the self can shift through these boxed types as Frank suggests (p.55). I think the self can also occupy more than one box at a time and that it is more than a matter of “flip points” as suggested by Frank. The battling out of who they want us to be and who we want to be does exist as the communicative only it is not nearly as friendly as Frank’s ideal communicative body style. The refusal of food was a metaphorical, ripping off of my
bellybutton. I was throwing my corporal humanity back at the long legacy of umbilical links that were the cursed bearers of my confining cage. It was both powerful and weak at once. It was a process of both mirroring, and (re)constructing the self. Anorexia was the mark of manipulation and it was a manipulative project. It was about the imposition of self guilt on their part and mine. It was about dominating and being dominated and it was always communicative.

A creation of the postmodern self can be double read much the same as (Harvey 1989:51) explains the creation of postmodern art or text. It was not that I was creating a new self but instead that I was mirroring bits and pieces of self concepts that I had encountered before and arranging them in a hodgepodge. I had arranged some of their choices in a dangerous combination. This self I was working on, and I still am working on is like Gertrude Stein’s explanation of the masterpiece (Stein 1967:153). I build and break down my self at once through my defining creation of it.

In conclusion - the concept of the fluid and communal self:

In this instance my ontological understanding of the body is influenced by the death of my grandfather as I was finishing the paper. My theoretical journey or “joy ride” as I first called it fell to a perplexing standstill. Part of what I was implying throughout the first draft was no longer what I wanted to take as my everyday understanding of corporeality and the self. This was the part about the body and self being inextricably tied to each other in such a way that they exist as not two but one. This skepticism of the holistic self was well founded, I think. The self can be, as I have shown, fractured. The experience of anorexia proves my initial hypothesis in an
unfortunate way that sometimes we need to think of our selves or other selves as separate
terities in the sense of separate mind and body and separate and distinct from the whole. This
current experience has brought me to another concept of the self a concept of fractured fluidity:

My mother just called. My grandfather has passed away. I
am ashamed for ever having called my own body a cage. The
night air is becoming cool. Still I leave my window wide open so
as to allow his spirit into my room. As I look into the mirror at my
tear-stained face, I see fairy hair clips dancing on my head. I am
transported through my memory across time and space. I am five
years old, sitting comfortably on his knee. He brushes the many
tangles from my long main of straight brown hair. Without my
knowledge, he pulls bits of fuzz from the multicolored afghan
draped across the couch. “Look,” he says as he hands me the bits
of brightly coloured fuzz that he pretends to pull from my hair.
“The fairies must have left this while playing in your hair last
night.” I was awestruck.

Although my body had never really left it, I snap my self back into the present. I walk to
my window, look up to the sky and ask the Lord to take good care of him. I apologize through
prayer for telling Him and them to “Leave me the fuck alone.” More than ever, I want to believe
that the self can exist apart from the body. My own caring self seeks comfort in the thought that
the self continues after corporal death. If the self exists only holistically then the self ceases to
exist upon corporal death. I am convinced that the self continues to exist after the death of the
body.

The body is, at some level, merely organic molecular mass that we borrow from the
earth’s finite number of particles. These particles reformulate themselves into different parts of
the whole, sometimes birds, sometimes celery, sometimes humans. We are biologically what we
eat. Not all the Earth’s particles can be devoted to everlasting humans or we would have
nothing to stand on let alone eat. When we lose mass where do those molecules go? When we gain mass where do those molecules come from? Notice the fluidity of our biological selves? We do not own our bodies. Wilson (1991) makes the point that humans are natural beings and that we often attempt to distance ourselves from nature when our selves exist in nature on an important corporal level. We borrow ourselves from our Mother Earth. Our social selves are similarly fluid. At my grandfather’s funeral “Father Calvin” said in his sermon, “life and death exist as part of the same reality.” Whether or not I am ready for a reversion to Catholicism, (and I don’t think I am) I agreed with a lot of what he said in his sermon and it probably has to do with the way that Catholics have reproduced their thinking in me whether I practice the religion or not. I borrow my self from those I interact with. I reproduce my social self through my impact on others. My caring self was far more communal than I once would have liked it to be. Sometimes they imposed themselves on me in ways that were limiting. What if I did not want to be motherly? Now, I am glad my self has been a shared project because it means their selves have had the ability to, almost indelibly reproduce themselves in me socially and physically. As I stood at the front of the Church to read I re-membered with Postman’s (1992:183-184) concept of “loving resistance” that neither science nor feminism will hold all answers. This is what I read: A reading from the first letter of Paul to the Thessalonians

We want you to be quite certain, brothers, about those how have died, to make sure that you do not grieve about them, like the other people who have no hope.

We believe that Jesus died and rose again, and that it will be the same for those who have died in Jesus: God will bring them with Him.

So we shall stay with the Lord for ever.
With such thoughts as these you should comfort one another.
This is the word of the Lord.

1 Thess. 4:13-14, 17b-18

While it pained me to refrain from saying “brothers and sisters” in a feminist attempt to re-write the bible, I was able to remember once enjoying a concept of life everlasting through the dislocation of the self from the body. They seemed to share a communal understanding and experience of their corporeality that was enviable.

This weekend I was surrounded by people who look and act like me. Although, we are in no way carbon copies, there seemed to be some type of communal experience that I was happy to relish in, even if it was a sad occasion. Featherstone (1991) writes that our bodies are vehicles of self expression. I have brown eyes and thick eye brows biologically inherited from my grandparents. I have an uncanny ability to find four leaf clovers and I can dance the Highland Fling. I love to eat pull toffee and crêtons. I still believe in fairies and I know as the sayings go, “the wind will always blow back! And not to worry because it will be over before you’re twice married” Much of my self is a recursive reproduction and expression of other selves that exists both and at once as an organic and social whole. My body and mind are not always one and the same, nor are they always two and distinct. The caring self may or may not be a cage and/or a vehicle, multiple and/or united, physical and/or social, real and/or discursive, shared and/or owned, public and/or private, fluid and/or fractured, historically and/or politically located, gendered and/or sexed, classed and/or raced, common and/or distinct, governed by others and/or governed by itself, bound and/or elastic, plastic and/or pliable, disembodied and/or re-embedded, contradictory and/or paradoxical.
I was right not to promise you any definite answers because I have found as did Bryan Turner, a great deal of confusion and uncertainty regarding the self especially as it relates to care. I do not promise to feel this way tomorrow but for now it is something upon which to stand (and its shaky ground at best). I leave you with my last ontological thoughts about my caring self stopping one last time at the body.

Father George’s voice will remain ever-present within my self as he knelt before my caring Poppa’s self and repeated in unison with my family:

_Hail Mary, full of grace, the Lord is with thee_

_Blessed art thou amongst women,_

_And blessed is the fruit of thy womb, Jesus_

_Holy Mary, Mother of God, pray for us sinners_

_Now and at the hour of our death._

Today as I look down at my twenty-four-year-old bellybutton with a newly found respect, I know that, given the right choices and opportunities, I am not cursed by the wrath of God but honoured privileged with the potential to carry and pass on a long legacy of the caring self.
Chapter V

The Transition From the Self to the "Other"
Introduction to The Transition:

As I moved beyond the scope of my selfish fascination with the social biography of my own navel, the very focal point of my inquiry necessarily shifted from my self to the “other.” These words I have crafted with care, were once for me. And now, I realize that my life’s words will barely be so private ever again. These words were my hands as I fumbled to find myself amidst this awkward quarter-life crisis. I’ve given these words life and meaning as I’ve molded them into my own. I have held them with the clasped hands of bound intimacy and listened to them speak their own truths in turn. They are more than my product they are the work of my life, my labour of love. As such, as an intimate labour of love, it is the creative process that delivers these words and not so much the words themselves that are the gift. Today, I offer my present creative process to you via these words. In many places, in many forms I have spotted distinct traces of kindred crafts. The traces are more obvious than craft because they are often concrete and sensory such as sculptures, music, inventions and such. I surrender my writings to your hands and thoughts to be accepted, rejected, re-worked and for this brief moment let us witness the process, the craft. It is in this sharing process that my words become my voice, my power, my intimate caring interaction. How does it feel to hold my power in your hands? For myself, it is a bittersweet feeling of risk. Turn the page sideways and perhaps you will understand what I mean. Do you see me scurrying across the void a blank page jailing myself behind my own bars? I assure you I am here boldly etched onto this very page and fading into its whitewash backdrop. Just as soon as I am empowered, I stand the possibility of betrayal, jailing by my very own words of liberation and their constant fluttering relativity. It is the risk of this inevitable paradox that makes the craft of self life writing such a peculiar endeavor. In sharing
our words of self definition, we risk being subjected to them. I have come to realize that I must continually engage in this risk if I want to cultivate power, form the self and bind myself to the “other.” It is my connection to “others,” not my own words that I wish to hold with the clasped hands of bound intimacy. I find solace in the knowledge that I have only to risk engaging myself in a renegotiation with the “other” if I want to escape my own un/intentional subjugation.

Three Powers and The Maturation of Our Questions:

My first is power to materialize my questions whose answers will remain immature without further questioning that will hopefully render them not answers at all. There is a second power - and by second I do not mean lesser. This is the power to share my first power, my materialized questions and their tentative, contingent answers. This is a power that requires immense courage as it beckons risking the integration of the self and yet holds promise for cohesion. My first power potentially becomes more potent through risking it to another. From this risk, the third power is born. Do you feel it now? It has bounced your way. You are holding the traces of my power in your hands now as you read. Will you seize the opportunity, re-cultivate our questions, send them back my way? Don’t try to hold the power for too long as I’m quite certain by now this only stifles it. The third power is momentarily yours. It’s the power of reflexive action, a chance to strengthen and lengthen the chain.

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This understanding of power is similar to that of Foucault’s as he writes that power is to be thought of as relational rather than something that we may hold. Extending power to the “other” should not be thought of as an act that entails losing power because it provides the potential to multiply power infinitely by virtue of being a “vehicle of power.” This is power that would otherwise die if we did not mobilize it, circulate it. (Foucault 1980:98)
Upon reading a question that Anthony Giddens asserts we of highly modern times are pressed to ask ourselves daily, my own questions matured again. The question was simply put “How shall I live?” (Giddens, 1991:14) It was here that I found the essence of our power in heightened modernity. Akin to Giddens, I think that the very question of choosing our lifestyle, that one can ask the question, “How shall I live?” is one’s first power in high modernity. The question itself represents the power of choice but these choices do not exist without danger and risk. In deciding what to eat, what to wear, our activities etc. we create a clustered life pattern that we refer to as lifestyle. I had earlier written that I suspected that those who were able to exert agency could “do so because they set their driving discourses¹ and their actions in a state of congruence and synchronicity.” But, is it really so simple? Just choose and act accordingly?

After being cautioned about the commitment to individuation implicit in the above statement and after being asked “where is the “other” in your concept of intimate interaction,” I knew my work must, once again, be examined with careful reflexivity.

In view of these two suggestions let us ripen the question of agency once more with a concept by Bourdieu as the question of choice power becomes reflexively intercepted by preoccupation. Habitus as explained by Loic J.D. Wacquant as consisting of “a set of historical relations ‘deposited’ within individual bodies in the form of mental and corporeal schemata of perception, appreciation and action.” (Bourdieu & Wacquant, 1999:16) With Bourdieu’s concept of habitus, I am beginning to see other ways that our power to choose becomes tainted with complexity. It is here that I make a commitment to questions that stretch to explore both

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¹ The concept of driving discourse meant to me a consciously adopted and directed discourse but I have since challenged this understanding with the concept of Habitus as explained in this section.
individual and collective social experiences. My question becomes ours as it asks: *How shall we live together, care together, when the pluralities of our “habitus” and individual choices are so many, so varied, so inconsistent?*

**Beyond Resistance the New Direction:**

In addition to a commitment to questions that include the “other,” I want to make a commitment to finding spaces of practical application because while agency is resisting and deconstructing the structures of the system, agency is also a constructive endeavor. Agency in practice challenges and importantly seeks to be productive. Although we can see that this idea was present in my earlier chapters that the agent should strive to be productive will be emphasized throughout this current chapter. Herein I will argue that we must work actively to direct and reconstruct our identities and interactions within our system despite our lack of complete control over the direction of our efforts. I yield caution to the reader here. I want to make clear that I do not mean that we will be able to control the ultimate direction of our efforts. Further, what I am not proposing here is that agents be able to act independently from the structures. Rather, we must keep in mind that while I do think that agents can hold some power as to the direction of their actions, I also know that any agency we cultivate will be influence by the structured system. However, there is an important reason why I suggest that we try and I will explain this soon enough. Our agency comes from acquiring a “feel for the game” or developing a “strategy” and intuitively playing our best options based on the *habitus* matrix. (Bourdieu, 1994:22, 62-64) Having said this, I am asserting that a completely willful social act does not exist. On the other hand, and equally important, the structure is not as rigid and all controlling
as we might at first think. In this constructive/productive segment of my pursuit for a more intimate caring system, I suggest that we explore the beneficial, essential even inevitable use of in our productive power in cultivation of agency. To do this we need the “other(s)”

In this chapter we will see a shift from the emphasis of the self - myself to “others.” Again it will be written from my perspective. However, we will find theoretical insight set into practical action - praxis. I think this necessary shift is reflective of the “problem solving” process used to tackle the initial question (remember here that the problem or issue at hand is not in effect “solved” once and for all in my conception but rather is temporally/spatially dealt with/) I started with a question about locating agency. The locations that I found to be most readily available were resistance, language, deconstruction. This was an appropriate beginning place because I think that others clued into my language and my resistive behaviours as I was busy deconstructing the problem. There was a glitch. While I was busy resisting I became wrapped up in my study of the self - my self and not open to the “other.” Being unwilling to risk the self to the “other,” broke our power chain at power link number one. The new problem was not that shared care didn’t exist it was that it could not exist without my acceptance of the “other” and what the “others” were able to offer as shared care.

Formulation of a New Contingent Foundation

While we may be afforded certain options to choose from, our life choices are highly influenced by the preoccupations propagated by our habitus. With the field\(^3\) guiding the options

\(^3\) The field is defined by Wacquant as consisting “of a set of objective, historical relations between positions anchored in certain forms of power (or capital). (Bourdieu and Wacquant 1999:16)
we have to choose from as well as *habitus* guiding the choices we make sometimes become no choice at all. A consequence of heightened modernity is the plurality of both life choices and conflicting cultural preoccupations brought on by increasingly complex *habitus* matrices. This plurality, I think, makes the integration of self identities and caring interactions difficult, risky and even more important than ever. In Giddens' sense, making choices that may seem trivial soon form lifestyle clusters. (Giddens 1994:80-81). I wondered if inconsistencies in our choices hasn't posed problems for integration of selves within and amongst each other because it requires the work of “adopting” sets of practices that do not necessarily fit well together as opposed to “inheriting” a traditional seemingly more cohesive way of life.4 Further, being exposed to a variety of discourses, like myself with feminism and Catholicism to name only two, I wonder if we are not pushing and being pulled in so many different directions that identity boundaries become distorted, wrought with internal deviation, thus making intimacy difficult work. What is important here is the degree and way to which a discourse works its way into the *habitus* matrix. We do not simply stand in social circles hopping from one to the next freely unmarked by our historical biographic journey. Each time we enter a new circle we carry with us threads sewn to us in circles past. We weave our way in and out lending our threads, borrowing threads, tying ourselves, each other in knots, ripping free only to start over again, now know as something that resembles a weaving, a web, or a matrix. Berger and Luckmann tell it well when they write of the face-to-face interaction. It is during this process, they say, that the

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4 This idea is based on Giddens notion “adopting” vs. “inheriting” our life options. (Giddens 1994:80-81) As Bourdieu might have it we should keep in mind that we of the modern times do not adopt freely in that we must adopt lifestyle options from those we’ve inherited. And this process of adoption is quite guided.
self and “other,” “two typificatory schemes enter into an ongoing ‘negotiation’ in the face-to-
face situation.” (Berger & Luckmann 1991:47)

What that means for myself is that I am not the same as all other Catholics because the extent to which Catholicism enters my *habitus* matrix, my social stitching, and the meaning of this is different by virtue of my exposure to various feminist discourses. I know that I no longer live in a field where taking for granted what it means to be Catholic, woman, feminist, physically challenged, etc. is not an option if intimacy is desired. My project here not only involves reconciling these typifications within myself but the endeavor also requires communicating to and negotiating with the “other” identity both theirs and mine. Intimacy is by definition a noun. **However, intimacy is not an end product we can hold onto. It is a workable reflexive process very much like and tied to the reflexive process of identity formation.** Thus, intimacy is much more like a verb.

At first glance, Giddens “pure relationship” seems to involve a lot of work And, at first I wanted to say that in pre-modern, pre-industrial times less work may have been needed for intimacy because identity was more grounded and stable as roles were more clearly defined by historically traditional roles. (The idea I was wondering about above.) Now, I do not think this is fair to say because as Giddens points out in his very title there has been a “transformation of intimacy” over time. It no longer holds the same meaning. The question should not be about whether or not it was more or less difficult to find intimacy long ago compared to today. The question should be about why it seems so difficult to form intimate interactions today. Today, *this work, meaning the time, effort and commitment that the intimate relationship necessitates are what help individuals at once integrate the self and bind one to the “other.”* Intimacy
requires a lot of energy because it is expected to do a great deal for the self and connections between self and “other.” In Giddens’ words: “The Pure Relationship is a key environment for building the reflexive project of the self, since it both allows for and demands organized and continuous self-understanding - the means of securing a durable tie to the ‘other’.”

(Giddens 1991:186) Notice here that intimacy and identity are closely tied and are not created causally but rather reflexively. Moreover, I am beginning to see how intimacy and identity formation are greatly influenced by time and space, by the fields. This is not to say that intimacy occurring across different times and space is impossible nor does it mean that intimacy happens naturally by virtue of two or more people existing in the same time and space.⁵ (Giddens 1991:189) I think it is simply that intimacy may require more reworking and maybe less stable because of a lack of temporal and spacial integration of the selves that is conducive to intimacy. There is something more ontologically secure about the “here and now.” The face-to-face interaction can be a very powerful force in grounding our knowledge of ourselves and the “other.” (Berger & Luckmann 1991:43-48).

I do question myself as I tend to assume that prior to heightened modernity selves and societies were more socially integrated and stable. The kind of intimacy that I think we desire today holds a stronger tie with identity formation in addition to its historical purpose of sustaining life, fulfilling needs such as providing food or raising children. It is not a matter of more or less but rather difference. This is not to say that we do not still forge relationships that are based on dependency and need; I just think it means that we no longer find this type of

⁵ Giddens offers an the example that we may be more tied to another on the phone who is many miles away while we may hold little ties to the person sitting next to us in the very same room.
relationship satisfying because it stifles the mutual negotiate of identity as the relationship
ascribes identity offering few alternative options - and we certainly are accustomed to options.
It creates a forced intimacy and I see this as inherently manipulative.\(^6\) We are willing to do the
work because in some sense we are obligated to because we think intimacy is what is going to
free us from a whirlwind of heightened modernity. The catch is that many of us forget or do not
realize intimacy is not a result, a state rather it is a process, real never-ending work. With
heightened modernity we add the phenomena of disembedding and re-embedding to the
separation of time and space and what results is the ontological instability of selves and societies
frayed at the seams. Thus more work is needed in the creation and stabilizing of intimacy
because this process is what helps ground the abstract nature of the social ties in high modernity.
We of heightened modernity cannot afford to be socially lazy as our identities and our close
connections are not handed to us in cookie-cutter form like everything in our ready-made world.
This is the reason that I think it so important to collaborate in our efforts and try to align them
and direct them in the creation communal effort, is because I have a hunch that in the process of
sharing our endeavor with “others” - not all “others” but localized groups of “others” - we will
succeed in creating intimate caring interactions an achievement far superior than that of the
power of one.

\(^6\) The idea that forced intimacy is manipulation, is an idea that stems from a class
discussion: Strategies in Sociological Research Sociology 404B by Dr. L. Czernis,
Bishops University Spring Term 1998.
Chapter VI

Toward an Integrated Ethic of Care
Can you find a virtuous woman?

IX The Ideal Wife

WHEN ONE FINDS a worthy wife, her value is far beyond pearls
Her husband, entrusting his heart to her has an unfailing prize.
She brings him good, and not evil, all the days of her life.
She obtains wool and flax and makes cloth with skillful hands.
Like merchant ships, she secures her provisions from afar.
She rises while it is still night, and distributes food to her household.
She picks out a field to purchase; out of her earnings she plants a vineyard.
She is girt about with strength, and sturdy are her arms.
She enjoys the success of her dealings; at night her lamp is undimmed.
She puts her hands to the distaff, and her fingers ply the spindle.
She reaches out her hand to the poor and extends her arms to the needy.
She fears not the snow for her household; all her charges are doubly clothed.
She makes garments and sells them, and stocks the merchants with belts.
She is clothed with strength and dignity, and she laughs at the days to come.
She opens her mouth in wisdom, and her tongue is kindly counsel.
She watches the conduct of her household, and eats not her food in idleness.
Her children rise up and praise her, her husband too, extols her:
"Many are the women of proven worth but you have excelled them all."
Charm is deceptive and beauty fleeting; the woman that woman who fears
the Lord is to be praised.
Give her a reward of her labors, and let her words praise her at the city gates.

(Proverbs, 31:10-31 italics in original)
Forward: My Moral Hands

How can I live the life of a moral woman if I am without husband, child, household and maidens? How can I conceive of myself as moral if my social circumstances do lend not me the identity of wife and mother? My hands work willingly and yet I am not given the fruit of my hands. I daren’t ask for my fruit in turn for I will be akin to the leech’s two daughters who cry “Give! Give!” and upon me the wrath of God will Bestow the insatiable barren womb and He shall call “the ravens of the valley to pick out my eye and have the young eagles eat it.” My arms have grown strong from carrying the babes of other mothers and rocking them to sleep in a household that is not ours and where no father dwells. And still, I know my merchandise is good as I remain awake all night watching over them nestled in bed, cooking their meals on my own. Their cries wrap me in strength; their comfort cloaks me in honour. Yet, it is their mother they call blessed, and not I. I findeth not here a husband to praise my efforts. I shall not want.

As I hold Poppa’s rosary in silent prayer, I remember my grandparents who were all such people, good mothers, wives, fathers, and husbands. Then, I accept who I am: “Our Father . . . Hail Mary . . . ‘And I said to myself, both the just and the wicked God will judge, since there is a time for every affair and on every work a judgment (Ecclesiastes 3:17) - there is an appointed time for everything, and a time for every affair under the heavens (Ecclesiastes, 3:1) and today this is mine: to extend my willing hands and share my care with many other families, so that many mothers’ hands may be restored and may continue to work willingly, so that many children can still call rightfully call their mothers blessed, so that many families may remain intact. Today, I shall not be called Mother. I shall be the Caresharer. This is at once my gift from and to God as it is my most charitable and creative service and purpose. Thanks be to God. Amen.”

1. Written with reference to (Proverbs 30:15-17)

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Introduction:

This next chapter represents the application of a new concept of care and my present awareness of the political necessity for a moral ethic of care. In order to do this, I had to rework the earlier writing of this chapter as it lacked theoretical strength and denied an important underlying component. That is the moral ethic of care. The first writing of this chapter attached identity negotiation and the democratization of caring relationships to intimacy. I was naive to try to write about my care without acknowledging its link to my morality. In this new version, I will link the strengths and problematics of competing moral ethics of care as they may influence caring identity. What I have tried to do here is to keep my initial writing of my experiences and analyses intact concerning identity and intimacy in the caring interaction, while extrapolating the moral ethic of carer that was implicitly embedded within my earlier exploration and caring actions.

The point is not so much to present myself as one who has mastered the moral ethic of care as I did in deed falter. Rather, my aim is to exemplify actual practical situations that suggest the political importance of accepting, building and adopting a moral ethic of care that ought to be actively lived in the everyday by both women and men. In doing this, I am not refuting my earlier assertions. Instead, I am building and refining the earlier conceptions by borrowing from Tronto and Fisher (1990) and Tronto (1993) and by employing my experience as a means of intertwining theory and experience to create a rich and academic narrative. This method allows for my theoretical concepts and explanations of care and my moral ethic to develop reflexively. The theory and ethic inform each other and therefore a shift in my academic learning shifts my concept of a moral ethic and as I have seen here my moral ethic shapes the content and direction of what I write. As we will see, my moral ethic and ideal identity of caresharer have recreated each other
at various moments in time and space. Which one impacted the other first is, as I see it, irrelevant, a chicken and egg question.

What is important to understand is what they are doing now and that a new feminist understanding of sex and gender has attempted to erode a moral obligation to care based gender and replaced it with an understanding that with our stamp of humanity comes the responsibility of care and in nature our right to it. Men and women alike may create the social umbilical cords of humanity. Competing with this, are fragments of an ever-present Catholic morality that has habituated a feminine caring identity, one that seeks the lifestyle of wife and mother. What may constitute as moral is continually oscillating around these fragments so that the matter is not only about whom I am but also whom I ought to strive to become. This, as I will explain, is highly problematic. The relative nature of whom one ought to morally be not only oscillates around time and space but also from one subject to the next and furthermore within this subject herself. Thus, the epistemologically located theoretical and everyday experiential knowledge of care are tailored to each of us in the times and spaces of heightened modernity.

I have reorganized my moral ethic (and it has been reorganized for me) so that I could try to accept and employ the aspects of care without necessarily accepting or rejecting by virtue of their ascribed gender. I have tried to construct a new concept of care that would allow me to be guided by a stronger, more eclectic, moral ethic of care that could be more useful given the many (sometimes overlapping) social spheres and situations where caring interactions take place. Today, I am not trying to concede that my care was or is now without gender. This would be next to impossible given my socialization yet it is theoretically possible for future generations. I played with what being gendered could mean and this practice required a lot of energy. At times, I had to
resisted what was comfortably feminine, at others I had to accept and adopt what was masculine but most difficult was that I would have to stop thinking about behaviours as necessarily masculine and feminine or even natural. With this in mind, let us turn to a redefinition of what the act of care may be:

Redefining Care and the Ethic of Care:

I now bring Fisher and Tronto’s definition of care to the forefront as does Selma Sevenhuijsen (1998) as it widens parameters of care beyond “labour and love, identity and activity” that Graham (1983:13-14) suggests. Hillary Graham (1983) writes that caring interactions between self and “others” create social relations that enable the society to reproduce itself. Further, she explains that “caring and being cared for is intimately bound up with the way we define ourselves and our social relations. (Graham 1983:13) I see this reproduction as occurring recursively and reflexively as I have indicated in previous chapters. Graham explains two dimensions of care writing that: “caring demands both love and labour, both identity and activity, with the nature of the demands being shaped by the social relations of the wider society.” Here, we see that the caring interaction can involve both, separately or at once, labour and emotion as well as the implication of identity.

Claire Ungerson, explains labour/emotion dynamics of caring interaction as a matter of “caring for” and “caring about.” She writes that “caring for someone, in the sense of servicing their needs, may have little or nothing to do with caring about someone.” (Ungerson, 1983:31). The latter idea represents very clearly what I initially felt while caring in the public sphere. Which brings me to my next point about when this caring interaction becomes intimate. The point I want
to make in this chapter is that as I have experienced it, *the caring interaction may become intimate* when the actions and emotions of the caring "for and about" are necessarily aligned and whereby the rules governing the social tie allow for the open reflexive negotiation of identities of self and "other" by themselves and each other. *This is the place from which our power can be worked in such a way as not add it, subtract it, but rather it is a place from which we can multiply our power to create a system of shared care.*

While Graham’s (1983) and Ungerson’s (1983) understanding were quite useful, Fisher and Tronto’s (1990) definition of care opens up who can know how to care, who can care, and what counts as care. This is what allows the above holistic and integrated understanding of care as they remove a necessity for labour and love in the caring interaction. Rather than only psychologizing care, they also politicize care as they write that care is "on the most general level . . . a species activity that includes everything we do to maintain, restore and repair our "world" so that we can live in it as well as possible." My understanding of this definition should not necessarily replace Graham’s but rather exist as an extension of Graham’s. This definition fits well with my experience because often I cared where the concept of “love” did not necessarily exist and yet it was still integrated care as I cared about what I was doing and I recognized the “other” not as separate and abstract from myself but also as my self and my environment. Furthermore, I found in my experience that when care was most integrated it was more like an activity (albeit vigorous) than it was this separate thing to leisure that we call labour. Hence, the division between leisure and labour where care was concerned became blurred into integrated moral activity.

It is a pivotal understanding of care as it its initial lack of reference to sex and gender opens and allows for many contributions of men to be counted as caring. When others such as Ungerson,
(1983) and Wood (1994) asked the question “Who Cares?” Their responses included analyses suggesting there is a care crisis as women are overloaded with the responsibility to care. In redefining care, Fisher and Tronto’s understanding seeks to also redefine who can be thought of as a carer and broadens what care might be. In doing so, they imply that men have possibly been taking part in caring activities, even guided by an ethic of care for much longer than social scientists and moral theorists have asserted. Many activities that men have traditionally partaken in may by Fisher and Tronto’s definitions be counted as caring. Take for example the many men and few women who removed broken trees and dead brush as a way of care after the ice storm. Where they not engaged in maintaining restoring and repairing our “world” so that we can live in it as well as possible?” Granted, as they suggested (Wood1994, Ungerson, 1983, Graham, 1983 and others) men’s care may not generally be the type of child care, or people care that women do. However, it is care nonetheless. Here, it is important to understand that men do partake in caring activities and that they have traditionally. The reason being that men have been caring and this understanding allows us to more easily understand, encourage and accept men in caring roles such as that of a nurse for example. On the same token, it extends to women other avenues of care other than that of childcare. Today my response to the question “who cares?” would be: men women and children care. Perhaps we are all even guided by an ethic of care, one that allows justice to fall under its umbrella. Maybe, we have appeared to be guided by two separate ethics as the caring moral acts were divided by gender and the traditionally masculine acts were simply not called care. This is why I think it is indeed important to look at the actual actions of moral ethics in their lived everyday context rather than simply playing with the philosophical or socio-political implications as suggested by Tronto. By my understanding the political implications are located in the everyday
practices of agents.

Caring Components Applied to an Ethic of Care

Although Tronto (1993) has suggested that we not consume our energy by studying the specific everyday localized acts of care, I have done just that. My reasoning for this is that if the ethic of care is an ethic of process and practice, I should study it exactly as such and not as an abstract theoretical concept. In studying the practices and processes of care as an ethic we might, as I have, uncover the every-day lived political implications of this ethic as we each know it. It is in this way that we might study and analyze the impact of difference and fracturation of a postmodern ethic of care. I will soon show how this difference and fracturation and a postmodern orientation allows for a very exciting and compelling moral ethic of care.

If the ethic of care is an ethic in practice and process, then the gap that exists between what we ought to do and what we do should be narrow if not nil. There is little room for hypocrisy. Although, faltering does serve its purpose as I will show. While an ethic of justice has at times called for justice to be served with great injustice, an ethic of care does not call for uncaring practices or process. If it did, we would no longer be talking about an ethic of care. Show me an ethic, your ethic of care. Much like the relationships it creates, the ethic of care is not something you can hold for observation. It is a lived reality, and this reality is most readily captured between the actions of carers. It is not enough to say, I should extend my self to “others” this way or that way. We must do it otherwise the relationships and the care do not exist, much less the ethic of care.

In doing such a study, I mount an argument for a new ethic of care, one that celebrates
difference within the self and across selves at the same time as it seeks to intimately bind localized collectives. I argue here for an ethic of care that does not merely exist as recipe knowledge for the feminine. This ethic will not necessarily be masculine nor feminine but rather an ethic that draws on situational practices and processes based on their utility and applicability. Further, as a re/creator and practitioner/processor of this ethic, I strive here to redefine the theory of care in such a way that it may be reflexively guided by an ethic that challenges existing sexist understandings of what counts as care, who cares, and division of caring labour.

Caring Components:

Here I will present Fisher and Tronto’s (1990) components of care as they relate and apply to my lived reality of care. The reason that I do this is not only because I think the ethic of care should be studied but also because my experience would suggest an adjustment to the language of this care. My experience of “caring about” and “taking care of” sit well with that of Tronto and Fisher. Caring about is referred to as an “orientation” that moves beyond love and affection whereby we select aspects of our environment or specific groups of people to become concerned with as their state of maintenance hinges on our own. An example from my experience would suggest that I care about certain “clients” very much because my caring identity hinges on their comfort and well-being. This is a mentally active phase of caring processes, taking care of as a process of caring that requires using resources and power to fulfill a responsibility. For example: My supervisor takes care of the soiled carpets at work by assessing the budget, then asking me to make a call to the carpet cleaners so that her responsibility to ensure a health standard is fulfilled.
It is when I read the next dyad, caregiving and care-receiving that I want to make an adjustment. "Caregiving" is the everyday hands-on work of care; it is the actual "work of maintaining and repairing our world" (Tronto & Fisher 1990:43) This activity they say implies a receiver and I don't dispute this. There are two points I want to make with respect to this dyad. The first point is that through my concept of caring I do not recognize care as being transferred from one to the next. It is not a neat exchange like handing someone money and they return a good or service to you. What I am getting at is the concept of integrated care. When caring has integrity (I will explain this when I explain the ethic of care) we needn't and would even have difficulty disguising between the caregiver and the carereceiver. The second point is that such language, as I made clear earlier is that the word caregiver is deceiving because it does deny the monetary exchange that takes place in capitalist care. That is what is so strange about care today: we call it caregiving and maybe even expect, like I did, for it to be conveniently intimate. Yet, we wrap it up in bureaucratic paperwork, tie it with the red tape and trade it as though it were just any other good in the market and as if we could just as conveniently walk away from the exchange unchanged after shift-change. I am arguing here for a concept of care that includes Fisher and Tronto's (1990) "sustaining, repairing and maintaining" and extends beyond it by introducing a new language that may facilitate our reconstruction of a new moral ethic of care that is more conducive to the fractured identities and relative realities of our current time and space. I begin this language with the terms "caresharing" and "caresharer" that I will discuss below.

A New Moral Ethic of Care

At this point I wish to reintroduce the concept of caresharing. Caresharers expects to care
for and to be cared for. Caregivers fill the shoes of the caregiver and the carereceiver at once. The moral ethic that I am suggesting rests on a concept of care that is akin to Foucault’s relational concept of power. Care in this sense is relative and relational. As it is shared, it has the potential to multiply. The concept of caregiver(s) allows for the promotion of a caring unit bound by intimacy, coping strategies for care in the public capitalist sphere, flexible relativity as to what can be construed as care, and a recognition that what may be just may not necessarily be an equal exchange. The concept of caregiver recognizes that care is not simply given. The very word caregiver strives to redefine what care can be and to reorganize the division of labour so as to make a division of activity. While “caregiver” too implies the “other” it does so in a much different way from the word caregiver as it means the difference between a demeaning abstraction and a well-needed interconnectedness.

Due to the duality of structure and agency, I think, at this point, it is clearly overambitious to attempt to overthrow capitalism and modernity but we do have the power to create a new language that may compel a new manner in which we apprehend each other. Michael Ignatieff (1984) writes “When men confront each other as men, as abstract universals, one with power, the other with none, then man is certain to behave as a wolf to his own kind.” (Ignatieff, 1984:52) Here, I suggest a concept that may allow us to uncover our need to interact with solidarity and humanity while it recognizes our need for and the reality of our differences. I propose here that we not consider care as “work” that we do abstractly from our personal lives, from each other, or even from our natural environment, but rather that care be thought of as the vigorous everyday activity that we both need to do and are all morally bound to do. The reason I want to reconsider the word “work” is because I think we should not consider care as actions that we do when we go to work but rather
that care should permeate all activities of our life if we are to do it in an interconnected manner with interconnected social beings. This applies to men, women and children alike with the recognition that the specific caring activities that each might contribute may vary and will be re/determined between the individual and the collectivity based on what they are capable of contributing. How exactly will they be determined? Again, this will vary and it requires that the individual acquire a feel for the game so that he or she can play with the structures and their agency.

This thesis is an example of such a project. Care as an activity, rather than a job that was assigned to someone by virtue of their sex, gives both women and men the opportunity to contribute to our world with less resentment and more to gain. Caresharers would not only share their care with “others” such as specific clients but also across “others” (meaning redistribution of the care activities) until there is no crises or burden of care. It is akin to the pedagogical concept that many of my professors began their classes with. “Don’t think of me as a teacher who will fill his/her students with knowledge. I recognize that you will bring valuable knowledge to the table. We will share ideas and re/create knowledge.” What I am saying here is, that I do not think of clients as people I can give my care to so as to fill them up with care. We will share our care. I understand them to be human beings of worth and able to contribute not equally but relatively and I expect them to contribute in whatever way they can and I have a moral obligation to do the same. To live the reality of a constant caregiver is to be drained of our potential to contribute. To share care potentially multiplies care exponentially.

By creating this concept of the “caresharer” I have reorganized my moral ethic so that I could accept and employ the aspects of my care that were considered feminine or masculine without necessarily accepting or rejecting them by virtue of their ascribed gender. Rather, I was constructing
a new concept of care that would allow me to be guided by a moral ethic that would in turn be acted
according to a variety of caring actions. I am not trying to concede that my care is or ever was
genderless by definition of the traditional masculine feminine dichotomy. This would be virtually
impossible given my socialization. Just because my own care may have been quite feminine, does
not mean that it would have to always be. So, I am trying not to name or think of my care as
masculine or feminine but rather as a common moral ethic of care that recognizes difference.
Further, I expect care from myself and all “others” not because it is necessarily human, natural, or
even easy but because I now know humans to be capable of care even in the most challenging of
circumstances. It is not that I expect them to love or even like me, nor do I expect them to care
about the same things I do, but I do expect care from them. Let me now tell you the story of how
I became the one who shares her care to make care. Let me tell you how I have subtly used my
power not only to expect care from “others” but to make care a moral responsibility for all.

* * *

Difference and the Self as a Starting Point:

Now that I have adequately introduced the necessity for a transition from a focus on the self
to a focus on the self and “other” by means of the previous chapter, I will extend the present chapter
by an analysis of my reasoning for turning inward as a site for departure. Listen carefully as I
recount my journey from self to “other” and provide analysis of the intimate caring interactions of
my everyday work. That I started with the study of the self was both and at once a feminist decision
and what I see now as an inevitable consequence considering the subject matter at hand - caring
interaction. My understanding germinated from the inside out. I knew I was embedded in this circle of care but I felt disconnected within myself and my connections with the “others” seemed so one-sided at first. I felt caring energy being pulled from myself to the “other” but in the beginning it seemed rarely returned. This care was certainly not returned with the romanticized notion that I held about the caring interaction. Worse, still it lacked a human quality that clearly I needed at the time. Michael Ignatieff asserts “we learn what we need by suffering. We learn how much is enough by learning what it is like to have less than enough. Our education in need is a tragic passage from blindness to sight.” (Ignatieff, 1984:20) I know I needed an interconnectedness within and to our care and to “others” because I sensed a significant painful lack of it. My expectations were thwarted by this romanticized notion that care at work should be an extrinsically rewarding experience every time. In conversations I had with “others” about my work there seemed to exist this idea that fluttered about: “working with handicapped children must be hard work but so rewarding at the same time.” My reality of the experience did not match this sentiment, at least not at first. In light of my recent reading of Ignatieff (1984) I would say this initially had a great deal to do with the clients and co-workers at the group home being strangers to me upon my arrival.

My other difficulty with experiencing care as rewarding had to do with who and what a “developmentally challenged” person was. The clients at first seemed less accessible than I now know them to be. Where is the developmentally challenged “other?” Who is she? Can he see me? Can he hear me? I know she can hardly move. How do I connect to a child that seems to laugh and cry randomly? That is why I turned to the self almost automatically. I still had not a map of the “Other” terrain. With the current study of care, I began with the self. Although, I would also have to map the terrain of the self, it was from within that I first sensed a lack of connection in the caring
interactions at work. Intuitively, I began with the self and peeled away at it until I unveiled the “other.” When I say I found the “other,” I mean I found a piece to the humanity puzzle and it was perhaps facilitated by the extreme difference in needs of the particular individuals that I was interacting with. Moreover, as I found the self, I found the “other” and when I looked to the “other” I found the self until the oscillation creates the image of the social.

Again I draw on Ignatieff as his words capture a necessary task in realizing caresharing. “The problem is not to defend universality, but to give these abstract individuals the chance to become real, historical individuals again, with the social relations and the power to protect themselves.” Protect themselves from what? Being dehumanized, being treated like a heap of flesh and bones with nothing to extend to the world, incapable of caring. And how might this happen? By being cared for by someone who does not care enough to expect the capability and need to be human and not just a “vegetable” as some so ignorantly say. It can happen when people presume that their laughs and cries are random, when they simply do not know this for sure. The point here is that care can be extended a multitude of ways and that we need to be extremely attentive as Tronto (1993) suggests in order to share care and not just give it because in denying the possibility that the “other” is capable of care in their way, we block the possibility of shared care what I perceive as our link to solidarity.

I am not saying that this will work for everyone but I began this project of shared care with the presumption that while not everyone was born knowing how to care or be human we could all learn from each other what this means if we are attentive to each other’s differences and from here our humanity would grow. Yes we need to be cared for, and we may need to care but more importantly I have found that I need to share care not just give it or receive it because from my
perspective this is humanity. While Ignatieff cautions against the political dangers of defining the needs of "others," strangers I will do just that. I will expose our vulnerability and say that we need to share care in order to be human. What specific acts of care we need or will extend may celebrate our difference but our human solidarity will exist in our need of each "other" to make each of us less of a stranger.

Two tasks that directed my journey to shared care with the "other."

Now, when I look back, I can see that I was measuring the caring interaction against a model that resembled the caring exchange between an able-bodied/minded mother and her able-bodied/minded children. This, however, was not the reality that I was living. Our reality was one where normalcy developed from a certainty that we would be continually surrounded by difference and deviation from the norms that existed on the outside of the group home walls. I had not understood nor accepted that what I was going to experience with these particular children and adults would be an inherently different type of exchange by virtue of our differences and the workplace/public sphere setting in which we were situated.

There were two important tasks that I would have to undertake: 1) I would have to accept that care in the public sphere could not fit the mold of care between mother and child that I continue to seek. This first task would involve developing a new understanding of what I should expect from care in the public sphere. I would have to recognize that I am not my clients' mother even if I do feel an immense caring connection. Further, I would have to accept that when either I didn't feel motherly towards them or they did not identify me as mother that this would not mean that the possibility for shared care did not exist. Mostly, I would have to accept that this was not by any
means a lesser care because I thought it did not fit the mother/child model of Catholicism illustrated in the above passage. 2) We would have to build a caring relationship that could encompass the ideas of friendship, guardian, and family rather than that necessarily of mother/child. This would require me to look for the subtleties of their caring actions and recreate the meanings of our caring interaction with the clients. There was a reason that it was difficult to accept a caring model other than the mother/child one even when I knew the theoretical socio-political problematics of such a model. The difficulty arose from a required transformation of my identity that would necessitate a contradiction and transgression of a well-socialized moral code. That I was attaching morality solely to religious and not also to the theory that I was producing would have to be modified. I would now be studying a triad of care: practice, theory and moral ethic of care.

What follows will both describe and analyze my journey from myself to the “other” and our creation of shared care. This next section will include a discussion of the caring interaction and excerpts of my writing concerning caring interaction that will both illustrate and be analyzed for meaning. I will link these practices to the concept habitus and identity formation and as well as to an ethical moral code of care.

My Journey From Self to “Other” in The Pursuit of Shared Care

Personal Threads

I wrote this section I call Personal Threads just over one year ago. Today, and after my journey from self to “other,” it holds new meaning.

2. This next excerpt is also found earlier in this Thesis.
In high school many of my friends became mothers. From a distance, I observed their experience that often seemed to be a great struggle. To be honest, I’m not sure where they are today because our lifestyle choices have sent us in such different directions with what I assume to be very different realities. My experience of giving childcare has been through my summer jobs. More recently, I have taken a job as a “student” careworker at a group home for developmentally challenged people. This is one of the experiences that illustrates where my current interest of the study of care is motivated from:

As I rock an eighteen-month-old child that I have known only for a few hours, I feel an immense connection. I have fed him, changed him, played with him and taken him with me to do errands. Now he is cuddled against me sucking his soother and his eyelids are beginning to look heavy. He seems content and trustful in my arms. I like to think it’s because of the care I gave him that day. I choose to continue rocking during my fifteen-minute break. Upon realizing that I have other mother work to do, I put the resting child to bed. The phone rings - it is his mother calling to check on him. She asks the usual questions: Did he eat well? Did he cry before bed? My response helps put her at ease. I can tell she misses him. I know I will too.

Somehow, sometime, I developed a “caring self.” And, what I want more than anything, are my own children, ones that won’t be left behind or taken away at the end of the day. Don’t misunderstand me. I am happy to care for “others” children because I think shared community care is necessary if we are to fairly distribute the work load of childcare - (an idea that I have kept from Charlotte Perkins Gilman’s Herland (Gilman, 1970). The problem is that it is constructed as a job and not family or community life. I give a lot of my caring self and at the end of the day they owe me $8.00 for each hour. Sometimes, taking the money seems inappropriate and other times, it hardly seems like enough. Although, sometimes I treat them like they are, they are not my children, they are “clients” that I may not see for a long time, or even ever again.

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I have provided this excerpt from a paper previously written for the purposes of pushing my reflexive thinking. This next section will peel away the meaning of not only what I first jotted down as a “free-writing” exercise, but also my initial analysis of the “free-writing.” The next exercise is one of reflexive sociology, a sociology that allows me to dig deeper given my new time and space. Now, after yet another look at what I was able to “dig up” I have one more unveiling. I realize that the project of peeling away my dissatisfaction with the caring relationship between worker and client has created and solidified not only a caring self(ves), caring “other” selves but also an ethic of care that seeks to patch the selves together in an increasingly fractured social sphere.

What is the caring interaction at work and at what point does it become intimate?

Looking back at what I wrote in the previous sections, it seems obvious to me that what I was searching for was the identity of a mother. As I wrote in “Hail Mary,” “my Catholic and feminist self identities create oscillation and contradiction within the self.” The motherly identity, the one that would let both feminist and Catholic discourses of motherhood sit at ease with one another would be a difficult project not to mention possibly impossible. After reading the passage at the beginning of this chapter in combination with Tronto’s Moral Boundaries and Ignatieff’s Needs of Strangers I know why. First, care has as much to do about morality as it does about labour and love. Further as Ignatieff suggests our sense of belonging has not caught up with our modernity. It does not recognize our selves and our identities as transient. He writes “We think of belonging in moral terms as direct impingement on the lives of “others.”” Fraternity implies the closeness of brothers.
Yet, moral relations that exist between my income and the needs of strangers at my door pass through the arteries of the state.” (Ignatieff, 1984:141) The reason that my moral ethic of care does not recreate the type of intimate relationship above is because the mother/child identity is one of unconditional permanence and what I have to deal with in this age is the transient nature of my care and an unstable sense of belonging. Furthermore, the state blocks the fluidity between self from “other” as it sits between us making strangers of us through its governance. I have only to think of the way that I ceased to open paychecks for my care. Intentional or not, it created a pervasive invisibility of the state between me and the “other” because I could almost forget what I was being paid for. In fact, with our current banking process the actual wage does not pass through my hand until the moment I release it in consumption. You see, I often thought my care existed in moral terms of the “direct impingement on the lives of ‘others’,” for sorority and fraternity but this would not be entirely true as my bank account filled with virtual pennies. Many moments of care that I experienced could have been caresharing but were tainted by this invisible hand.

This inability to necessarily reconcile feminism and Catholicism my self was not entirely problematic; there were some positive consequences as well. The rifted self can be productive, and rigorous in her take on the world. I have found through reflexive analysis of my experience that where wage labour in the public sphere creates and sustains many sorts of caring interactions that these do not exist without complication. My own understanding of the care that I share with “others” grows from and challenges these Catholic and feminist internalized discourses. The reason that a transgression of Catholicism is so difficult for this self is that it is not offered as a choice. (I called it a “default” discourse but that is not quite right.) It is not presented as an optional discourse to choose from. Catholicism is not a “default” discourse it is a religious belief system and as a
religion it is not offered a choice. Further, it works to compound the notion of habitus in that it compels us to act not only out of habit but out of fear and in good faith. Catholicism is a religion and grave consequences presumably will be administered for those who question. If I am to call myself Catholic my identity ought to be mother or sister beyond this it is not a negotiation. Gender, according to Catholicism is not to be played with. What I am referring to moves beyond what is termed primary socialization by Berger and Luckmann (1991:149-151). They write: “It is at once evident that primary socialization is usually the most important one for an individual, and that the basic structure of all secondary socialization has to resemble that of primary socialization.” Where feminism enters the habitus, it must be made to fit with Catholic understandings of the way that my self should apprehend the “other.” Otherwise, I will have to deal with the price of transgression guilt and fracturation. It is clear to me as I look at this collection of work that feminism is allowed into the habitus but only if it has to do with motherhood in some sense or another. That is how I am able to patch the pieces of my morality. I do not think that motherhood and care are ideas that I will ever be able to not think about because I was repeatedly exposed to Catholic discourses early on and throughout my socialization. Perhaps not in the sense that I practice Catholicism by attending Mass every Sunday, but it does exist in the way that I carry ideas from the Ten Commandments (and the guilt for being human and unable to follow the rules so strictly) around with me as I act out my life. The point here is that Catholicism did not die with one generation of my family (me) not attending Church on Sunday. It is, however, important to understand that this project of negotiating myself presents a moral dilemma as identity by Catholic definition is a given not a choice if one is to be a virtuous woman.

The inner cohesion of the self and social cohesion, perpetuated by the intimate connection
is thwarted by employing a strict motherhood model of the private sphere in the public sphere. This difficulty is related to patriarchal discourses that remove choice from women’s lifestyles. I see the removal of choice in caring interaction as the first step in an un/consciously motivated project of selfish manipulation, one in which intimacy is not apt to be created or sustained. For example, I scarcely found intimacy while caring for strangers in the workplace for a wage. A main reason for this was that it was the one job I found for the summer, one I was not really keen on taking in the first place. It was a choice but the “other” was no job at all. So was it a choice or just the best of two options? And, given this last sentiment, how did I get to the place I wrote about above. How did I find myself intimately rocking a young child I hardly knew, feeling very connected and enjoying it very much, enough to skip my break and continue rocking?

This was an application of the motherhood model that I was taught very well. It is was as Bourdieu explained, there are times when it is more freeing to succumb that to resist. (Bourdieu & Wacquant, 1992) This freedom was, however only temporary because the motherhood model, as I have explained brings with it a set of complicated contradictions when woven into the workplace. The transient nature of identity in modernity does not allow for this comfortable retreat of the self to be taken for any length of time. Further, it was an easy time to play Mom. Children are, after all, quite endearing when they sleep like quiet innocent dolls. This is a time when it is easy to feel motherly toward them; all the work is done. It is when they awake, not yet aware of or even caring about all social protocol that they challenge our relationships most and this was especially so with the motherhood model that I had deposited into the public sphere. Throughout the course of my study of women I have read enough and watched enough to know that traditional motherhood is not necessarily a root to freedom.
What I am working to describe to you here is not only a conceptual crisis in my care but also a moral crisis. Apart from brief moments that were few and far between intimacy was forced making it not intimacy at all. The moment described above was one of these few brief moments where I dared to care, and succumbed to care and made a mess in the neat clinical public circle of care. It was a moment where we had chosen to connect on “free-time” after being thrown together in this anonymous circle of care. Not only my feelings and actions were aligned (as I suggested was necessary in Caring For a Wage) but it seemed as though our feelings and actions were aligned and I thought I knew who I was and who he was to me. I knew who I was until his mother called. It seemed I was the virtuous motherly woman and yet I couldn’t be as he had such a mother.

Listen now to hear the way that modernity makes such a uniform identity virtually impossible. The question I posed for myself became “is it more moral to care for your own children unconditionally in the private sphere or is it more moral to evenly redistribute the load of care among us? And if we were to redistribute the private activity of care, was I to be a mother to each of them during their stay with me? Was that the only way I could integrate my care?" I hoped not for I knew it would be impossible. Ignatieff writes “a market society leaves it up to each of us to find work capable of satisfying our need for purpose and meaning.” (Ignatieff 1984:135)

What am I to do if in a fundamental way this choosing either breaks a moral code for purpose and meaning or it stifles a creative self? What I cling to now are the words “there is a time there for every purpose and for every work - a time to every purpose under the heaven.” As I have little choice but to renegotiate my self and my care today, I pray He will find the heavenly purpose that I have found in the caresharer. Ignatieff goes on to write, “Doubtless the price of our freedom to choose our needs is high. We have Augustine’s freedom to choose, and because we do, we
cannot have the second freedom, the certainty of having chosen rightly.” (Ignatieff, 1984:135-136)

In the name of and need for humanity, I transgress traditional Catholic motherhood with a strong faith that I have chosen morally well.

* * * * *

My Experience of Our Care.

Our Power to Negotiate Self-Identity and Intimacy

The clients often tested me and pulled my identity into question. At the same time, they taught me to know myself. It’s interesting how sometimes “others” and children especially morph into little mirrors when we are not paying attention. A child offered me this insight and his message was clear: if I wanted “others” to help me with my shared project of shared care I might try asking!

In the following excerpt we will see how a young informer used the second power that I was referring to earlier to renegotiate our ties.

As I was busy clearing the dinner table feeling somewhat like a busboy only a girl, I heard his young voice call my name. “Yes,” I replied without looking at him as I concentrated on the rag’s automatic methodical figure-eight sweeping motion like it had done this job so often my hand was only supervising. Again in his sweet voice he spoke with several pauses and hesitations, would I, after I tucked him in for the night tell him, “I love you”?

It was the jolted consciousness I thought only the dread of an on-coming car crash could provoke. My eyes were wide, jaw was dropped. Time stood still but only for a split second. Then a swallow, a weak attempt to push my heart back down my throat. Where to go now? Hurry! Again the question: Could I say ‘I love you.’?”

This time I was looking carefully at the child. His head was tilted to one side, his eyes were focused on me, his voice twice as sweet - you know like the pretty-please-with-a-cherry-on-top voice.

I recognized the posture, the voice tone - they were my own, imitated. He asked could I say it like that. That way that I knew from generations of caring hands. And again, this time more drawn out emphasizing the vowels in that two syllabled,
dia-toned voice some mothers use to call their children for supper. Only, like I said it was sweet - softer. "I loooove yoooo, Gooooood niiiiight."

He had repeated himself for a third time but I understood quite clearly the first time. He spoke. I froze. But, this is why our head-on collision wasn’t at all like a car crash: My teeth weren’t clenched. My buckles weren’t tight, white around a steering wheel, grasping for controlled direction. I soon relaxed, returned the posture, the voice tone and said from a very familiar place “yes, I think I can do that.”

We carried on with what we were doing but the conversation wheeled around in my head, for hours, days, and now months. That night I read him a story, tucked him a cocoon of blankets and as I turned out the light I stood in the doorway with my head tilted my voice and said “I loooove yooooou. Gooooood Niiiiight. From the darkness a child’s voice spoke in turn: “I love you, Kelly.”

As familiar as our destination first seemed, this momentary interaction more than just stretched a boundary, it swirled together two circles of care as the boundaries between public and private care became blurred. In the same way that self identity is a negotiation, as I explained in the previous chapter, so is intimate caring interaction a negotiation. The negotiation of caring interaction is one that invites risk. What seems like a simple question, “Kelly, will you say ‘I love you’?” is an example of the risk that Giddens discusses and involves the habitus that Bourdieu explains. As Giddens writes it: “The notion of risk becomes central in a society which is taking leave of the past, of traditional ways of doing things, and which is opening itself up to a problematic future.” (Giddens 1991:111).

There exists a social protocol between the worker and the client. For example, I have been taught by my co-workers to maintain clear boundaries of physical contact. Moreover, I was handed journal articles in university Education courses that cautioned teachers not to touch their students at all and to leave our classroom doors open at all times. In the workplace we discourage hugs and
kisses on the cheek and redirect the children and adults to give us handshakes or “high-fives” because this is one way of maintaining whom we are to each other, client/worker. All this has been explained to me as mechanisms for preventing misunderstanding of the relationship. From where I stand, it seems indicative of a paranoia that teachers and care-providers will be wrongfully accused of abuse. Perhaps I am naive, but I generally think that this is an over-reaction as I also think that children very rarely wrongfully accuse adults of abuse. While I do agree with keeping doors open or outlining clear boundaries of physical contact I do not think that touch should be eliminated completely. Douglas Smith writes of a patient’s need and right to be touched. He writes: “We recognize that children need touch to understand that they are loved, to feel secure and to learn trust” but that when it comes to elderly patients caregivers are not as apt to make this connection (Smith, 1997:121). Here I would add that touch seems to be as important to developmentally challenged people - and why wouldn’t it be?! Note that Smith, a man, is quite capable of being attentive, to the needs of “others” as he is capable of creating and extending care in his own way through his writing.

At first, the rules did sound cold but I did not worry too much about them because my clients and I were strangers to each other and there was no reason to hug each other. Moreover, there are very few people that I personally would initiate hugs with anyway and I know these people from the private sphere. What happened was over time, I developed voice tones, facial expressions, postures for different emotions, feeling and situations because a lot of the people that I cared for were non-verbal. With body language or one look a client might know that I was proud of them, that I was happy to see them or perhaps that their behaviour had exceeded the limit and that it was time for a “time out” (but I was hardly so lucky with discipline every time! Most often a verbal exchange
was necessary). The voice tone for praise was higher pitched and more drawn out than for discipline which was short and flat. That is why this example is so important. What the child described above was doing, was returning my facial expression and posture - the embodied *habitus* of our care.

More important was the question that the shrewd child above asked me and why it paralyzed me so. This is an example in which we were attentive and responsive to each other's needs. Whether or not he knew what he was doing, I'm not certain. However, it would seem to me that he had developed what Bourdieu calls "a feel for the game." As a soft rule, our relationship may not entail hugs. We do exchange words - but not these words and he is aware of this or he wouldn't be asking the question in the first place. Notice how the request offers new spontaneous content to our communication and the meaning of it and yet it sits within the boundaries of the worker/client relationship because he's still only asking. By asking me if I could tell him that I loved him he was testing and risking. First, he put me to the test with his question: do I love him? The process by which he opened the exchange is also, I think, an example of *habitus*. Further, it is similar to the point that Berger and Luckmann make about interacting with "others" not only as types but also in situations that are typical. (Berger and Luckmann, 1991:46) The child on some level knows that we negotiate his behaviour as I do re-direct his actions frequently but always with choices. Here, he is testing if the same process applies to my behaviour. In asking if I can say "I love you" he invites risk. He risks that I will say I won't and that would be considered a rejection that is generally not the desired response.

Whether my response is yes or no it was very important to care in responding because he had respectfully empowered us with a choice and for intimacy to be maintained the same respect must be returned as I must morally maintain the integrity of care and this does not necessarily mean that
I will love this child. For example if the answer were no, the negotiation could continue I might have said “I love you’s’ are for family members but I can tell you ‘I like you.’ To be honest, I am glad I did love this child because I’m not sure how I would look any child in the eye and say ‘I don’t love you.’ Some of the people that I care for I don’t necessarily like, let alone love, but I would never want to hurt their feelings. In other words, just because I do not love them, does not mean I do not care at all, I still treat them with respect. That is called “being professional” and is part of what is asked of one when caring in the public sphere. On second thought, after reading Tronto, (1993), I wonder if it could have more to do with being moral than professional. If care could exist without a psychological state of love, then perhaps I was simply being attentive to a need not to be harshly rejected.

In my affirmative response the risk becomes mine because it is my responsibility as an adult to decide if the exchange is appropriate especially given the workplace setting. Further, I know that this would not be something that I would say to every client. I am not in the habit of mass producing cookie-cutter-care that is uniform to everyone nor do I think that I should be expected to act out such a lie. Ignatieff writes that “it seems a fact of life that individuals have different needs.” (Ignatieff, 1984:135) I agree and think this more so in our time of modernity. Each client is different and considered “special needs” so they are all treated differently as far as rules and expectations are concerned. The bonds between us are different because we interact differently. It is not that I am playing favorites. It is that I have recognized that we might have a need to be treated equally and so I am equally attentive to the multitude of care needs and care responses that “others” express. For example, I may bond with one child by holding her hand while she has her G-tube feeding; Another, I may sing camp songs with; Many, I bring to my parents’ cottage to try Kayaking. These
differences add to the reality of our intimate bonds. Our exchanges with “others” help us shape who we are to our selves and each other and our identities shape our exchanges. Between the two, exists a narrow margin with which we can play. Being attentive to these differences is the first step in becoming morally humane to meld the ideas of Tronto (1993) and Ignatieff (1984).

The Exceptions to the Rules:

Returning once more to the rules about hugs, let me tell you about those few moments when we have skipped out of the narrow margins that contain us. I have to admit that it did seem cold at first to tell a child that I would prefer a handshake when they would hug me at the beginning of the shift because they missed me or just because I had done something nice for them like planning a fun outing. I would rather just let them hug me so as not to reject their thanks. I was working against the familiarity of my care. I further have to concede that I have softened on this rule where children are concerned. If they volunteer an occasional hug, I generally don’t stop them, but on the other hand I never initiate a hug either. I usually offer them a “high five” or a handshake and most of the time they, in turn, follow.

Again, I liquified this rule for one client, the same one I described rocking to sleep. He is hardly a “client.” It’s hard to say why I instantly connected to this child. I think it is probably because he was the youngest, most like a baby. Moreover, in rocking him to sleep, the connections we formed were identifiably more maternal and more typical of the private sphere.

I can recall a woman, an author on television describing the way a mother recognizes the smell of her child’s dampened hair after a bath. The discussion reminded me that I too know this scent very well and yet, I am not a mother. A memory bubbled to the surface of my mind. This was
the recollection of a moment where, much later after my shift work was over, when I untied my ponytail and smoothed my own hair, tucking it behind my right ear. It was then when my hand brushed my face and I was at home living the life of a student, that I smelled a scent reminiscent of children's shampoo and his soft curls. This was a smell I knew by heart and yet he was not my child nor I his mother. I intuitively knew there was more to my being able to recall this scent because I have bathed dozens of other clients and the only smells that I can recall set my stomach churning and these odors are not particular to any one of them. Generally, I pay as little attention to those smells as possible.

The reason that I am able to recognize the scent of his hair is because it is only his hair I shampoo without gloves. I always wear gloves to bathe clients as a means of not spreading germs or skin conditions from one client to the next. This practice comes of the mass production of, and medicalization/technicalization of care. The rare exception is this child. It may sound quirky but I'm not the only one who has an exception to the rule. Often workers don't bother with gloves when bathing one or two of the very young children. Mainly, because the gloves seem ridiculous. It is not open heart surgery, it's a bath and the child splashes so much water around I get showered with his bath water anyway.

In the beginning, I did wear gloves when bathing him too but the purpose was always defeated. I would have had to wear a wetsuit to protect myself. The medical/technical reasoning for wearing gloves aside, this practice produces a consequence, a reality that I had not realized until I forced myself to follow my gut feeling and peel away the layers of this experience on a hunch.

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3. This is just a quick note to point out that I do fully support the reasoning for using gloves. In fact, I have become more finicky about germs since working in the public sphere. Probably, I am over cautious and over use gloves.
Wearing gloves protects from germs but also prevents us from knowing our clients in this way, an example of the way that Ignatieff writes that modernity blocks us from knowing “others” and our needs and theirs (1984:138). I do not think it represents a conscious effort to block the “other” but it is a practice that does work to distance us from the “other,” all the same. Similarly, I did not consciously decide I won’t bother wearing gloves when bathing this child. I just gave up on it because it was useless. The consequence to this action, was that my knowledge of him took on a motherly form and solidified my bond to him in a distinctly more private way. This is the consequence of modernity on my care at work. Feelings and identities that were once associated with the private sphere become either blocked or disembedded and re-embedded into the public sphere. Confusing? Definitely. This is precisely why meaningful relationships in the present time require so much reworking and negotiation.

It is very interesting how smells can bewitch a rainbow of psycho-social feelings. These colourful scents aid us to remember the meanings of our social ties and alert us when there is a mismatch. I did not immediately connect the scent of dampened children’s hair to a motherly context and identity, but I did know it was a scent that was familiar and accepted. Other scents I rejected because they felt out of place. I know this because I wear gloves when shaving clients partly for hygienic reasons but also because I would hate having the smell of their shaving products stained on my hands. Once, I spilled some shaving products onto my clothing and was very much irritated by the long lingering fumes. There is something distinctly different between having the smell of shaving products and the smell of a child’s dampened hair on hands. The latter is motherly, the former is not. One scent fits with my identity and our social tie, the other did not.

That is what I mean when I say our connections are different and thus the boundaries and
circumstances as well. There are even boundaries around my knowledge of the scents of “others.” As I said earlier, most of the other scents of caring set (apart from banana bread baking in the oven) my stomach churning mainly because they are associated with caring tasks that I do automatically, mechanically and in a detached manner. The only way I can connect doing these tasks is to say to myself, “if it were me, what would I want my worker to do?” In rationalizing it this way, I do not really do it (clean, change, or shave) for the client but rather in the hopes that I would be treated this way if I were in their place.

**Competence, Harm and The Caring Interaction: A Contradiction in Terms**

There are times when harm unfortunately enters and erodes the caring interaction. I will give two examples of this. The first has to do with unintentional errors that the worker might make. The second has to do with when a client harms their worker, for example biting, scratching, mean words. There is a third type of harm. It is known as abuse and is a complete violation of the caring interaction. I do not address this issue here in detail because it lies beyond the scope of my current study of care. It is not that I deny that abuse exists within circles of care it is that I haven’t the space to explore the complexities of abuse here. However, I will remark that abusive actions stand only to destroy any project of intimacy because abuse inherently involves stripping another of their choice, respect and dignity. Such a degradation has no place in the intimate caring interaction.

Part of the work that I do entails technical care for example: Administration of medications, tube feedings, tracheotomy care, etc. They all told me that everyone makes mistakes, but I arrogantly thought I would never. Like everyone else, I made an error. One day while on private contract work, I was tired and not feeling well as I prepared a child’s tube feeding mixture.
Although I read the instructions her mother had left me, I couldn’t have paid enough attention as I mixed the cans of liquid food. The problem was that I acted out of habit. As I looked down at the instructions that her mother had left me immediately realized what I had done. Panic struck. I had mixed the food as I normally would for another client twice her age. Within a few minutes the child became obviously very uncomfortable as she was red faced, screaming and soon vomiting. I called doctors, nurses, health lines, co-workers because I was so worried about vitamin poisoning. They all told me that all I did was overfeed her (like a turkey dinner instead of a sandwich) and that it was not as though I made a mistake on a medication. Nonetheless, I felt extremely incompetent and worse I felt so guilty I was crying and shaking as I cleaned her. How could I be so careless? What if the mistake had been with medication?

Take a look at what her discomfort did to my feeling of my self. While I don’t think I stopped caring about her, I was negligent with the way I cared for her. My negligence was not purposeful as in an abuse situation where I purposely did not tend to the client. Rather, it was negligent in that I made a mistake that I would never intentionally make and further one that I immediately wanted to correct. Her discomfort pulled my actions and feelings together and aligned them in a way that they obviously were not minutes before. Why?

Part of it was out of guilt and a feeling of wanting to right my wrong but there was much more. As a child with limited communication, she does not speak, and it is not known to what extent she sees or hears. Generally, she seemed content because I changed her frequently, fed her properly, repositioned her for comfort. The interaction between us is a matter of me maintaining this feeling of contentment for her. It was difficult to watch her in discomfort because I cared about her and felt empathy for the pain of another human being and because I had caused the discomfort.
I just never realized how much because the care plan shifted from maintaining contentment to restoring contentment. Further, we should notice how my sense of self became contingent upon her comfort. If she was comfortable, it was because I knew I was careful. If not, I would have more work to do. Lundgren and Browner (1990:159) report that psych techs “were unanimous in their view that their primary function was to maintain residents’ emotional and physical needs.” I would concur with this idea, but I would add that this “primary function” itself has a root function that is very much self-serving. Our own identity as “caregivers” is continually reflexively recreated by serving this so-called “primary function.” This “primary function” of caregiving is not only about responding to the needs of the client it is about continually resecuring the identity of caregivers for ones self.

This was a moment whereby I faltered morally and my identity as an ethical being was at stake. Albeit my intentions were in the best interest of the child, my momentary incompetence meant that my care had not adequately met the needs of this child. That I felt so badly, is a reflection of a well-socialized ethic of care. These moments, although unfortunate, do serve a purpose. I was forced to recall the ethic of care. I was reminded of the accuracy needed in my care. Further, it called me to immediately take responsibility for my incompetent care if I was to maintain my moral standing as an ethical carer. Tronto erects the concepts of competence and responsibility as moral pillars to her ethic of care. (Tronto, 1993:131-134)

The identity of the “other” is also created and negotiated by the caring interaction. The children that I have worked with who do not see or hear are the most extreme example of what I am about to tell you. I create who they are, what they are thinking by reading into indicators that may very well be random because I simply don’t know. For example, I often feel that when I greet one
child my holding her hand and gently shaking it she recognizes my touch and knows it is I because she is smiling. Am I really sure she knows it is me? Of course not, but it intuitively feels that way. I have a reality in my mind that represents our relationship and that she is very much a person that I care about and want to care for. She has an identity and a temperament that she has shown to me, but I know the reality of her personality and it is not because I own it. Church explains the relationship between self, body and other (by implying the necessity for ownership) by writing the following:

A body belongs to a person when and if the psychological states of that body are integrated through reflection in such a way as to constitute a person or a self. When and if the mental states of a body are not so integrated, no ownership (of this fundamental kind) is possible because there is simply no person or self to be the owner; nothing can be your body if there is no you. Thus, becoming a person or a self and coming to own one’s body are not two different processes (first the creation of a will and then its application) but, rather, two faces of the same process a process whereby the psychological states of a body are simultaneously integrated by and integrated into an overall conception of the self. ... Note that if a person is a set of integrated psychological states then one can be a person or a self to a greater or lesser degree depending on the extent to which one integrates the body’s psychological states. (Church,1997:92-93)

While I commend her efforts in trying to move beyond the duality of contradictory “liberal, American feminist thought and radical French feminist” thought by employing a postmodern “both-and-at-once” stance, her theory seemed to fall apart as I applied it to my experience of physically and mentally challenged people. It is not that I am saying that she is wrong but that given my experience her theory has little comfortable application without modification. Church carries with her modernist preconceptions about the self as she gives primacy to psychological reasoning as fundamental to integrating the self and owning the body. Our personhood, she explains, is not immediately bestowed upon us at birth. The law may recognize us as a person from the moment
we are born and before but this does not mean that we have achieved personhood (Church 1997:97-98). It is about integrated mental processes. But what then, do we do with those whose psychological processes we cannot access? Shall I really call this child I have come to know intimately a “lesser person” because I know little of her mental processes? No. I can agree that there is work to be done where self creation is involved and, yes, it is in part a process but she does not have to do it all on her own. I know her self exists not because she or I own it. Rather, it is because we share ourselves with each other that I know we both have personhood. The modernist concept of ownership would be inappropriate for distinguishing personhood because this child has little ownership over her body in the sense that Church implies and yet to many “others” and me, she is very much a person. Church writes:

One experiences a body (or body part) as no longer one’s own when it either becomes lifeless or takes on a life of its own - that is, when it resists integration into one’s life or acts independently on the basis of beliefs and desires that are not a part of one’s self-conception.” (Church, 1997:93)

This body that is hers does not jump up and run outside playing like other children, and yet it is hers. Together, we have learned not to think of her body as “broken” and we work its value into our “beliefs and desires” for her. Her body has a name, gender and character traits - a “fighter,” “tough” I have called her. When I do the laundry, I know which clothes belong to that body - and I do not think of her as just a body - at least not anymore. She is more than just a doll that I dress, change feed, and bath. She tells me who I am, without speaking a word. Between her giggles I hear her thoughts: *caresharer she thanks me through her laughter.* Beyond this, whom we are to each other escapes language. For that, I very much value the person we have made her to be and the person that we have made me to be for that matter. I am started from a different reality. A reality that
knows the self as communal rather than owned. It is that I think that personhood has more to do with intimacy than ownership. It is through intimate caring interaction we have brought each other into existence and solidified our mutual personhood.

In the pure relationship according to Giddens, intimacy is not about dependence. (Giddens, 1992) However, in my case of care at work all interactions are to some extent a matter of dependence on the part of the client because they are so vulnerable and need so much assistance with daily living. Still, despite this dependence, I think that there exists room to create intimate bonds. It is because of this vulnerability that there is little room for mistakes in our caring interactions. While Giddens maintains that mistakes will happen and simply require risk in addressing these social errors. (Giddens, 1992:106) I feel, however, that the circle of care within which I work, I must continually watch my words and actions so as not to evoke mistrust. As democratic as I could try to be about a caring interaction trust would be very difficult to renegotiate with someone who has limited communication. From where I stand, these clients may know little of intent, but clearly they feel the difference between comfort and discomfort.

Another form of harm has to do with clients who commit violent acts against their care providers, for example, by biting. It has happened to me on occasion (not very often) and there is an immense feeling of resentment that comes with the hit, scratch or bite. After spending my day doing kind things for someone, I am not interested in being bitten. Sometimes when “others” say “It’s not their fault,” or “they don’t know any better.” I am only more irritated by the double standard. Understand here that I am in no way suggesting that I as a worker be able to defend myself in return with an equally violent act because “others” are right to say that most clients who are violent do not fully understand the impact of their actions. It is just that there is something off
in a caring interaction whereby one person is allowed to act violently towards another whether it is the worker or the client committing the act. Intimate caring interactions are difficult to built under these conditions. The reason is that while one child's giggles call me a caresharer another child's bite and scratch call me something much different.

It was in these difficult moments of contradiction in what counts as acceptable that I uncovered a need. It was the need for my clients to appreciate my care and show me, in turn, that they did indeed care. I in some sense needed to know that my care was not just given in vain. I needed to know that this care was something that we would share. I need the identity of the caresharer even more than that of mother. These moments of contradiction I would have to accept because my clients clearly did not know any better and I had to show a responsibility in my position of care. These moments would be of the most difficult. Now, let us return to the positive experiences of our care.

The Power to Build the Sub-System of Co-Care:

As I wrote above, intimacy is not about dependence. And again, all caring interactions in the workplace are to some extent a matter of dependence on the part of the client because they are so vulnerable and need so much assistance with daily living. What my clients and I have done, is to engage in the creation of a sub-system of co-care. While I help them with daily living, they help me discover and define who I am trying to become - caresharer. This is how we move toward the most rewarding pillar of Tronto's ethic of care, integrated care. (Tronto, 1993:136-137)

Spending time with nonverbal immobile people has taught me a lot about myself for example that I find great satisfaction in knowing someone is comfortable because of my caring.
activity. I know who I am because of the words I speak to them without expecting a response. One of the greatest gifts for me was co-creating a space where perfection was irrelevant, and normal only meant that it was a given that we all have some unique differences to deal with. In helping “others” feel more comfortable about whom they are and what they look like, I found myself feeling the same. I have come a long way from being someone who redrew and repainted a grade three class project because the children’s penguins were misshaped. It was interacting with special needs children that brought this out of me. They helped me become who I am today - a person who celebrates difference and understands that we all want a place to fit. I share a special bond with them because we taught each other to care for each other in our own way.

I have learned that sharing care creates ripples that extend far beyond the immediate client. As I went into their homes to care for their children, I saw mothers, fathers, siblings, rested smiling ready once again to care for their challenged family member and very much appreciative of their break. I learned that to care for a client. I also care for their family. The caring intimate interaction is about listening to an elderly woman tell you about her weak kidney and showing empathy. It is about accepting her advice that I should give some thought to the idea that “we do not live and love alone.” Her wise advice was care not returned or lost but multiplied. Intimacy is a matter of time and space. As much as intimacy might be possible over the Internet or over the phone. I really think that we need meaningful face-to-face caring interaction and not simply to be called a caregiver and be pushed into situations that are clearly not caregiving.

I have learned that sharing even a few moments listening to a mother, I mean really taking the time to listen her when she explains how awful it feels that everyone blames her for the way her children are. It’s about taking the time to realize that maybe I was wrong, earlier that morning when
I thought to myself - this woman brings on her own problems and genuinely feeling badly that I judged her. It’s about validating her need for help by providing her unbegrudged assistance. To my surprise, it was also about her listening to me and about why I don’t have children when I would like them. It was about her, telling me, how much she would like to be in school but she’ll wait until her children are grown. Intimacy was about two women from two very different places standing in one kitchen, telling each other the story of their lives - two stories that revolved around one idea, their care. It was then that I realized the true meaning of a circle of care: that when I cared for her, I cared for her children and when I cared for her children, I also cared for her and for this they cared for me. Our conversation was an hour-long exchange which I wouldn’t dare cheapen by accepting a wage. I may have been hired to lift her son into his chair, but that day the weight and pull that I felt had little to do with gravity tugging on his frail body. Within our own means of production we pushed the cycle, recursively/reflexively, using our voices to create and multiply our power as we built and negotiated intimate caring interaction. For that hour we stood face-to-face, spoke heart-to-heart and shared our care.

This final chapter has been the most difficult to write on many accounts, both personal and academic. Still holding Paulo Freire’s optimism at heart I wanted to tell you that we could each choose to take a stand, choose to act accordingly. I wanted to tell you that we have the power to change our system of care but it not always so simple, not impossible just not so simple. I had to search out margins and loopholes and take risks leaping into uncharted terrain and lending myself to the “other.” And now, after this long journey, upon what contingent foundation have I settled? I have not. Intimacy of the present day has not a foundation upon which we can settle. You see the projects of intimacy and identity formation are ones that remain in constant reflexivity, recursivity,
oscillation and renegotiation. This project has been bouncing and spinning for at least two years, if not my entire life. Now when I look at some of my initial questions “What is the power of one? Where is it located and what is its form?” I know that my self has undergone a transition. Today, I would not begin a project seeking the power of one to change a system of care. I wonder who I was trying to be? The question fascinated me as I wondered what could I do to mend this broken system? How much could I do? How much would what I tried to do matter? But really, how could I use myself to fix a lack of solidarity without first recognizing such a project as an abstraction of my self from her social and natural environment.

What is more fascinating to me now, is the way that question has spun of into a historical epistemology of my thoughts. The question has become relatively irrelevant as the “other” was worked into my question reducing the power of one to a finite concept. Here I have spent two years and what seems like a forest of paper peeling away at the meaning of scents, mistakes, scratches, bites, hugs, kisses and kind words and for what? Intimacy is about creating, defining, re/negotiating and extending what we have to offer to each other. Intimacy is not that we become each other or boldly define each other, but that we work together to negotiate each other. Giddens (1992) talks about bringing democracy into the personal everyday life. My suggestion is that we also bring this idea of democracy into professional circles of care as my clients and I have tried to do. It is happening as we see a move from institutionalization to family relief programs that allow clients to live with their families and provide assistance to their families. Group home settings or relief care programs permit clients, workers and extended families to create subsystems of care that extend beyond care for a wage. I noticed this most when I became part of a relief care program that goes into the homes of clients to provide care. It helped me see that clients had families of their own and
that if I were to be considered family it would be of a different kind. I think that we have found freedom and choice in more or less negotiating whom the client and I will be to each other. Some I am more like a friend to, some more like family, for “others” I am just a worker and I accept that. Some mothers pack an extra sandwich for me in their child’s lunch or have given me a Christmas present, I have brought treats with me for children I am going to care for, I have spent extra time with clients, I have socialized with clients at fund-raising events. I do not consider this care to be exploitative as I consider it a choice against the option of simply getting the job done. I feel more connected now because although the clients I deal with still come and go, I know they will be back and I know they will remember me and I will remember them. At this point, we share the history of our care that extends beyond the client and myself but across our families. Thus our social ties are strengthened and grounded by a sense of community and this helps reduce the feelings of alienated care that I had early described. Our project of shared care was well underway.

An Afterward: The Not-so-Final-Conclusion

I call this afterward not so final conclusion because while I am summing up what I have to tell you, I do plan to come back to this paper and these ideas. I have a feeling that this Thesis will mature with age. At first I thought it would be interesting to wrap it up and tuck it away as a 50th birthday present to myself but then I wasn’t sure I would be able to wait that long. Perhaps, I will review it and add to it every five years so that the anthology of my self will continue to grow. In either case, I know I will come back to what I have written and my perspective most likely I will have changed. Until then, this is what I have to say:

I set out on a project of autonomy one that would find the power of one and behold the
almighty gendered *habitus* at work. To what extent did I even succeed in choosing this topic? I could have written about agency and the duality of structure or options and habitus as applied to any given social relation. So, why have I spent two years writing about the power of caring, sharing and intimacy?! The answer: because it is so deeply rooted in what I know of the world and myself.

I may not yet have figured out exactly what happened to a group of teenaged girls in the early 1990's but there is one thing that I am sure of. I am sure that these pieces of writing that I have put together and shared with you here, represent an alternative social response to a similar reality that we once shared. You see I didn’t escape the structured system, I simply found a familiar alternative feel for the very same game. My choice is not worth less, nor is it is not worth more. The card I played allowed me to create power by sharing my care with "others" who helped me to invent a new type of relationship and a new identity, one can encompass friendship, guardian, family and carer. It is an identity that is morally bound to the "other" through an ethic of care that compels us to keep, ever present in our minds, that humanity exists in our need to share our care.

The circles of care are solid and heavy social spheres to move. They are difficult to move in any direction but this new relationship helped us work the system of care, deal with patriarchy, capitalism and modernity, not once and for all but in the best way that we could - by creating a subsystem of co-care. In actively renegotiating these relationships, and risking ourselves to each other, together we found our power to share our care. It was precisely by being fully engaged with "others" in this project of renegotiating the caring self with "others" that we were able to multiply and extend not only our care but our power to exert some redirection of a system of that has long been established and rooted in patriarchy, technocracy, and capitalism.

While I am still caring for a wage and doing this activity that is still considered to be
“womens’ work” the social atmosphere of our circle of care has changed because we have tried our best to renegotiate our interactions in order to make them more intimate if only on a micro social-level. My project has pushed me far beyond “going native” as a researcher I have “gone family.” As a co-worker tells me she thinks of me as a sister and as a child asks me to tell him I love him, I know I have succeeded in engaging “others” in my project of shared care. And, if I have stalled the process of putting our project into words it is because I know that I must leave this extended family, something I am not quite sure how to do or even if I will do. It may be a job that I could leave but I cannot leave the people, co-carers and clients alike, because we have come to know and need each other in an intimate way. I can see myself stopping in for visits home or even volunteering my care in one way or another so as to maintain my identity as a carer morally guided by an ethic of care in a state of integration. In our common need for differential care, not only the self and the “other” but I have found the need for humanity.

I leave you with one last thought on the modernity of care. I will draw here on Ignatieff one last time as he explains images of our urban belongings illustrated in painting and literature. He writes of images whereby individuals are together anonymously, together in their estrangement from one another. He states “In these images of civic life, loneliness and belonging, togetherness and estrangement live cheek by jowl; every exchanged glance, every instant of pleasure, is tinged with portents of loss. With urgency I tell you that the very word “caregiver” in modern care and the experience of it can be akin to such images if we do not address the dishonesty, and abstract nature of such care we shall be doomed to disconnection. The reality of the experience haunts me more than the images he described. I stood next to the “other,” interacted with and even cared for the “other” and for quite some time we remained strangers guessing each other’s needs. Every instant
of caregiving was taxing, draining as it presumed and reestablished our disconnection and masked and stifled our need to share our care. I now know that it is true that the price of a virtuous woman is far beyond pearls. The price the modern woman pays to be virtuous by these religious rules is the cost of herself. I extend to you from a place where self and “other” co-exist humanely both as one and in difference, a politically packed word intended and aspired to shatter the type hollow care that I experienced and replace it with an identity, social theory, politic and ethic with which to know the differences of the “other” not as a stranger but with integrity and solidarity.

As my self swirls into and out of the “other,” we present you with the word that helped us transform intimacy and locally blur the spaces of public and private. This word that helped me create and understand the identity, social theory, politic, and the moral ethic of care with integrity and respect for difference. Indeed this word is the “caresharer.” Knowing well that we have now become intimately bound to return to each other, this caresharer no long feels the need to desperately scurry about these pages. Until we meet again in care, I thank you for being attentive and sharing my need to share my reality of modern care and vision for shared care. Take care!

“Let the man among you who has no sin be the first to caste a stone at her”

(Jesus in John 8:7)

I have strong faith in my choice.
Bibliography:


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