

Relational Autonomy

Nel Noddings

In this talk, I will consider autonomy from several angles. First, I'll consider the familiar social/political idea of autonomy as individual independence or self-sufficiency and feminist critiques of this concept. Second, I will say just a bit about the philosophical debate between determinism and the idea of an autonomous will and argue that we must reject both extremes. Third, I'll explore a possibility compatible with care ethics—that of relational autonomy or limited autonomy conceived as choice and responsibility within a certain span of control; it is a view that acknowledges human dependence and respects those who provide care. Finally, I'll say something about the connection of critical thinking to the development of relational autonomy.

Autonomy as Individual Independence

Martha Fineman writes of “the autonomy myth” in an attempt to construct a persuasive theory of dependency.ⁱ When we say that an individual, group, or nation is *autonomous*, we usually mean that it is not under the rule or control of other individuals, groups, or nations. In a political context, we often identify autonomy with freedom. In a social/economic context, we see it as almost synonymous with self-sufficiency. An autonomous individual can take care of herself or himself. In the United States today, we put a high premium on the autonomy of our nation and its individual citizens. Fineman comments:

Our all-American hero is therefore the autonomous individual, protected by law from unwarranted interference with his rights by other individuals and by government on any level, and free to conquer the frontier, be it westbound or upward into space. The rhetoric of individual freedom and rights incorporating an ideally restrained and limited government permeates our society.ⁱⁱ

In calling autonomy a “myth,” Fineman is not labeling it a falsehood, nor is she rejecting the idea of autonomy entirely. In the United States, we have elevated the concept to a myth. Myths are enormously powerful; although subject to revisions and distortions over generations, they claim continuing devotion. To reject a national myth is to risk having one’s national allegiance or patriotism called into question. Powerful myths infect whole cultures, and it is not surprising that Americans who cherish their national autonomy also admire individual autonomy and look with pity or contempt on those who are not self-sufficient.

An ethic of care attacks individual autonomy at its roots. It agrees with Fineman that we are all born dependent and that many of us require “care” at various times in our lives. Fineman uses *care* as I’ve been using *caregiving* or *caretaking* and she is surely right to point out the continuing human need for care in this sense. However, care theory goes further and insists that relation is ontologically basic and the caring relation morally basic. *Caring* as it is described in care ethics cannot be equated with caregiving; it is a moral way of life. We are individuals only within relations. We are recognizable individuals as separate physical entities, but the attributes that we exhibit as individuals are products of the relations into which we are cast.

Most of us desire and claim a certain amount of freedom in organizing our own lives. This freedom has come relatively late to women who, until recently, have been expected to recognize men as their masters. Even today, some religious groups in the United States insist on a dominant role for husbands and for males generally. I have suggested that the long centuries of subordination forced women to learn to “read” the males who directed their lives. The resulting capacity for empathy should be highly valued, but subordination should end.

Subordination and dependence are both looked down upon in a society that has embraced autonomy as a myth. All those tasks that have been assigned (or “fallen naturally”) to women have been undervalued and underpaid. It is not that caregiving tasks are unimportant. Most reasonable

people admit that the quality of care provided for children, the disabled, and the elderly is a mark of a society's goodness and decency. The tasks are undervalued because they have been performed by women, and women have been considered inferior to men. It follows that tasks performed by women must be inferior tasks.

Fineman, in seeking a “tenable state,” recommends that the importance of caregiving be recognized by law. As a foundational commitment, the society must take collective responsibility for dependency. A progressive, democratic state

would provide two different types of fundamental social goods—[such as] housing, health care, a minimum income guarantee, and other necessities...

The second type of subsidy, which is specifically directed at supporting caretaking, requires the state to ensure both material and structural accommodation.ⁱⁱⁱ

A move toward the first sort of subsidy in America will almost certainly occur, but it will be slow and highly contested. While much of the Western world has made substantial moves in this direction, Americans are still horrified by anything resembling socialism. “Socialized” medicine or anything “socialized” is anathema to many Americans.

I want to spend a bit of time here on the second type of subsidy and its correlates in education and public discussion. In agreement with Fineman, I think government must be involved in regulating the practices of employers with respect to the caregiving responsibilities of caregivers. There should be a way to reduce the professional penalties women pay for acting as caregivers.

The problem is first a social problem, one of status and ascribed worth. Working women want affordable childcare, but subsidized care is sometimes of poor quality, and it does not meet the need to care for children who are ill, for those over the age of six, or for those whose parents work odd hours. Like the general public, many professional working mothers are unwilling to pay a respectable wage for childcare. Instead, they often hire illegal immigrants, pay a low wage, and

avoid paying social security and other benefits. Thus, a widespread attitude neighboring on contempt is directed at childcare and its workers. It is astonishing that so many citizens—both women and men—do not see the contradictions in the positions they take toward childcare. They seem to have adopted what Orwell called *double think*—“the power of holding two contradictory beliefs in one’s mind simultaneously, and accepting both of them.”^{iv} On one hand, children are said to be our treasure and our national future, but their caregivers are not worth much. We want affordable childcare, but we do not seem to care if the workers who provide it live in poverty.

An ethic of care builds upon our desire to respond positively to need. When we cannot do this as individuals, we must draw on a care-driven concept of justice. But the collective will to build such a concept and live by it depends on a dramatic change in social attitudes. This is, at least in part, an educational problem, and here we are up against the longstanding complicity of women in their own denigration.

How often have you heard Commencement speakers urge graduates to engage in childcare? Where in our schools do you see any commitment to serious learning about and involvement in parenting? Is there nothing to be learned in this area? Can you imagine a Commencement speaker advising graduates to spend two or three years with young children? Or to become a nurse’s aide and learn something about suffering and the hard work of alleviating it? In our “best” high schools today, young women are advised away from the caring professions. A bright young woman who wants to be an elementary school teacher is likely to be told that she is “too smart for that”; she should set her sights “higher.” And most of us, subordinate even in our thinking, agree.

There is surely a set of educational problems here, but women too often work against reasonable solutions. Women should, of course, have access to the occupations that have conferred status and wealth on men. We should have some control over our own lives and futures. But what of the activities for which we have had responsibility for centuries? Should we agree with men that these

occupations, paid or unpaid, are worth very little? The discussion here leaves us with an uneasy feeling that, although we want to control our own lives, we may be unavoidably heteronomous in our thinking. That worry raises a deeper question concerning the notion of autonomy. In what sense, if any, are human beings autonomous?

The Possibility of Autonomy

Philosophers and theologians have argued for centuries about the problem of free will versus determinism. Either position, taken as absolute, leads to complications that may be irresolvable. B. F. Skinner, for example, argued powerfully that human behavior is conditioned through the reinforcement of responses to various stimuli. He enthusiastically welcomed the abolition of autonomous man: “His abolition has long been overdue. Autonomous man is a device used to explain what we cannot explain in any other way.”^v Although Skinner’s position (at its extreme) has been discredited by, among others, Chomsky and Piaget (“in the beginning was the response!”), there is much of value in his work, and I’ll say more in the discussion of critical thinking about the difficulty of listening to those with whom we have fundamental disagreements.

In opposition to determinism, philosophers have long argued that not only are we free, autonomous, but that such autonomy is an unavoidable pre-condition for fully human life. Kant was not the first thinker to argue for freedom of the will, but he is surely one of the most influential. We can certainly agree with him when he points to the fact that humans see themselves as having free will and that the idea is sure to be influential in guiding our actions and judgments. But he leaves the concept of free will unexplained, even as he posits a “good will” as fundamental to moral action. It is hard to reconcile the claim that we have free will with the insistence that, as moral agents, we are entirely governed by the “moral law within.” Another important objection to Kant’s position on morality arises in response to his insistence that the moral law is entirely a product of

reason. This claim was, in part, a reaction against Hume's opposing claim that morality is based in affect and emotion. With his claim for the exclusive reign of reason, and thus of duty, in the moral domain, Kant arbitrarily dismissed women as moral agents, because he believed that women did not possess the reasoning capacity to participate in genuine moral life. He acknowledged that women often do the right thing in many situations, but they do this out of a kindly nature—out of caring—not as a result of reasoning from which they conclude that an act is one of duty. For Kant, there is no moral credit due for acts done out of love or inclination. Thus, the Kantian notion of an autonomous will subject only to reason is not compatible with an ethic of care.

More recently, existentialist philosophers have extended discussion of autonomy and human freedom. Jean-Paul Sartre, for example made freedom the very basis of his description of human consciousness. For Sartre, our freedom is frighteningly complete and, on recognizing that freedom, we suffer anguish—sometimes to the point of nausea.^{vi} We cannot escape our freedom, although we can deny it and live in bad faith.

Viktor Frankl, an existentialist psychiatrist, also saw freedom of consciousness as one of three factors characterizing human existence. A survivor of the Holocaust, Frankl saw clearly that we cannot always control what happens to us. Jews in Nazi-controlled Europe had no control over their physical conditions. However, Frankl said, they could still choose their attitude toward their suffering.^{vii} I have argued strongly against that claim.^{viii}

Consider what happened to Winston Smith in Orwell's *1984*. Imprisoned and tortured by the evil O'Brien, agent of Big Brother, faced with his greatest fear—rats—Smith ultimately betrayed Julia, the woman he loved. To save himself, he begged that the rats be removed from his face and set upon Julia. Something of the same sort happened to Julia. Both were morally destroyed. While he was still able to reflect on the matter (even that capacity faded away), Winston thought:

“They can't get inside you,” she had said. But they could get inside you. “What

happens to you here is *forever*,” O’Brien had said. That was a true word. There were things, your own acts, from which you could not recover. Something was killed in your breast; burnt out, cauterized out.^{ix}

We have come to a turning point; we are not absolutely, completely free. We are, at least to some degree, at the mercy of things done to us, things that happen to us. The questions now must be: given that we have *some* freedom, how shall we describe it? How do we acquire or lose it? How should we exercise it?

Relational Autonomy

So far, I have rejected views that place either a real or metaphysical individual before its ends or desires or, even, before the influence of the groups into which she or he is born. Kant’s transcendental, autonomous self—beautiful as it is—has no basis in reality. Similarly, Rawls’s hypothetical thinker in the “original position” behind a veil of ignorance can be little more than a fiction—part of a game that ends with the intrusion of real life.^x Some liberal feminists also subscribe to the priority of the individual. Martha Nussbaum, for example takes this position when she says that “the flourishing of human beings taken one by one is both analytically and normatively prior to the flourishing” of a group.^{xi} This is not to say that the results achieved by these questionable beginnings are not useful, perhaps even defensible. They deserve thoughtful consideration but, perhaps, a different theoretical base. The liberal notion that distinct individuals precede the formation of relationships is contrary to what is easily observed in human life.

Some sense of autonomy—some concern with the control of one’s own life—is vital to care theory. I have discussed the difficulties faced by care theory when *caring* and *caregiving* are equated, and I have recognized the longstanding complicity of women in their own subordination. Indeed, the most damaging feminist objection to care theory is that it seems to endorse the self-

sacrifice and subordination of women. It is, therefore, especially important for care theorists to deny this charge and to suggest a defensible view of autonomy.

Feminists have started to describe a form of *relational autonomy* that recognizes a relational self and is concerned with options, opportunities, and competence.^{xii} Cationa Mackenzie and Natalie Stoljar point out that debates about autonomy arise from confusion over the meaning of the concept: “The most obvious example is the caricature of individual autonomy as exemplified by the self-sufficient, rugged male individualist, rational maximizing chooser of libertarian theory.”^{xiii} My preference would be to speak of limited control rather than autonomy because of its long association with individualism and male dominance. However, it may be strategically wise for feminists to use a revised version of the concept that is so central to the myth of Western liberal democracy.

It is clear that we are not autonomous (free to choose) in many of the categories governing our lives. We do not choose our parents, the cultural groups into which we are born, our first language, our economic status, the genomic patterns that predict our physical characteristics and talents, or our first religion. When a decision is made to give up religion, family, or nationality, it is because the decision-maker seeks greater control over his or her life in those areas within the span of control. Most of us want to limit external control over our lives, choose our occupational path, and work out our own opinions on matters of importance to us. Today most of us feel sorry for women who are prevented from choosing their own marriage partners, educational preparation, and occupational life. But even in cultures that closely prescribe how women must live, there is a span of activity in which they exercise some control.

How do we decide what is or ought to be under our control? Oddly, the beginnings of whatever control we eventually achieve are heteronymous. If our culture is one in which the formal guidelines are anchored in liberal-democratic thought, we will generally have a wider span of

possible control than those in more tightly ruled societies. If, within a liberal-democratic cultural, we are also free from religious hierarchical rule, we will have considerable independence. And if we are blessed with parents who encourage us to make wise decisions, we may achieve a substantial degree of autonomy. Even so, our span of control will tend to expand or contract as our situation changes.

In care ethics, the emphasis is on caring *relations*, not on virtuous, caring individuals. Relational autonomy, then, refers to the morally justifiable span of control available to us as members of various relations—as parents, spouses, teachers, citizens, friends. It is an autonomy characterized by reciprocity and mutuality. Indeed Virginia Held has called for “mutual autonomy,” a shared form of control that “includes mutual understandings and acceptances of how much sharing of time, space, daily decisions, and so on there will be, and how much independently arrived at activity.”^{xiv}

So far, I have been talking about two able-bodied, reasonably competent people of whom mutuality could logically be expected. But there are many situations that call for caring as caregiving, and some of these situations are of long duration. They require self-sacrifice. When a husband is ill or disabled, when a child is severely handicapped, when a family is wracked by a variety of problems, the female caregiver may be overwhelmed. Situations of this sort increase our interest in Fineman’s second category of social goods, in a care-driven concept of justice. We should work to advance policies that give these perpetual caregivers the physical, emotional, and economic support they need. In this, care ethics is demonstrably superior to some religious ethics that glorify suffering and “help” caregivers by telling them how saintly they are. From the perspective of care ethics, suffering is to be eliminated or relieved, not glorified or ignored. A just and caring society would provide the conditions under which caring has a chance to flourish.

Critical Thinking

Care ethics views autonomy as a limited, shared, and at least minimally satisfying form of control. It is anchored in a relational ontology, and the self it describes is a relational self. To function effectively and happily, relational selves in complex societies must be capable of critical thinking and self-reflection.

The selves we are seeking here—autonomous within a limited span—must be able to think, reflect, wonder, plan, reassess, and see things with some clarity. They should be reasonably competent in achieving empathic accuracy and comfortable in feeling and expressing sympathy. Such competent selves must be capable of both imagination and critical thinking, for questioning our own socialization is the main path to the limited autonomy we can hope to exercise. Critical thinking is part of a serious program to achieve self-understanding and to extend the span of our control over our lives.

Critical thinking on issues related to women and work is essential if we are to further care ethics *and* women's autonomy. Riane Eisler is right, I think, to call for a re-valuation of carework.^{xv} Child care, housekeeping, and all of the tasks required to maintain families should be neither scorned nor romanticized. They should be recognized as valuable and rewarded accordingly. Notice that this requires courageous self-reflection on the part of those who consider work in the caregiving professions and an advanced capacity for communicative competence if they are to convince others to reevaluate such work.

Critical thinkers must look at all sides of women's occupational problems and aspirations. There is no need to denigrate women's traditional work, and much of it still has to be done. And it is foolish to romanticize public, paid work. Much such work is done in isolated cubicles by rote. Every girl, with the help of careful guidance, must bring her critical intelligence to bear on decisions that will affect her occupational life and that of her sisters.

In striving for an optimal level of autonomy, girls must also use critical thinking to examine their

lives as students. Recent evidence shows that, on average, girls (in the United States) are doing much better than boys in school. They are taking more Advanced Placement courses, getting better grades, and achieving more bachelors' degrees.

Some social scientists argue that girls are better than boys at “studenting” because they are more self-disciplined. This claim raises several interesting questions, among them whether girls today are more self-disciplined than earlier generations and, if so, why this might be the case. It is more likely that girls see increased opportunities for careers and are willing to discipline themselves at the tasks that open the doors to these opportunities. But the interesting question in connection with autonomy is this: To what extent is self-discipline autonomous? The answer to this is not obvious. Self-discipline of the sort described by Freud with respect to the superego is clearly heteronomous. The stern, moral father has been internalized. Girls have always been more compliant and obedient than boys, and it is possible that they are doing better in school today because they have been told that they can and should do better. The question is how much of this behavior can be traced to critical self-analysis and how much to compliance with authority.

A related matter of keen concern to care theorists is that many bright girls are advised to scorn the caring professions and prepare for more lucrative and prestigious careers. If girls really want careers in professions formerly closed to them, they should certainly be encouraged to pursue them. But if they are rejecting work to which they are emotionally drawn because respected authorities tell them they “can do better,” then the decisions are not autonomous, and they may not be satisfying in the long run. Care theorists applaud the increased opportunities now available to women, but we do not scorn the work that our predecessors have done for centuries.

As we commit ourselves to promoting critical thinking in our schools, there are at least two more issues we should consider. One is the possibility that critical thinking is, at least to some degree, bound to a particular field or subject. We can hardly expect, for example, that a person unfamiliar

with mathematics will think critically in mathematics. And a mathematician, expert in critical mathematics thought, may not think critically in everyday life. One of my colleagues, deploring the sorry state of social thinking, once commented, “Take an expert out of his field and—instant irrationality!” He had a point.

If we want students to think critically on the issues raised by Fineman and other feminists, we should be sure that all of them—boys *and* girls—get some experience in caregiving and critiquing that experience. Without that experience, even generous thinkers are likely to make recommendations that are less than useful. In Edward Bellamy’s utopian novel, *Looking Backward* (much admired by John Dewey), the narrator asks his hosts, Dr. and Mrs. Leete, who does the housework:

“There is none to do,” said Mrs. Leete...”Out washing is all done at public laundries at excessively cheap rates, and our cooking at public kitchens. The making and repairing of all we wear are done outside in public shops... We have no use for domestic servants.”^{xvi}

At the time of Bellamy’s writing, being relieved of cooking and laundry would have been a tremendous relief. However, Bellamy apparently knew little about homemaking. What about bed-making, collecting and sorting laundry, dusting, sweeping, carpet cleaning, picking up, shopping (if only for snacks and drinks), cleaning bathrooms, watering and feeding houseplants, washing windows, and many other small tasks? And what about all the odds and ends associated with childcare? *Looking Backward* was highly influential, and its speculations on social justice are worth considering even today, but Bellamy had no real notion of what it takes to keep a house. Were he alive today, he would see that Laundromats and fast food eateries have not eliminated housework. If we want people to think critically about caregiving, we must give them practice in caregiving activities.

A second issue to consider is the phenomenon described by Cass Sunstein as “group polarization.”^{xvii} Many of us tend to go to extremes in our loyalties. We listen with a priori approval to those we consider “one of us,” and we pounce quickly on a speaker who is *not* one of us. At its worst, group polarization can stir rebellion, hatred, and unthinking violence. In its usual operation, it prevents consideration of a host of useful possibilities simply because they have been suggested by the wrong people. Clearly, such group-think is at odds with every form of autonomy. As semi-autonomous thinkers--people who recognize our heteronomy—we need to be self-reflective not only about ourselves as individuals but also about every group to which we belong. That is the hope of relational autonomy.

Notes

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