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Sanja IVIC

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Care through deliberation: A new role of the ethics of care.

*Sanja IVIC**

Abstract

The second generation model of deliberation can serve as an effective tool for institutionalization and establishing the ethics of care. Ethics of care and second generation deliberative democracy both recognize otherness and diversity and create the “policy of difference” and more inclusive, more substantive notion of citizenship. They imply the idea of autonomy of the will that is based on diversity and uniqueness of human experience. The first generation model of deliberation founded on reason that implies sameness and universal citizenship denies otherness and difference. Consequently, it cannot represent the foundation for the care ethics. The same can be argued for the third generation model of deliberation that emphasizes self-interest, because it is contrary to the fundamental principles of deliberative democracy itself.

Keywords: ethics, care, feminism, deliberation, autonomy.

Introduction

The following lines will argue that the problems with an ethics of care, such as its poor recognition inside the framework of the law, can be addressed if an ethics of care is institutionalized through deliberative democracy. This paper will show that both the care ethics and deliberative democracy imply the idea of the personal autonomy, i.e. autonomy of the will. However, autonomy of the will should not be equated with self-interest. Autonomy of the will is founded on the idea that human being is an end in itself. According to Kant, each rational being is free and possesses the intrinsic dignity of an end in itself. Therefore anyone acting against the freedom of others would diminish the total amount of freedom, which is

* Research Assistant, Institute for European Studies, Trg Nikole Pasica 11, 11 000, Beograd, Serbia, + 381 64 305 1945, auroral@yubc.net

contrary to the idea of the autonomy of the will.¹ The ethics of care institutionalized through deliberative democracy can provide the pluralist conception of justice, based on the concept of autonomy of will. However, the deliberative democracy as a philosophical political theory is broad in scope and has different forms and representatives. This means that the ethics of care does not support all models of the deliberative democracy. In the following lines it will be argued that the ethics of care which leads to more inclusive and substantive idea of citizenship inside the framework of contemporary pluralist societies requires second generation deliberative theory represented by Iris Marion Young, Amy Gutmann, Dennis Thompson, John S. Dryzek and so forth. This form of deliberation leaves room for hermeneutical understanding which promotes otherness and heterogeneity.

Although deliberative democracy² has traditionally been defined in opposition to self-interest, recent studies emphasize the close relation between self-interest and deliberative democracy (Mansbridge et al, 2010, p. 64). Mansbridge et al. argue that deliberation has different forms: 1. classic deliberation³ founded on antithesis between aggregation and deliberation, which excludes self-interest; 2. the expanded version of classic deliberation; and 3. newly reconstructed ideal of deliberative democracy. Classic deliberative theories equate deliberation with reason and they cannot embrace pluralism (Mansbridge et al, 2010, p.67). Consequently, the modernist liberal ideal of universal citizenship based on sameness⁴ is not transcended by deliberation. If deliberation is merely based on reason, citizens are only representatives of the general will. This point of view is ex-

¹ Although Kant's idea of autonomy of the will is acceptable as a foundation for the ethics of care, that does not imply that care ethics is tied to Kant's idea of morality. On the contrary, Kant's ethics and the ethics of care represent two different approaches.

² Mansbridge et al. argue that "that there is a considerable consensus among theorists on many of the regulative ideas of deliberative democracy. The deliberation should, ideally, be open to all those affected by the decision. The participants shall have equal opportunity to influence the process, have equal resources, and be protected by basic rights. The process of 'reason-giving' is required and central. In that process, participants should treat one another with mutual respect and equal concern. They should listen to one another and give reasons to one another that they think the others can comprehend and accept. They should aim at finding fair terms of cooperation among free and equal persons. They should speak truthfully. One criterion that most clearly distinguishes deliberative from non-deliberative mechanisms within democratic decision is that in the regulative ideal, coercive power should be absent from the purely deliberative mechanisms." (Mansbridge, J et al, 2010: 66)

³ This form of deliberation is considered represented by Habermas's early work.

⁴ "With equality conceived as sameness, the ideal of universal citizenship carries at least two meanings in addition to the extension of citizenship to everyone: a) universality defined as general in opposition to particular, what citizens have in common as opposed to how they differ, and b) universality in the sense of laws and values that say the same for all and apply to all in the same way; laws and rules that are blind to individual and group differences" (Young, 1989, p. 250).

clusionary to certain social groups. Mansbridge et al. argue that theories that expand classic deliberation are based on “mutual justifiability”, which include different conceptions of the common good. Thus, they do not aim at determining a unitary conception founded on reason. These theories include storytelling. They point to different (narrative) experiences and open the door to empathy and hermeneutical understanding.⁵ The newly formulated ideal of deliberation (the third model) makes a clear reference to self-interest. “Including self-interest in deliberative democracy reduces the possibility of exploitation, introduces information that facilitates reasonable solutions and the identification of integrative outcomes, and also motivates vigorous and creative deliberation. Excluding self-interest from deliberative democracy is likely to produce obfuscation” (Bächtiger et al, 2010, p. 14). However, deliberative democracy cannot be based on self-interest, because this idea is contradictory to the deliberation itself. If deliberative democracy is based on self-interest, it does not transcend boundaries of universal citizenship. Thus, it denies diversity. Deliberative democracy can be founded on the idea of the autonomy of the will, which reflects its ideals. The idea of self-interest is usually associated with selfish choices and preferences. On the other hand, the concept of autonomy of will presupposes individual freedom that is not the threat to the freedom of the other individual. This idea of autonomy of the will implies Kant’s formula of humanity which asserts that treating rational nature not merely as means is treating people always in ways that respect the unconditional and incomparable dignity of their personality.

An Ethics of Care – From Feminist Theory to the Idea of Contextual Morality

The ethics of care is introduced more than thirty years ago and it is still not exactly determined. Ethics of care is first defined by Carol Gilligan in her book *In a Different Voice* (1982): “In this conception, the moral problem arises from conflicting responsibilities rather than from competing rights and requires for its resolution a mode of thinking that is contextual and narrative rather than formal and abstract. This conception of morality as concerned with the activity of care centers moral development around the understanding of responsibility and relationships, just as the conception of morality as fairness ties moral development to understanding of rights and rules” (Gilligan, 1982, p. 19). Subsequently, the proponents of the ethics of care, who have followed Carol Gilligan made a distinction between the “ethics of care” and the “ethics of justice” (Meyers, 1998, p. 142).

⁵ This will be explained in the section 3.

According to feminist authors the ethics of care and the ethics of justice⁶ represent two different conceptions of morality. The proponents of the ethics of justice argue that morality is impartial, which is denied by the proponents of the ethics of care. An ethics of care is often represented as a particularist and contextual ethics, while the ethics of justice is perceived as universalist and essentialist ethics. However, this perspective produces binary oppositions: care/justice, particularist/universalist, contextual/essential, female/male, and so forth. If this point of view is employed, the ethics of care is understood only as a trait of the feminine voice, which is flawed. There are some passages in Gilligan's work which make this confusion: "For the present, my aim has been to demonstrate the centrality of the concepts of responsibility and care in women's constructions of the moral domain, to indicate the close tie in women's thinking between the conceptions of the self and conceptions of morality, and finally to argue the need for an expanded developmental theory that would include, rather than rule out from developmental consideration, the difference in the feminine voice. Such an inclusion seems essential, not only for explaining the development of women but also for understanding in both sexes the characteristics and precursors of an adult moral conception" (Gilligan, 1985, p. 34). This basic problem with this point of view is that it is based on homogeneous notion of identity.

McLaughlin argues that Gilligan's book *In a Different Voice* is silent about the voices of women of color and contexts such as class, race, sexuality and so forth. Consequently, she perceives women's experience as homogeneous and does not resolve the problem of multiple discrimination. There are different women – elder, those with mental disabilities, refugees, and so forth and they can be marginalized in a different ways. On the other hand, even these different groups of women are not homogeneous and include different experiences and narratives. This was not mentioned by Gilligan. However, this heterogeneity is the basic trait of the contextual ethics of care.

According to Meyers, it could be argued that Gilligan's distinction between care and justice puts "care outside the bounds of justice" (Meyers, 1998, p. 142). However, binary opposition between care and justice is flawed. It represents new metaphysics with new symbolic form of oppression, where care has priority over justice, particular over universal, contextual over essential and so forth. It represents the pitfall that feminist theory attempts to escape. This was argued by a number of feminist authors who emphasize that binary oppositions between nature and culture, self and other, essentialism and constructivism and so forth need to be deconstructed. On the other hand, some feminist authors employ binary oppo-

⁶ The ethics of justice is mostly founded on Kant's deontological ethics, based on categorical imperative, which advocates the priority of "right" over "good". The justice (which represents the domain of "right") is prior to interests based on the cultural or religious diversity, or conception of a good life (which represents the domain of "good").

sition between male and female and perceive these notions as essentialist. This point of view creates new power relations where men are excluded from “gender project” (Wieringa, 1998).

Gilligan rejects the idea that sharp distinction between “care” and “justice” can be made. However, she does not explain in which way these two concepts are complementary (Meyers, 1998, p. 153). The similar point of view was expressed by Kohlberg and Rawls who are both representatives of the ethics of justice. Kohlberg argues that rules and principles are always applied in various circumstances and contexts. This means that morality “is not just a matter of using abstract concepts like justice. It concerns the use of such concepts to guide the moral choice” (Kohlberg & Kauffmann, 1987, p. 58). In this way justice is considered as practice of justification. This was also argued by Rawls. Rawls’s political thought presented in his *Political Liberalism* (1993) and *The Law of Peoples* (1999) represents a shift from the conception of liberalism as a universalist doctrine to a conception of liberalism as a particularist doctrine.⁷ In his *Law of Peoples*, Rawls argues that consensus about the rights can be achieved. However, there is a possibility of various interpretations of these rights. Rawls argues that the same norms have different argumentation. Consequently, they can be justified and interpreted differently in different societies and be in accordance with the traditions of different societies.⁸ Therefore, Rawls’s conception of liberalism accepts the possibility of different conceptions of justice. He argues that his conception of justice as fairness cannot be measured by cognitive standards of truth and falsity (Rawls, 1985). In his *Political Liberalism*, Rawls argues that his conception of justice is reasonable, not rational. Rawls argues that: “Holding a political conception as true, and for that reason alone suitable basis of public reason, is exclusive, even sectarian, and so likely to foster political division” (Rawls, 1993, p. 129). He emphasizes that there are various conceptions of reasonable (Rawls, 1993, p. 53). Rawls’s idea of reasonableness is based on solidarity. While political theory based on rationality promotes sameness⁹, the political theory founded on reasonableness promotes difference and pluralism. The ethics of care differs from the ethics of justice, because it emphasizes the particular individuals and their concrete needs and point of views in specific circumstances. “Care ethics is thus distinct from moral theories that start out from broad principles and rules of action, and it is this particularism that has led many

⁷ This was argued by John Rawls in his article “Justice as Fairness Political not Metaphysical” (1985).

⁸ Rawls argues that human rights described in his *Law of Peoples* can be interpreted in different ways. They can be perceived as the part of liberal political conception of justice as liberties guaranteed to all citizens as free and equal. However, they can also be perceived from associantist perspective (held by a decent system of social cooperation) “which sees persons first as members of groups, associations, corporations and estates.” (Rawls, 1999: 68)

⁹ It is argued that all human beings are endowed with reason can agree upon the same principles of justice and universal truths.

writers to conclude that it is misguided for general moral and political relations among people” (Engster, 2004, p. 114).

Engster identifies three critiques of the ethics of care in the recent studies. The first one is represented by Noddings and addresses the problem of parochialism as a consequence of the notion of “care” itself, which can only be extended to the people we know and does not embrace the relationships with most people in the world (Engster, 2004, p. 117). Tronto argues about the danger that from the ethics of care approach it can be concluded that care ethics “could quickly become a way to argue that everyone should cultivate one’s own garden and let others take care of themselves” (Tronto, 1994, p. 171). The third critique of the ethics of care addresses the problem of relativism. A number of authors argues that care ethics cannot serve as a basis for a moral theory because of its contextual, non-foundationalist nature. Even if the ethics of care is clearly defined as based on the notions of empathy and respect, the question of the meaning of these concepts still remains. It is hard to make a strict definition of those concepts. Some authors identify different generations of the ethics of care. Tronto emphasizes that Olena Hankivsky (Hankivsky, 2004) identifies two generations of the ethics of care. The first generation emphasizes charity, compassion, benevolence and so forth (Tronto, 2007, p. 39). The second generation emphasizes “human vulnerability” and social and political dimensions of the ethics of care which should not only be applied to the domain of private (Tronto, 2007, p. 39). Fiona Williams identifies four paradigms of care inside the framework of the care ethics. In the 1970’s the ethics of care represented the critique of the community care politics (Williams, 2001, p. 475). “Central to this was the concept of care as (oppressed) labor and the political demand for the recognition and reward of carers” (Williams, 2001, p. 475). In the 1980’s the paradigm of care changed. It turned into the idea of promotion of women’s difference and women’s identity. In the 1990’s the paradigm of care is divided into two directions. The first dimension represents the celebration of difference and emphasizes different perspectives and needs. “This ‘paradigm of difference’ came largely from those whose experiences had been marginalized in the policies for informal and formal care” (Williams, 2001, p. 477). The second paradigm of care during the 1990’s includes the debate how the ethics of care influences the understanding of citizenship and public democratic practices. In this way, care is identified as public, and not only personal. Thus, it represents the political concern “whose social dynamics operate at local, national and transnational levels” (Williams, 2001, p. 487).

According to Liedtka, the ethics of care includes four key elements: attention to others in particular contexts, a focus on other’s needs and interests, a commitment to dialogue as a basic tool of moral deliberation and a focus on responsiveness (Liedtka, 1996). However, a number of authors equate the ethics of care with the social and health policy. Noddings finds the ethics of care as suitable for the proposals for addressing the issues of public school curriculums, euthanasia,

abortion and finding homes for the homeless. Folbre proposes similar proposals which addresses the issue of the “work of care” and problems such as maternity leave. However, the ethics of care includes broader range of options and can be applied to political system as a whole, which was not recognized by these authors. On the other hand, “their proposals amount to something less than an overarching institutional political theory, these scholars say very little, for example, about the nature of government institutions, decision making and rights” (Engster, 2004, p. 121).

Ethics of Care as the Basis of Deliberative Democracy

Tronto argues that the care requires “a politics in which there is, at the center, a public discussion of needs, and an honest appraisal of the intersection of needs and interests” (Tronto, 1994, p. 168). She emphasizes the debate and democratic participation as important parts of the ethics of care, which help citizens to discuss their interests and needs. However, she does not emphasize the significance of deliberation. Mere debate does not lead to transformation of preferences. According to Fung, deliberative democracy is a “revolutionary political ideal”, which requires “fundamental changes” in decision making (Fung, 2005, p. 397). Deliberative democracy is based on the idea that decisions made by citizens and their representatives need to be justified (Guttman, 2004). In deliberative democracy the autonomy of personality is respected and citizens are not only perceived as “objects of legislation” (Trifiro, 2005: 7). The reasons given in the process of justification are accessible to all citizens. The decisions produced in deliberative democracy are not permanent. They are open to different changes and transformations. They reflect the social world which is not static, but dynamic category, which is constantly reinterpreted by different attitudes, movements and actions. Deliberative democracy is based on the idea of contingency of human beliefs and practices. Amy Gutmann defines deliberative democracy “as a form of government in which free and equal citizens (and their representatives), justify decisions in a process in which they give one another reasons that are mutually acceptable and generally accessible, with the aim of reaching conclusions that are binding in the present on all citizens but open to challenge in the future” (Guttman, 2004, p. 7)

Ethics of care and deliberative democracy are based on similar approach. They both recognize the “other” and promote pluralism and diversity. They both represent a path to more inclusive citizenship, which includes different voices. Consequently, they are based on the broader notion of identity, which is not fixed. Deliberative democracy and ethics of care promote heterogeneity and they both broaden modern liberal idea of citizenship. Modern political idea of citizenship “implies a universality of citizenship in the sense that citizenship status transcends

particularity and difference.” (Young, 1989, p. 250) Modern ideal of citizenship perceives equality as sameness, which creates binary opposition universal/particular, where what citizens have in common is perceived “as opposed to how they differ (Young, 1989, p. 250) On the other hand, modern political ideal of universal citizenship implies that the law is applied to all in the same way. This point of view is strongly rejected by representatives of the care ethics. Ethics of care and deliberative democracy point to the “politics of difference”, which is based on the idea of participation, inclusion and equal moral worth (Lister, 2007, p. 52). They are both contextual and include discursive situatedness. However, there are different forms of deliberation and not all of them can be perceived as tied to care ethics. Deliberation which is based merely on reason is not relevant for the care ethics, because it excludes a number of citizens.¹⁰ Only the conception of deliberative democracy, which represents a critique of modern liberal democracy and its universalist paradigm of citizenship and rights can be considered as the foundation of the ethics of care.

The proponents of the ethics of care argue that ethics of care is based on empathy, responsibility, respect, responsiveness and so forth. However, it still not emphasized by these authors how this ethics is institutionalized. Meyers argues that the ethics of care is modeled in dialogue (Meyers, 1998, p. 159). In the following lines it will be argued that mere dialogue is not sufficient for the ethics of care. The ethics of care requires deliberation. There are different definitions of deliberation, but all of them perceive it as “a process of public discussion in which participants offer proposals and justifications to support collective decisions” (Fung, 2003, p. 343). Bächtiger et al. argue that the proliferation of this term can lead to concept stretching¹¹ (Bächtiger et al, 2010, p. 33). They make a distinction between deliberation based on the idea of rational discourse¹², which leads to “common understanding” (type 1) and deliberation which leaves room for narrative and rhetoric and leads to more authentic portray of the person (type 2). The type 1 program makes a sharp distinction between deliberation and other forms of communication which do not adhere to standards of rational justification.

¹⁰ I. M. Young identifies storytelling, greeting and rhetoric as mode of speech which deliberation is based.

¹¹ “In many cases it is not clear whether some commentators on deliberative democracy merely refer to any kind of communication, or to deliberation in the sense of systematically weighing rational arguments. Some references to deliberation appear to involve nothing more systematic than merely talking. Other deliberationists hold firmly to Habermasian communicative action as the standard of deliberation both too broadly and too narrowly can lead to serious confusion “ (Bächtiger et al, 2010:33). “What is deliberation? Beyond no badrock agreement that democratic process should involve communication about rather than merely aggregation or (fixed) preferences, there is not much consensus about how deliberation is best conceptualized” (Bächtiger et al, 2010: 35).

¹² This form of deliberation is closely tied to classic conception of deliberative democracy. It is represented by Habermas’s Theory of Communicative Action.

Young emphasizes that this criterion leads to uniformity, which is contradictory to the idea of deliberation itself. It excludes certain social groups and individuals who cannot engage in this form of deliberation. This idea of deliberation creates homogeneous public sphere and does not include otherness. Subsequently, Mansbridge et al. (2010) define the third model of deliberation (type 3) based on self-interest.

The type 2 program¹³ transcends the borders determined by *ratio*, and includes different voices and experiences by narrative and rhetoric as the foundation on which deliberation is built. Thus, it leaves room for multiple voices and identities. According to Bächtiger et al, “type II deliberation has the potential advantage of broadening the deliberative program (...) One danger is that almost every communicative act may qualify as ‘deliberative’ (at least in function) leading to the problem of concept stretching. Rhetorics, storytelling, humor, or even threats may indeed be part and parcel of inclusive and successful deliberative process involving preference transformation.” (Bächtiger et al, 2010, p. 48).¹⁴ However, these authors do not recognize the hermeneutic potential of the type II deliberation. Only understood as hermeneutic understanding, type II deliberation can include both diversity and comprehension. Hermeneutical understanding attempts to unify theory and praxis, law and life. Hermeneutics rejects all hierarchies and comprehension a priori. Hermeneutics represents a universal phenomenon, and not merely a method of humanities as it was argued by Dilthey. However, a number of philosophers argue¹⁵ that hermeneutics does not include any universal method, because it rejects the idea of the “absolute truth”. Consequently, numerous interpretations are possible. Both Ricoeur and Gadamer argue that hermeneutics is more than a common methodological thinking on interpretation. Hermeneutical thinking is not directed towards methodology but to hermeneutical situation. Therefore, hermeneutics encompasses number of criteria that together make a sort of hermeneutical method. Thus, the nature of hermeneutics is not exclusionary. It rejects all kinds of hierarchies as fixed and argues about fluid and dynamic nature of concepts. According Gadamer, hermeneutical understanding implies the “fusion of horizons” (*Horizontverschmelzung*). Gadamer introduces this concept in his *Truth and Method*. He argues that “fusion of horizons” leads to transformation of human understanding. It represents the process of expanding our horizon in which we collectively come to accept certain beliefs through the interaction of dialogue. In this process individuals learn to move in a broader horizon in which binary hierarchies are overcome. Subsequently, what was formally taken for granted as the background to valuation is perceived as just one possibility alongside the different other possibilities. Thus, only deliberation based

¹³ This form of deliberation is represented by Young, Gutmann, Thompson, Dryzek and so forth.

¹⁴ Bächtiger et al. contend that type I and type II deliberation forms are often complementary.

¹⁵ This was mostly emphasized by Gadamer and Ricoeur.

on the idea of hermeneutical understanding can represent the foundation for the care ethics. Gadamer argues that hermeneutical understanding is founded on dialogue. According to Taylor, individual identity is based on dialogue – in regard to actual dialogues with others. According to Taylor, Gadamer’s term “fusion of horizons” refers to “cross-cultural dialogue that transforms human understanding” (Taylor, 1992, p. 32). On the other hand, mere debate “applies to any rule-governed argumentative exchange.” The debate does not necessarily lead to transformation, which is the basic trait of deliberation.

Autonomy of the Personality as the Fundamental Idea of Ethics of Care and Deliberative Democracy

The term “autonomy” is often understood as the right or capacity of individuals to determine their own choices and actions and govern their behavior. However, there are different conceptions of the idea of personal autonomy itself (Lakiæviæ, 1996). In his *Social Contract*, Jean Jacques Rousseau equates this term with the idea of moral liberty. On the other hand, Kant’s moral philosophy is built on his idea of autonomy of the will. Kant defines the autonomy of the will as “the property of it by which it is a law to itself independently on any property of the objects of volition” (Kant, 1969, p. 71). Kant contrasts this idea to the heteronomy, according to which “the will does not give itself a law, but the object does so in virtue of its relation to the will.” (Kant, 1969, p. 71) According to Kant, only autonomy of the will makes rational beings an ends in themselves.

Modern political thought considers citizenship as an expression of general will, which transcends diversity. Young emphasizes that modernist idea of citizenship enforced “a homogeneity of citizenship.” (Young, 1989, p. 251) Some individuals and groups are excluded on the grounds that they are not capable of adopting general perspective. General will implies universalist self as well as the definition of citizens as representatives of universal characteristics. In this way, homogeneous public sphere is created. On the other hand, the concept of citizenship founded on the idea of autonomy of the will promotes particularity and leads to more substantive inclusion and participation, based on heterogeneity. The idea of autonomy of personality is also explored within the framework of political philosophy.¹⁶ However, this idea is mostly analyzed on “principles based approach”. It is considered in universalist terms which are the same for all human beings. An alternative approach to the idea of the autonomy of the personality is defined by Marina Oshana in her book *Personal Autonomy in Society* (Oshana, 2006). Oshana develops particularist account on the autonomy of personality, which perceives this concept as derived from the certain social context. Thus,

¹⁶ This idea is explored by Taylor, Dworkin, Frankfurt etc.

autonomy of the will is not perceived “as a kind of metaphysical capacity for choice” (Cao, 2008, p. 171). She emphasizes that concept of autonomy is often influenced by culture, religion, political system, and so forth. However, Oshana’s conception of autonomy implies that “people are passive actors in society.” (Cao, 2008, p. 172). She does not analyze how people reflect on these external conditions and how they transform those external elements (Cao, 2008, p. 172).

The idea of autonomy of personality is still not sufficiently developed within the framework of the law itself. The ethics of care can represent the basic tool for the development of the concept of personal autonomy within the law discourse. The ethics of care can be institutionalized through the deliberative democracy, because both care ethics and deliberation employ contextual approach to humanity and law. They do not promote universal ideal of citizenship based on the general will which leads to homogeneous public sphere. They emphasize the idea of citizenship based on the autonomy of the will, which leads to heterogeneous public. “In a heterogeneous public, differences are publicly recognized and acknowledged as irreducible”, which means “that persons from one perspective of history can never completely understand and adopt the point of view of those with other group-based perspectives and histories. Yet commitment to the need and desire to decide together the society’s policies fosters communication across those differences.” (Young, 1989, p. 258) The contextual moral theory cannot be applied to all in the same ways. It is situationally oriented and contingent. However, Tronto does not resolve the problem of institutionalization of the ethics of care. She argues that: “Proponents of an ethic of care must specify which social and political institutions they understand to be the context for moral actors” (Tronto, 1987, p. 661). The ethics of care includes the wide range of options in order to protect personal autonomy. The idea of personal autonomy includes a number of rights – not only social and economic, but political, cultural, religious and so forth. Subsequently, the ethics of care cannot be reduced to social and health policy. First of all, the ethics of care requires the contextual approach to rights and its applicants. The norms of the ethics of care are fluid, not fixed. According to Cook: “It requires the ethicist to grapple not with abstract precepts and norms but with the lived experience of those affected by the decision. (...) each situation is different and each decision must ultimately rest” (Cook, 1993, p. 2471) on its own ground. It rejects universalist and essentialist reading of rights.

Radaeïa gives a number of examples of essentialist reading of gender equality in the “Islamic headscarf” cases in the European Court of Human Rights (Radaeïa, 2008). Radaeïa emphasizes that the ruling does not acknowledge the difference and does not recognize the right to personal autonomy (Radaeïa, 2008, p. 853). “The Court started from the assumption that wearing a headscarf is an oppressive patriarchal practice which connotes the submission of women to men and the control of their sexuality, which can never be freely chosen, while research shows that a practice has a more complex meaning” (Radaeïa, 2008, p. 853). Some

women disagree with this point of view and argue that wearing a veil represents the submission to God. For others it represents an identity expression (Radaèiæ, 2008, p. 854). In the cases *Leyla Sahin v. Turkey*¹⁷, *Dahlab v. Switzerland*¹⁸ and so forth, the Court threatened applicant's right to personal autonomy.¹⁹ According to Radaèiæ: "If the Court conceptualized equality as challenging disadvantage (...) and if it applied a more contextual approach which would include the ethics of care, it could have found the way to reconcile the principle of gender equality with the right to personal autonomy rather than putting them into conflict" (Radaèiæ, 2008, p. 856) Deliberative democracy emphasizes personal autonomy as a fundamental human right. Subsequently, the basic deliberative democracy principle is based on the idea that "only those norms and practices can be deemed morally and politically legitimate which are the result of a free and fair process of public decision-making that includes all who will bear the consequences of their implementation." (Trifiro, 2005, p. 7) Deliberation does not aim at "absolute truth". Consequently, numerous interpretations are possible. Thus, the nature of deliberation is not exclusionary. It rejects all kinds of hierarchies as fixed and argues about fluid nature of concepts.

Deliberative democracy, that includes the basic characteristics of the ethics of care is an effective tool for producing the new form of citizenship founded on the idea of autonomy of personality. However, this idea should be perceived as contingent and contextual. Deliberation is effective tool for the recognition of personal autonomy and identity, because they are partly defined with conversation with other people. Deliberation leads to transformation of common understandings of certain practices of society (Marshall, 2008, p. 190). Deliberation based on care enables individuals to express their authenticity and question the existing social structures and norms. It leads to understanding and expecting otherness and diversity. Consequently, it leads to transformation of existing social and political norms.²⁰²⁰

For example, in the "headscarf cases", deliberation starts "with others taking seriously and listening to individual woman who has made the decision. This respects her as an equal

- a subject who is an end in herself
 - capable of creating a life for herself and being who she wants to be"
- (Marshall, 2008: 191).

¹⁷ At para. 107 of the 2004 judgment (29 June 2004) and adopted in paras. 115-116 of the GC judgment, supra note 3.

¹⁸ Supra note 4.

¹⁹ According to Radaèiæ, in the *Leyla Sahin v. Turkey* case, "an adult woman challenged the prohibition on students wearing headscarves at university campuses as contrary to her freedom of religion, freedom of expression, right to education, right to respect for her private life, and right to non-discrimination on the basis of religion. The government claimed that the prohibition served the aims of the promotion of secularism and gender equality." (Radaèiæ, 2008: 852).

Subsequently, deliberation and ethics of care equate gender equality with personal autonomy of every individual.

Conclusion

Care ethics can be institutionalized through deliberative democracy, because they both imply the idea of contextual morality. However, the care ethics does not support all models of deliberation, because it cannot be argued that all forms of deliberation imply the idea of contextual morality. The first generation model of deliberation, represented by Habermas's early work, does not transcend the government of reason. Consequently, it points to universalist notion of citizenship which denies diversity. On the other hand, the third generation model of deliberation represented by Mansbridge ties deliberation to self-interest, which is contradictory to the basic task of deliberative democracy. It leads to instrumental notion of citizenship (a means to an end), not to substantive idea of citizen (as a good in itself). It also contradicts to the notion of care. Only the second generation model of deliberation can be considered as the foundation of the ethics of care, because it includes the idea of hermeneutical understanding. The second generation model of deliberation represented by Young, Gutmann, Dryzek, etc. points to contingency of human experiences, narratives, beliefs and practices. It is neither based on reason nor on self-interest. It embraces multivoicesness and uniqueness of every human being. Thus, it does not lead to universalist notion of citizenship based on general will and homogeneous public sphere, but it points to more substantive idea of citizenship founded of diversity and personal autonomy, which embraces the idea of heterogeneous public sphere.

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