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## BEING WITNESS TO THE LIVES OF THE VERY OLD

### 1. FROM AUTONOMY TO A POLITICAL-ETHICAL THEORY OF CARE

During the last three decades, the concept of the autonomous patient has come quite a long way,<sup>1</sup> owing to the fact that autonomy was and continues to be important in other segments of society.<sup>2</sup> In theory, the idea that those who provide cure and care are expected to enhance the autonomy of the patient and client has indeed overruled the idea of paternalism.<sup>3</sup> This emphasis on autonomy in the context of cure, nursing and care is a source of continuing criticism by advocates of an ethic of care, including Tronto (1993) and Walker (2003).

The ethic of care rightly proposes a structural reorientation to an attentive, responsible, competent and responsive way of giving and receiving care. 'Caring about,' 'caring for' and 'care-receiving' are three different aspects of care, within which attentiveness is a *leitmotiv* (Tronto, 1993). Tronto characterizes 'care' as 'a species activity that includes everything that we do to maintain, continue and repair our world so that we can live in it as well as possible. That world includes our bodies, ourselves and our environment, all of which we seek to interweave into a complex, life-sustaining web'.

Although Tronto draws attention to the fact that care should be seen as a public activity, the political-ethical dimension of an ethic of care is still weak. Tronto is quite aware of the fact that, while the reconceptualization of care is necessary, the recast concept cannot be imported unmediated into political life.<sup>4</sup> She claims that her idea of care is a political idea (e.g. as opposed to a private virtue) from the very beginning: the practice of caring in itself is a practice that constitutes a society and enables people to live together within a pluralistic society. Tronto even insists that practices of care can inform the practices of democratic citizenship (Tronto, 1993, p. 167).

We tend to agree with the idea that the concept of care that is enriched by attentiveness is of great heuristic value, not only for people who are in need of care but for structures of power as well. Tronto refers to this as the capacity of the enriched concept of care to 'reveal' relationships of power (1993, p. 172). We nonetheless question whether this laudable politicizing of the concept of care is sufficient to counter the problems that Tronto herself describes with regard to moral ideals in a complicated political context: 'the problems of distance, inequality, and privilege.'<sup>5</sup> Continuing in the same vein of politicizing care, we contend that it is necessary to consider not only relationships (within the realm of care and relationships

of power), important and renewing as they are, but also the positions that people actually hold. The focus on position is twofold: we must first consider the position that someone has in society (e.g. as a mother of children, as a teacher of pupils, as a patient addressing a physician, as a very old person). The second aspect is the position that is given to a person, a position that is either accredited or withheld. To paraphrase Walzer (1983), the primary good that we distribute to one another is a position in some human community.<sup>6</sup> Taylor relates this point of position to the concept of honour, which is a 'positional good' (Taylor, 1994, p. 45).

The aim of this article is to inquire into this idea of position by describing the phenomenology of being present to those who are very old, within the context of North Atlantic societies, and by reflecting upon the idea of honour in order to contribute to a political-ethical theory of care. Honour in itself is a political-ethical category with regard to positions in society, unlike such broader concepts as respect and human dignity. The latter concepts can be depicted in a pre-societal and personalistic way. In contrast, honour as such always involves the ordering of societal bonds. Before proceeding, however, we will elaborate on our aims.

Closer examination of the lives of the elderly in late modern Western societies reveals a split between those who are old (i.e. those 65-80 years of age) and those who are indeed very old (i.e. those in their late eighties and nineties). The latter often require more assistance in order to live their everyday lives. They are not the constantly fit and energetic, self-conscious and autonomous people with a clear and decisive understanding of their 'life project', as some philosophers (e.g. Kekes) and governments (e.g. in the Netherlands) would like them (and all other citizens) to be (see De Lange, 2004; Kekes, 1988). The very old do not fit into the scheme of autonomous and self-conscious clients, who buy the care and cure they wish to be given. The very old do not fit into the autonomous model of human existence, with its concurrent claims about freedom of choice and the unencumbered self.

More precisely, living with the very old – with people who are in need of some kind of assistance – makes it evident that people *in general* are of the same cloth; they are interdependent beings. Autonomy (i.e. the ability of individuals to make their own self-aligning, reasoned choices), which is indeed an important moral value, acquires its place in the hierarchy of values only within the anthropological and moral context of interdependency.<sup>7</sup>

The split between old and very old people is a reason to rethink the very basis of providing care and cure. Our aim at this point is to inquire into the dialectics of being an old person and of needing assistance and sustenance on a daily basis. In this context, we do not understand 'dialectic' in the Hegelian sense of the word but as a tension of a specific kind (i.e. a disproportionality between two terms), as formulated by Ricoeur (1995). This tension must be acknowledged; we must confront the content of the terms and see their differences – even the incompatibilities – as well as the areas where they overlap. The tension must then be bridged, knowing that such mediation will remain fragile and provisional.<sup>8</sup> The mere existence of the very old within a political order is the first point. A second point to consider is the neediness of old people, their need for others to step forward to help them. We do not interpret these terms in a substantialistic way, as if they were ontologically fixed characteristics. Instead, we treat them in a phenomenological way, reflecting on the political content of these two points. This implies that we must ultimately reflect on the dialectics between professional 'care' (and its ethics) on the one hand and the recognition of the existence and honour of the very old (along with its moral consequences). We develop several elements of the political-ethical concept of honouring the very old, as well as the corresponding concept of 'being witness' to the lives of the very old, as a foundation for the recognition of the very old.<sup>9</sup> In our opinion, the concepts of recognition and honour are vital to providing a political-ethical framework for the professional ethics of those who work as caregivers. In other words, reflection on the character of professional care, which is so often seen as intervention and which acquires its

legitimacy from the desired effects that it produces, needs a more comprehensive framework. In this statement, we make the claim that a professional ethic without a political-ethical framework is weak.<sup>10</sup> Not only is there a need for a political-ethical view of institutions (ranging from homes for the elderly to state provisions for the elderly), there is also a need for such a view of the professional care that is provided. In our view, the concept of living with the very old and being witness to their existence is a condition for a professional ethic, as is the concept of their honour. In other words, we propose a new mode of sociability in which living together on the basis of equality is a presupposition for an ethic that addresses the use of professional technical skills within a framework of professional virtues.

## 2. THE ELDERLY: FACT AND FICTION

In October 2005, one of the major newspapers of the Netherlands, *NRC Handelsblad* (which ranks alongside *Le Monde* and the *Frankfurter Allgemeine*), described the position and everyday practices of the elderly in affluent Dutch society as that of people who are 'not old' (Brandt Corstius, 2005). That is to say, people who are 60 years of age and older do the same things that younger people do: they travel, participate in sports and have a good time with their grandchildren. The difference between them and younger people is that they no longer work, and have stopped counting their years. In this somewhat rough sketch, older people are called 'neo-seniors', because of the striking difference between them and their predecessors, those who were 60 years old or older in the 1950s and 1960s. They act differently; they walk and talk differently, and their position in society is different, as many (but not all) have the means to live as clients in a consumer society. We can say that they are not simply citizens that receive care but clients who buy the care they think best suits them. The predominant category is not a political but an economic position, within their own mindset as well as in public opinion.

Which elements of this sketchy picture are true? Surely, we do encounter these neo-seniors and recognize them in everyday life. This image is

corroborated with facts based on scientific evidence. Life expectancy in Western societies (e.g. the Netherlands) has risen in a few decades. Statistically, those who have made it to the age of 65 can expect to reach the age of 80. Men can expect to live to 79 and women to 83 years. Research has shown that, although the elderly must cope with diminishing amounts of energy and the annoyance of ailments and infirmities, they are generally able to have satisfactory lives. The Berlin Ageing Study, which concentrates on the very old, shows that the mental capabilities of some people between 90 and 100 are even better than are those of younger seniors (Baltes & Mayer, 1999). This seems to be true, not only subjectively (i.e. in the sense of experienced well-being), but also according to objective parameters (i.e. measurable standards of the quality of life), including the accessibility of cure and care and the availability of activities adapted to the wishes of these elderly people. Life satisfaction among Dutch senior citizens is high, comparable to that of the elderly in Denmark and Northern Ireland, whereas the life satisfaction of the elderly is much lower in other EU countries with different cultural settings (e.g. Italy) (Okma & Veenhoven, 1999, p. 40)<sup>11</sup>. In addition to perceived satisfaction, the increasing average wealth of the elderly in North European countries is a well-documented fact. In general, the elderly do have a previously unheard-of level of spending power (Mayer, Maas & Wagner, 1999).

### Images and stories

Despite the conditions described above, Biggs points out that, in addition to these facts, other data exist regarding the *production of images of positive ageing*. Such images play a major role in the self-awareness of the elderly, as well as in the public view of their position and identity (Biggs, 2001). The elderly are the subject of a story that is being told. That story is catching on and, to some extent, is capable of legitimizing the politics of the government and of such institutions as homes for the elderly and senior-citizens' associations. To provide one example of the creation of the elements of the story, the necessity of giving and receiving care is both a biological fact and a socially created entity. One factual element is that elderly people (50-65 years old) in many West

European countries from the seventies of the last century until the beginning of this decade were expelled from the workforce, thereby at an early stage becoming possible clients for institutions and companies that offer care. Another element is that groups of professionals (e.g. nurses, managers and institutions) began to promote their own interests in an organized way in order to establish their trade within a highly antagonistic environment. The current story is that people who are 50 years and older are 'senior citizens', whose age is no longer of importance to society; age is an individual, personal fact. It is the object of a person's own capacity for steering, coping and choosing. The story about the elderly as 'clients with spending power' is just another story that includes a number of elements arranged in a hierarchical order: the elderly are consumers who make their own choices; they lead a leisurely life, and they are autonomous participants in civil society (Mauve, 2005; Göckenjan, 2005). This story reflects what Biggs calls 'ideological and material correlates' (Biggs, 2001, p. 307). Different elements are bundled in another story that is told about the elderly, including their depiction as a 'burden' and a 'cost factor' to society. We argue that the story that is told is organized around the concept of freedom of will (i.e. freedom of choice). Second, the economic sphere dominates the political sphere. Third, time is perceived as chronological and chronological only, whereas elderly people themselves have a narrative concept of time (Baars & Visser, 2005; Baars, 2000). The story that is told and absorbed is the story of the extension of an earlier life, of people living an 'active, independent and secure life' (Biggs, 2001, p. 310). Whether this kind of life was real or fictitious earlier in the individual lives is another question. In other words, whether the story is a fiction building on a preceding fiction could be questioned. For our current purposes, it is sufficient to point to the *fictitious* and *abstract* character of the story that is told about and to the elderly, even though the story does involve an arrangement of various *imaginative and factual* elements.

This is also true with regard to the story that elderly people (65 and older) tell about themselves. In Farquhar's qualitative empirical study, independence is

held in high esteem by elderly people. Other surveys (e.g. by Philipson in the United Kingdom and by Leeson in Denmark) show that the elderly perceive independence as an important aspect of their 'quality of life' (Farquhar, 1995; Philipson et al, 2001; Leeson, 2001). Independent housing is one aspect, but so is the desire not to have to rely on other people, especially not on their children. The abstract story is thus told by old people themselves as well. We continue to speak about the abstract nature of the story being told about and by the elderly because the reality of being frail – the reality of being in real need of assistance – is not recognized as a central issue. Actual dependence in all of its various aspects (ranging from the very practical level of being cared for to the existential and philosophical level of needing people to step forward and meet the very old) is kept out of sight. The story is socially exploited in the sense that self-reliance is enhanced as a political goal and a moral value; it could be said that people are self-reliant by proclamation until the opposite has been proven.

A highly rhetorical use of images is involved. The 'things we do with words' (the famous words of Austin) turn out to be a two-edged sword: one that is used on those who are addressed and one that is used by the same people on themselves and others. The combination of the idea of the autonomous client and that of self-reliance (which, as a value, is not the same as autonomy) has a powerful impact on the arrangement of facts and imaginations. To be sure, the present generation of people between 55 and 75 years of age already places a high value on autonomy, which is seen as self-determination (Parr, 2005). The idea of autonomy, however, functions as a strong steering vector and as a delineator: two dominant values (autonomous clients; self-reliance) not only dictate the story but also set a boundary against attacks on the use of the story: 'until the opposite is proven.' Although other values (like respect) are there as well, they are not allowed to have a real impact (they are not allowed to steer), whereas such values as compassion are seen as strange, out-of-place ideas, not to mention a value like love towards elderly people and love of elderly people. They are of no use to a social ethic. Certain values like love and love in the

mode of friendship (seen by the Catholic Church as the highest good), are over the edge; they seem inappropriate in the public realm and have become strictly confined to the private sphere.<sup>12</sup>

We now sketch two lines of thought that appear capable of countering the fictitious and abstract story about the elderly. First, as we turn to the lives of the very old (those who are or seem to be 'useless' in every sense, not even as loving grandparents, people who have gained practical wisdom that can give orientation to others or witnesses of the history that has produced present society) at an anthropological level, we encounter the ever-existing possibility of *being touched and moved* by other people. We use the expression 'being touched and moved' as the pre-moral and non-naturalistic phenomenon of being moved by life itself while being touched and moved by another person. We do not use the expression in a mere emotional or psychological sense. To be moved is a movement of body and soul. In 'being touched and moved', we refer to every possible movement that can occur when meeting other people, including the very old. We refer to movement not only in a 'positive' sense (i.e. 'feelings' that are felt and/or seen as pleasant: endearment, tenderness) but in every possible sense; one can be revolted, become angry and grow bored as well as being impressed, happy and grateful. Meeting the very old – those who cannot play the game of autonomy and self-reliance – refers us to the pre-moral, volatile foundation of ethics: the possibility of being moved by somebody. We draw heavily upon the phenomenology of the French philosopher Emmanuel Housset and, to a lesser extent, the work of the German phenomenologist Rolf Kühn (Housset, 2003; Kühn, 2004).

Second, we ponder the concept of being witness to the lives of the elderly. Being a witness in this context is an idea of importance to Housset and Ricoeur<sup>13</sup>. Witnessing is a specific way of remembering: not only have we seen, heard, felt and smelled what has happened and have understood it in one way or another; we publicly express what can be dismissed to oblivion and what must be remembered, whether the people we have encountered can speak for themselves

or not. Not only are we witness to something; we are witness *in front of someone*. This is the entry point for political ethics.

### 3. THE INTELLIGENCE OF BEING MOVED

What happens when someone provides care to an elderly person in a professional capacity? Take the example of a man of 96, whom a professional helps to go to the toilet. The man is no longer able to retain his urine; he is incontinent. He uses a diaper for that reason and needs help 'to get rid of the thing' (as he calls the diaper). He also needs help to find his way to the bathroom in his own small apartment, as he is not always steady on his feet.

What is happening in this situation and what needs to be done can be described from the point of view of nursing and from the point of view of professional nursing ethics. This is why protocols exist. We can use moral standards and principles to describe what is morally at stake in this minor everyday scene (e.g. the principle of promoting and respecting the autonomy of the client), or we can describe the scene and indicate what has been done morally, using the principle of respect as such. In addition to these principles and guidelines, questions in professional ethics, including the fundamental asymmetry between caregiver and client, have been discussed by several authors. Ricoeur extends this question from professional help to *helping as such*, regardless of whether the helper is a professional or someone else who is willing to help. He speaks of 'the persistent dissymmetry of the relation to others on the model of helping' (Ricoeur, 2005, p. 69). Relating the dissymmetry to the position of the helper (i.e. being in the position and willing to help), and further relating it to some kind of actual ability to help (whether in a professional or non-professional sense) allows to go a step further. Before help is provided, there is an encounter. At a more elementary level, two people come together. Could it be that, at that level (moving from the aesthetic to the ethical level), decisive questions must be addressed before we can move to the moral framework of helping and helping as a professional?

### False pity and pity

Housset has developed an idea about the intelligence of pity. Augustine and William of Saint Thierry are the memorable theological sources for this thought (Housset, 2003, p. 124-132).<sup>14</sup> In the section below, we sketch this idea and reflect upon its importance for a political ethic of care with regard to the very old.

There is a form of pity for others in need that is ultimately oppressive and indeed scandalous. In this regard, pity is seen as a type of commiseration. People ('we') are moved by the sight of another person who is suffering pain and is in distress. We witness and share in this person's pain, and we reach out in an effort to help. From being moved, we come into action; we go from the pathetic level (the elementary awareness, already known by Augustine and Aquinas, of the ever-present human capacity to be moved) to the ethical level (Housset, 2003, p. 11-17). Long before Nietzsche gave his devastating attack on pity ('compassion is despising'), Augustine pointed to the maliciousness of pity: pity can be 'pure violence.'<sup>15</sup> Why is this so? It is because we do not cultivate the consciousness of what happens, in phenomenological terms, when we meet other people. We experience the basic phenomenon of being moved (whether attracted, repulsed or caught up in some other more complicated movements) by meeting other people. We bypass this opportunity to become human if we embrace the image we see of someone suffering (in whatever way) and enjoy the lovely feeling and right intention: we make our joy out of that suffering. In the words of Housset (Housset, 2003, p. 53),<sup>16</sup> 'It is dangerous if we want to pass on immediately from experiencing (*sentir*) to perceiving (*percevoir*) and in doing so leave [the layer of] experiencing,' It is not that we enjoy the suffering as such; we enjoy the theatre, the scenery. This can enclose us in an unhealthy joy derived from the suffering of another person (Housset, 2003, p. 24). This kind of pity 'for the weak' is a 'product of the imagination'; it is a kind of 'negative self-affection'. We feel the joy of sadness for a harm that we imagine might strike us in the future. The reality of being in contact with somebody is suppressed (Housset, 2003, p. 27). At the root of this phenomenon is an image, a representation of the

self. By making a detour along the phenomenology of the body (as advanced by the work of the seventeenth century French philosopher Nicholas Malebranche, which plays a pivotal role in modern French phenomenology)<sup>17</sup> Housset defends the thesis that only by being immediately present to oneself can one truly encounter, see and listen to another person. Only then is one able to be moved and touched. This kind of intelligence unfolds through experience rather through theoretical reasoning or observation. It does not analyse, separate and distinguish; instead, it allows life to show itself. Augustine once again guides us through this thinking: if we are moved by meeting someone who suffers, we will refrain from the possibility of assuming a neutral position.<sup>18</sup> It is not within the realm of reflection upon another person or in the realm of imagination regarding the things that one perceives with that person, nor is it within the enclosure of the self that pity can arise. It is at the level of the awareness of living with others. Pity thus has a broad meaning, and it is not confined to commiseration. Housset peels away the meanings of pity and arrives at a re-categorization. Pity occurs when we become aware that someone human, one of our own kind, is alive and when the awareness of that life reveals itself in us; it is our own awareness of being alive. In other words, a form of pity exists that foregoes reflection. This can become clear after the false kind of pity has been ousted. The intelligent form of pity is related to the reality of the other person: he is vulnerable, and he is obscure to himself. This is also to say that 'we' are not transparent to ourselves, given that we cannot look into another (Housset, 2003, p. 63-65).<sup>19</sup> Housset considers this proper kind of pity scandalous as well, but in the sense that it explodes the myth of an autonomous life.<sup>20</sup> False pity is actually no pity at all.

Pity aligns itself with life in its phenomenality. This kind of pity is not a feeling (in the sense of an emotion, like the emotions of sadness or rage).<sup>21</sup> It is about being moved, in body and soul, and about being present to this movement. Because of this layer of obscurity and because we are a secret to ourselves, this kind of pity is intelligent. Only by realizing that I am a secret to myself can I be available to another person, who is a

secret to himself as well. The situation is even more radical: one must be prepared to defend this fundamental opacity (Housset, 2003, p. 84; p. 139). Step by step, this phenomenological train of thought makes room for a radical symmetry. It is important to discover this radical symmetry in any encounter, rather than assuming asymmetrical relations (with regard to our topic, asymmetrical relations between care professionals and elderly people). This is not to say that asymmetry does not occur in professional care-giving, but it does not occur at the most elementary level. Nor does this mean that we must descend to a simple theory about an encounter 'from person to person', an ahistorical and non-contextual claim about human nature as such, and our proposal does not involve an I – Thou approach. Instead, it refers to a return to 'the truth of experiencing self', to the awareness of being alive. Housset refers to this as '*l'expérience originaire*', the first experience of belonging to life in a common world. In the gnoseologic order, truth becomes known through pity (Housset, 2003, p. 15; p. 121).

#### Awareness and the phenomenality of life

Kühn can elucidate this, even if his phenomenology is in another vein: the 'radical phenomenology' developed by Henry.<sup>22</sup> The accessibility to life as such is pure 'passibility,' the capacity to be moved.<sup>23</sup> The sensitivity to life implies that any encounter can be thought of only as pity, as the sensitivity to undergo life with someone (Kühn, 2004, p. 77-79). In Baart's theory of presence, assisting individuals in their suffering is regarded as fundamental in professional care. We would like to amend this, however, by stating that there is a more elementary layer, that of pity. This kind of pity, which differs from the false kind of pity mentioned above, is located in a layer that exists before reflection and deliberation take place. The professional caregiver in our example need not apply principles or approach the old man with a set of views in order to help him go to the toilet. Instead, the professional must be courageous enough to be aware of himself (or, in most cases, herself) and of being with a member of his (her) own kind. Accepting this passibility requires courage. Although such movements as revulsion can obviously occur, this is no longer a

negative feeling; it is the way *one experiences the power and the movement* of revulsion (or any movement that might occur). Neither my negative feeling (e.g. revulsion at the smell of urine) nor my own suffering (e.g. being bullied by old people) can be used as a projection screen, which I might have started using as a result of looking at the old person.<sup>24</sup> Life – or rather, participation in life – shows itself; it is phenomenal. Pity is therefore more than just another feeling; it is the root feeling as such (Housset, 2003, p. 65). Kühn speaks about the second birth to life, with reference to the Gospel according to John 3. Because it has become evident that pity is not condescending but constitutive to a relationship,<sup>25</sup> it has also become clear that pity is not subjective. Although only people experience pity, it is not enclosed in subjectivity; pity is participation in life itself. More precisely, it is the awareness that we have entered into a situation in which it is possible to pay attention to that which is manifesting itself (Housset, 2003, p. 70). As we allow ourselves to go along with the movement of being touched by the mere presence of another person, (i.e. the presence of an old man or woman), we realize that we are alive. The theoretical implication is that people conceivably do not relate to each other as individuals and then decide to associate, but that they are already in a community, as Housset states. Alternatively, as posited by Ricoeur, they are already in an *institutional* community.<sup>26</sup> This proposition does not imply that the community is peaceful, without conflict or without tensions, but it is there nonetheless. Through passibility, we recognize from the very beginning that we are alive, together with those who are like us. Radical equality is implied in this similarity; it is not something that must be accredited later on (Housset, 2003, p. 116). In passibility, the already existing communality is awakened or, as we prefer to phrase it, communality is cultivated. It must be cultivated, as life, as it presents itself, is constantly being forgotten and hidden (Housset, 2003).<sup>27</sup>

In the interest of clarification, Housset's approach is different from that of Levinas; it is not that the face of the Other commands us like an intrusion or a law (Levinas), given that Housset's proposition is not an a

priori readiness to the radical alterity of the Other. Neither is it self-affection, as Henry holds.<sup>28</sup> If we meet someone, if we help someone, if we help someone professionally at a fundamental, ever-present level, we are aware that we are alive in recognizing someone of our own kind. This recognition occurs through our participation in life. By fundamental, we mean the most elementary level in the domain of knowledge; we are not referring to ontology.<sup>29</sup> It is at this point that respect arises, not in the sense of respect for the law of the other, but as knowledge. We are respectful witnesses to the 'passibility' of another person, who is now suffering pain.<sup>30</sup> Housset uses strong language in stating that 'he who poses as an impartial judge and knows with certainty about the other person is a figure who is near to evil' (Housset, 2003, p. 65). We know by means of 'appropriateness' that life shows itself in the other person as well as in ourselves. It is 'fitting' to be aware of the life of the other and that of ourselves. Respect is rooted in experiencing and knowing, in this view, it is not rooted in distanciation, reflection and judgment.

#### **Pudeur and participation in life**

In this context, Housset uses the French word *pudeur* in a specific, not necessarily commonly accepted sense: that of an attitude of withdrawal. By *pudeur*, Housset means the appropriateness of allowing other people to show themselves. Neither the other person nor I are hiding our respective selves; we are willing to be there and to show by that mere fact that we are participating in life. This is the telos of life and the starting point of ethos. Opening up to our own existence and that of the other person is to honour that person. This opportunity to open up can be either entered into or disregarded. It is thus not a simple natural reflex, and it is not a reflection.<sup>31</sup> Step by step, we go from the *aisth sis*, the domain of the senses, to the ethical. Pity creates a large space from which the professional caregiver comes to respect the very old, transfiguring the passibility to an experience of welcoming the other person as one who, like the caregiver, is participating in life. Through pity, we come to know what it means to participate in life (Housset, 2003, p. 89-90, p. 142). This respect rests on pity, attentive appropriateness and patiently waiting for life

as it shows itself in the other person, without ever dissolving the mysterion (i.e. opaqueness) that the other person is. This implies that respect essentially forbids us from becoming spectators or analysers of the other person, as it is impossible to behave that way towards ourselves without hiding life itself (Housset, 2003, p. 99).<sup>32</sup> The professional caregiver is not a spectator but a witness to the passibility and vulnerability of the old person. The caregiver is moved in body and soul and refrains from avoiding such a response and beginning to judge. What we see before us is a being similar to ourselves, in the specific sense; the old person is one of our own kind, and we cannot but be loyal witnesses at the risk of being disloyal to ourselves (Housset, 2003, p. 109). We see here the step-by-step development of an ethic that remains rooted in passibility at every stage. It is brought about by the goodness of life as it presents itself in both the old man and the professional caregiver, in their capacity to be moved. Their humanity is deployed and cultivated through pity, in which the two actors recognize each other as singular expressions of a universal phenomenon, to be living human beings.<sup>33</sup> Even if the possibility of pity exists for both, and we emphasize that the old person in our example enters too into the possibility of pity; the caregiver does not have to wait (in a manner of speaking) for the old person to be moved, or to exhibit a mastery of the self or to engage in any kind of deliberation or reflection. The presence of the old person is sufficient to allow the professional caregiver to enter into the possibility of pity. The presence of the old person as such is a good, even without any merit or activity on his part. Housset points out that there is a certain circularity to pity: to enter courageously into the possibility of pity presupposes some knowledge or openness to living together. At this level, there is evidence of a gift, that the possibility was somehow shown to us and that we were already in that domain. A thing called love was given, and that gift created the possibility of becoming more human by daring to be moved (Housset, 2003, p. 149, in the chapter titled '*La piti  de Dieu*').

#### 4. HONOUR WITHOUT MERIT

We do not primarily advocate the rights of the elderly or make a plea on their behalf, but we are witness to their presence and their participation in life, as we are aware of our own participation to life. To go a step further is to testify publicly that life reveals itself in meeting the very old. This special kind of witness to the existence of the elderly, this recognition (a central expression for Ricoeur with regard to giving testimony, meaning a trustworthy act of recognition) is comparable to making a promise: 'I will do it.'

Recognition is just as impossible as a promise is, because it ventures into self-constancy (Ricoeur, 2005, p. 92). A promise is impossible if approached from past events, with its many broken promises and coinciding efficient causes. From this perspective, it would be better never to make another promise. We must however make a stand for self-constancy and not let ourselves be diverted by the chain of efficient causes and their effects, nor must we allow ourselves to be expelled from freedom. To give recognition to the life of the elderly – to bring them honour for no other reason than that they are alive and in the community – is impossible as well. We give recognition to their existence and participation in life without looking for merits, in either the past or the present. It is not because the old man in our example has played an important role in building up society after the war, or because he is such a lovely grandfather; he isn't, and he's forgetful most of the time. We honour his existence because of his mere being there. This recognition implies that merits can be left to oblivion, but not because merits (e.g. having been willing to raise children or to guide the country) are not important. These merits are indeed what construe a humane community. Nonetheless, acts (whether meritorious or otherwise) are based on presence. This order should not be inverted, as the two should not be separated as if an ethic grounded in positive judgments could exist without an ethic of recognition. We recall the problems identified by Tronto regarding an ethic of care in a complicated political context: the problems of distance, inequality and privilege. We addressed all three of these problems when we stated that distancing oneself at the elementary level of being

moved terminates participation in life, that entering the possible domain of being moved involves being in touch with similar beings and, finally (with regard to privilege), that the realm of care cannot be constructed on merit. Recognition, in the sense of bearing witness to the existence of the elderly, essentially consists of accepting the possibility of being moved by similar beings. We thus accept self-constancy, always acknowledging the possibility of being moved again and again. We do this even though we cannot pose as autonomous persons; we would lose our participation in life by distancing ourselves from life in its phenomenality. This line of thought has implications for the idea of intervention and its legitimacy. Indeed, a dialectic exists between being very old in Western society and recognition, and between being moved and recognition. We are witness to the presence of the very old simply through our gratitude that they are willing to participate in life and be in the community of the living. Care and welfare professionals thus have a political-ethical road to cover; it is on that road that professional ethics has its track. Intervention must be legitimized within the boundaries of this track; legitimacy cannot be given without the fundamental common base: the human possibility of being touched and moved.

These two lines of thought thus lead to the foundational level of the professional ethic of care. We have no doubt that, while these two threads are insufficient to conceive a complete political ethic of care, they are elementary. We call to mind Walzer's idea that the primary good we distribute to one another is a *position* in some human community, and Taylor's concept of honour as a positional good. We have focused on just one building block for a theory of honour by outlining an approach that is concerned with being moved and recognizing the very old. Much theoretical work remains to be done, especially with regard to the position of the very old. Once the fictitious story about the elderly is dismantled, the elderly are sure to be the ones who will inexorably lead us to the *fundamental* good of life in community, in its phenomenality, and to the *highest* good that exists: love in the mode of friendship.

## NOTEN

1. H. Tristram Engelhardt, Jr. (1986, which differs sharply from the recast second edition of 1996) has had an enormous influence in bioethics by constructing a procedural, thin, 'content-less' bioethical theory, in which the autonomy of the patient is a vital principle within the larger moral principle of personal freedom, in addition to the principle of beneficence. (Engelhardt changed his position considerably to a plea for a thick ethic in his *The Principles of Christian Bioethics*, 2000.)
2. For example, this can be with regard to designing a personal life plan. See the critical study by M. Junge (2004), p. 143-162.
3. Pellegrino & Thomasma (1988, p. 13): "'Aesculapian power" was a major ingredient of cure. It rested on faith in the quasi-hieratic power and authority of the physician as a person. Indeed, the physician was part and parcel of the cure...' Pellegrino and Thomasma list three forces that have nurtured the exponential growth of autonomy: the expansion of political democracy to every sphere of civic life, fostering in each of us the desire to participate in the decisions that affect our lives as individuals against privileges of physicians; the dissemination of medical information to the public; and moral pluralism in society, which impels us to protect personal values against usurpation by others.
4. Tronto (1993) devotes the last chapter (Chapter 6) of her influential book to 'Care and Political Theory,' here: p. 161.
5. Tronto (1993, 158-167, here: p. 158). Tronto addresses these problems in the previous chapter, Chapter 5.
6. Walzer (1983, p. 31) speaks of membership instead of position.
7. M. Junge (2004, p. 158), drawing on the thought of Zygmunt Baumann.
8. Ricoeur, 'Love and justice' in: Ricoeur (1995) p. 315: 'Here by dialectic I mean, on the one hand, the acknowledgment of the initial disproportionality between our two terms, and on the other hand, the search for practical mediations between them – mediations, let us quickly say, that are always fragile and provisory.'
9. We rely on P. Ricoeur (2005) *The Course of Recognition*, Cambridge MA/London: Harvard University Press.
10. A. Baart's theory of being present will thus be amended with a political ethic regarding the very old. A. Baart (2006); A. Baart (2004); A. Baart (2002).
11. Data are from Eurobarometer surveys 1980-1990.
12. The separation of public and private spheres in Modernity has its equivalent in the architecture of ethics; see M. Düwell, C. Hübenthal & M. H. Werner (2002).
13. For Ricoeur: P. Ricoeur, 2000; P. Ricoeur, 1990.
14. We do not elaborate on the theological roots of the intelligence of pity in this article.
15. Housset (2003, p. 19 and p. 24) citing Augustine's *The Confessions*, III,II,3, BA no. 13, 'malivola benevolentia'. Housset provides an account of Nietzsche on pity on p. 32-36.
16. Housset (2003, p. 53): '*Le danger est de vouloir passer tout de suite du sentir au percevoir et donc de sortir du sentir.*'
17. As Merleau-Ponty already pointed out in *The Incarnate Subject* of 1947-48, and as he did with regard to the early phenomenology of the body, as developed by Maine de Biran.
18. Housset (2003, p. 108) citing Augustine's *Sermon Morin*, no. 6; p. 124, Augustine's commentary on the first letter of Saint John. See also p. 135.
19. This view is similar to that held by others, including Paul Ricoeur in *Oneself as Another* (in English: 1992) and Rowan Williams, *On Christian Theology* (2000), particularly in the essay 'Interiority and Epiphany: a Reading in New Testament Ethics.'
20. Housset (2003, p. 177): about the scandal of pity.
21. Housset (2003, p. 126): the concept of being moved goes back to the concept of love.
22. Even if Housset does not accept Henry's theory of auto-affection (Housset, 2003, p. 106), other parts of his work are in agreement with Henry (Housset, 2003, p. 90), for example, in regard to 'the neglect of life' that presents itself and Henry's critique of Kantian ethics that hides (*escamotage*) the passibility from which respect can emerge.

23. Kühn speaks about *Passibiliteit*. As far as we know, the word 'passibility' is a self-created expression used by Ricoeur since publishing *L'homme faillible* (Fallible Man) in 1960.
24. Housset (2003, p. 48) speaks of 'écran'. See pages 117, 123 and 177 on the courage to accept passibility.
25. Housset (2003, p. 26): '*Une pitié qui compare ne peut qu'oublier le moment pathique de la rencontre au profit des seuls moments gnosiqes*'.
26. Housset (2003, p. 44 and p. 105; 114): '*une coprésence originnaire au monde*'; Ricoeur (1990, p. 227).
27. Housset (2003) p. 141 on the '*oubli de la vie*'.
28. Housset (2003) p. 137 on the radical alterity of the other. Housset does agree with Levinas on other issues: 2003, p. 178; the basis of auto-affection as a concept is laid down in Michel Henry, *Incarnation. Une philosophie de la chair*, Paris: Seuil 2000.
29. At this point we do not agree with Housset (2003) p. 105, who thinks, in contrast to P. Ricoeur (1990), *Soi-même, X, 'Vers quelle ontologie?'*, 345-410, that an *immediate* link can be made between phenomenology to ontology.
30. Housset (2003) p. 43: '*Toute rencontre suppose que l'on puisse être le témoin respectueux de cette souffrance.*'
31. Housset (2003) p. 137, p. 167. Housset uses the German expression *Stimmung*; there are similarities with other scholars, including the German phenomenologist Hermann Schmitz. See: J. Soentgen, (1998, p. 66-67).
32. Housset (2007) elaborates on how this train of thought alters the very concept of 'person'.
33. Housset (2003, p. 137): '*Une expression singulière de l'universel.*'
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## SUMMARY

In this article, a foundation is formulated for an ethic of professional care, in which pity and honour play an important role. The authors argue that sincere pity is crucial in the relationship between those who are in need of care and those who provide care, as this capacity and readiness to be moved by the mere presence of the elderly allows care providers and care recipients to meet as equals, thereby providing a focus for the care. This situation generates an opportunity to respect and honour the care recipient. It does not involve 'honouring' the social contributions of those who are in need of care; it involves respect for the fact that they are people, just as the care provider is a person. The authors conclude that the combination of pity for and the recognition of those who are very old and in need of care would allow for a more humane caring relationship. The practise of being moved and the practise of honour give rise to an integral political-ethical approach to care within which to chart a professional ethic of care.