# Table of Contents

Acknowledgements ........................................................................................................ iv

Introduction ................................................................................................................... 1

Chapter

I. Chapter 1 ..................................................................................................................... 5
   Care and Care Ethics .................................................................................................. 5
   Virtue Ethics ........................................................................................................... 10
   The Virtue of Care .................................................................................................. 15
   Objections to Care and Care Ethics ....................................................................... 22

II. Chapter 2 ................................................................................................................ 30
   Circumstances ........................................................................................................ 30
   Capabilities ............................................................................................................ 35
   Suffering ................................................................................................................ 42
   Compassion ............................................................................................................ 45
   Care and Compassion ............................................................................................ 51

III. Chapter 3 ................................................................................................................. 58
   Serving Strangers ..................................................................................................... 58
   The Virtue for Service ............................................................................................. 66
   Evaluating and Assessing Service Work ............................................................... 71
   Professional Work and Poverty ............................................................................ 78

Works Cited .................................................................................................................. 82
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INTRODUCTION

My interest in ethics has led me not just to an interest in scholarly philosophy, but in its living application. In the years before graduating with my Bachelor’s degree, even while having an interest in continuing on to graduate study, I aspired to join the Peace Corps. The Peace Corps offered the exact combination of experiences that I sought: educational focus, cross-cultural immersion, and capacity-building development work. During my two years in Malawi, serving as an English secondary education teacher, I gained insight into culture-influenced identity and thinking, value prioritization, and the diversity of ethical thought. One of the most significant benefits from my time there lay not in finding firm answers to outstanding questions, but rather in the discovery of questions I never knew I had. Many of these questions were pertinent to why I was there and what I was supposed to be doing. What counts as actual helping and by what standard are we to measure it? Are the fortunate morally obligated to help the unfortunate? What does it mean to do service work well? All of these issues concerned my interest in enhancing the service work I was undertaking.

After finishing Peace Corps, I returned to the U.S. and served with AmeriCorps for a further two years, working with underprivileged youth and their academic development. While this service experience was considerably different from my Peace Corps experience and helped me gain further insight into the world of service diversity, many of my questions were merely supplemented or refined, not answered.
What emerged as one of my most foundational questions was, what does a service provider have that allows him or her to consistently do excellent service work? What distinguishes the excellent service provider from the mediocre or bad service provider? Outcomes surely have a place in answering such a question, but outcomes do not constitute the whole answer; in spite of the crucial role outcomes play in service work. Simply saying that a good service provider is one who achieves good outcomes in service work is not very explanatory. We evaluate the service provider differently from the service work itself. A more informing question is, what is it within the service provider that allows him or her to consistently achieve good outcomes in their service work? We can start to see a picture emerge in considering real life examples. The begrudging or coerced volunteer may occasionally achieve good outcomes, but we certainly would not expect her or him to consistently do so. Further, there is something left to be desired in the volunteer who accidently or mistakenly achieves good outcomes due to thoughtless conduct just as there something left to be desired in the volunteer who achieves good outcomes, yet whose concern is not with those he serves, but with gaining popularity or prestige. We do not consider such flawed volunteers to be role models when we aspire to understand what a good service provider is.

What distinguishes our excellent service providers, such as Mother Theresa, from the apathetic or uninterested service provider? Is it life-long devotion and percentage of time spent serving others? I am inclined to say no, though that surely contributes to why our social heroes are recounted so often. It is not merely how often they served others, but in how they served others, that gains our respect and admiration.
I think a colloquial answer to this question would be that Mother Theresa earnestly cared for those she served. Another word that seems to answer the question in a similar way would be to say that Mother Theresa had compassion for those she served. She was not coerced. Her thoughts and attention were not elsewhere. Her motivation was not self-oriented. She genuinely wanted the lot of those she served to improve. What makes a service provider a good service provider? At least part of the answer seems to be that the agent earnestly and excellently cares for those she or he serves, or perhaps, the agent earnestly and excellently has compassion for those she or he serves.

Both of these terms, caring and compassion, when considered colloquially seem to equally answer the question of ‘what is going on within an agent who does excellent service work?’ The investigation I will undertake in this thesis is not intended to invoke a terminological battle, although I will argue that compassion is the appropriate virtue to develop when one is a service worker. What I will develop as compassion in this work might, in other places in the literature, be called care. Likewise, what I will be calling care in this work might, in other places in the literature, be called compassion. What I am arguing for is that there are two different concepts that can aptly be described as two different virtues. They are closely related and often overlap, but their purviews are distinct.

In the first chapter of this thesis, I will develop the notion of care. Care is the more apt starting place to begin my investigation of service work as it has a more established place in the literature. Through care ethics, I will develop a notion of care and argue that it can be considered as a virtue in neo-Aristotelian virtue ethics without
any substantial alterations to the concept. I will also discuss inherent limitations of the scope of care concerning strangers.

In the second chapter, I will focus on Martha Nussbaum’s human essentialism to develop a grounded notion of suffering. With the concept of suffering established, I will argue for a definition of the virtue of compassion that focuses on addressing the suffering of others. I will contrast compassion to the virtue of care, then consider the scope of compassion as it compares to the scope of care.

In the final chapter, I will develop a notion of service work that is inclusive of colloquial notions of service and volunteering. Care and compassion are then considered as possible candidates for what constitutes the excellent service provider’s excellence, and I argue that compassion is the appropriate virtue. Finally, I give a brief mention to the problem of paternalism as it occurs in service work and how compassion and virtue ethics generally would address it, as well as a mention of professional service work and poverty.
CHAPTER 1

The concept of care is explicated best in care ethics. The ethics of care is a “process of trying to understand what morality would recommend and what it would be morally best for us to do and to be” (Held, 538) through the lens of care. After considering the concept of care and care ethics, I argue that care can be considered as a virtue in neo-Aristotelian virtue ethics without substantial alterations. Finally, I will argue for some merits of subsuming care into virtue ethics as a response to objections to care ethics.

CARE AND CARE ETHICS

Nel Noddings in Caring argues for a comprehensive ethics based on the concept of care. Her theory begins with the position, following Martin Buber’s I and Thou, that relationships, not individuality or autonomy, are ontologically basic for human beings. To say that relationships are ontologically basic means that any conceptual work that employs, or applies to, people, must consider people as relationally situated (someone’s brother, friend, child, etc.) as opposed to autonomously independent and distinct from social relationships. If relationships are the central feature of the human way of being, then care emerges as the central feature of how one ought to interact with other human beings; that is to say, care is ethically basic. A person’s status as a moral being depends on maintaining one’s self as caring. Noddings develops the terms one-caring and cared-
for as the one doing the caring and the one being cared for, respectively.\textsuperscript{1} The view of oneself as one-caring is the \textit{ethical ideal}. The ethical ideal means to want “to be moral in order to remain in the caring relationship and to enhance the ideal of ourselves as one-caring. It is this ethical ideal … that guides us as we strive to meet the other morally” (Caring, 5). A feature of Noddings’ care ethics is that we have a moral obligation to develop and maintain ourselves as one-caring (Caring, 82).

The ethical ideal is developed from what Noddings calls \textit{natural caring} and \textit{ethical caring}. Natural caring is the natural empathy we feel towards others. It is the sentiment we have when we encounter the immediate desire, the innate impulse, to attend to those with whom we are close. The paradigm example of this concept is of a mother caring for her child.\textsuperscript{2} In the ideal instance of a mother caring for her child, there is no mediating factor of duty or external sanctions that move her to care. She just cares. There might be multiple desires on the part of the mother at any one moment, but the overriding desire in the mother is the desire to care for her child.

Ethical caring occurs “in response to a remembrance of \textit{[natural caring]}” (Caring, 79). This forms the basis for ethical obligation within the ethical ideal; Noddings claims that ethical caring is the thought and feeling of ‘I must’ that we encounter when we wish to maintain ourselves as one-caring in accordance with our ethical ideal. The practical upshot of the ‘I must’ is that even when we are in situations

\textsuperscript{1} In \textit{Caring}, Noddings consistently uses the feminine pronoun, “she” to refer to the one-caring and the pronoun, “he” to refer to the cared-for. In my discussion of care in this chapter, I will adopt Noddings’ style. However, this should not be read through an explicitly gendered lens; the pronouns could be reversed without any conceptual difficulty. My later discussion of Virtue Ethics in this chapter will alternate use of the pronouns in examples.

\textsuperscript{2} Noddings regularly calls upon the mother/son example in her work. I will follow suit in my discussion of care, though the evaluations or arguments would obtain in the same way should any of the examples be changed so as to discuss a father and his child instead.
when we find it burdensome or immediately undesirable to engage in caring, we are required to care if we wish to maintain ourselves as one-caring, and we are naturally motivated to maintain ourselves as one-caring (**Caring**, 82).

For example, consider a mother at the end of an exhausting week. She usually is a nurturing and caring mother to her son without effort or strain of will. However, given the hardships of this past week and her resulting fatigue, her son’s demands on her attention, usually pleasant or at least manageable, are now burdensome. She still responds and engages with her son in a caring manner, but there is a greater amount of effort that is needed in the process. In her ‘usual’ state, when she is not so fatigued, Noddings would describe the attention that she gives to her son to be natural care; she immediately wants to care for her son. After the difficult week, the mother still goes about her caring activities with her son, but her reasons for doing so have changed. She does not have the overriding immediate inclination to care for her son. She wants to lie down and take a nap, or perhaps to go read a book. Nonetheless, she still has the feeling that she must³ maintain herself as one-caring. In Noddings’ work, we must remember that relationships are ontologically basic in human beings, and care, as Noddings develops it, is the central calibrating feature of what it means to be **good**. A person’s status as being moral depends on maintaining one’s self as caring, and thus, to be a good human being, you must uphold yourself as one-caring.

Noddings’ concept of care employs two central features: **motivational displacement** and **engrossment**. To care for another person means that the one-caring has displaced her interests from her own reality to the reality of the cared-for. The cared-

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³ This is the feeling of the ‘I must.’
for’s interests become hers; his desires, goals, struggles, failures, and successes are adopted by the one-caring. In having these adopted interests, she is motivated to help in what ways she can. Often, though not always, this is a motivation towards some action (Caring, 16), but may also be attitudes or emotional responses. This adoption of interests, desires, goals, etc. is called motivational displacement: “the one-caring must be engrossed in the reality of the one for whom she cares, so that there is a flow of motivational energy from the one to the other” (Garland, 181).

In order for motivational displacement to occur, the one-caring must also be engrossed in the cared-for. The word ‘engrossment’ means that the one-caring has the cared-for in her mind as an area of focus and attention. This allows her to learn about the cared-for’s interests, goals, values, and dreams. Once known, motivational displacement may occur. Noddings later supplements her notion of engrossment as “feeling with” (Caring, 30). She describes it as a receptive version of empathy: “I do not ‘put myself in the other’s shoes,’ so to speak, by analyzing his reality as objective data and then asking, ‘how would I feel in such a situation?’ On the contrary, I set aside my temptation to analyze and to plan. I do not project; I receive the other into myself and I see and feel with the other. I become a duality” (Caring, 30).

Consider the following example: the mother whose eight-year-old son has shown an interest in art. Because she is attuned to, or engrossed in, her son and his life, she recognizes his new interest (whereas the non-attentive parent plausibly might miss that

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4 Again, see footnote 1
5 One can become engrossed in another, learning about the other’s interests, goals, etc., without adopting those goals. It is possible to remain ambivalent to the known interests of others, to not become concerned with those you are familiar with. What distinguishes a caring relationship from non-caring relationships is when both engrossment and displacement obtain.
her son has shown an interest in art). His new interest is then adopted by the mother; she is now interested in art for him. This is motivational displacement. It is important to note that she is not now interested in art for herself (presuming that she did not have interest before). Her interest is in him developing his artistic interest and faculties.

Both the features of engrossment and of motivational displacement are necessary for genuine care to occur. In any situation in which the supposed one-caring considers the problem at hand in an abstract, problem-solving way, “there is … a shift of focus from the cared-for to the ‘problem’” (Caring, 25), resulting in a failure of proper caring. When I am in some sort of dilemma regarding an action I must take onto a friend, if I start my deliberation by abstracting myself away from the relationship (what should one do in such a situation, regardless of who one is), then I would no longer be focusing on the ontologically basic feature that creates my predicament: that he is my friend. In that relationships are ontologically basic, and thus care ethically basic, abstracting away from the relationship, and thus from care, hinders the pursuit of the ethical thing to do. This constitutes Noddings’ rejection of focusing on abstract principals in moral thinking.

Finally, we should note that Noddings blatantly rejects the possibility of care being subsumed into a virtue ethics framework. This refusal will be addressed in detail below.

**Virtue Ethics**
Raja Halwani, in *Care Ethics and Virtue Ethics*, argues that the concept of care developed in care ethics ought to be subsumed under virtue ethics. Doing so, he argues, will preserve the most intuitively appealing and important aspects of care ethics while supporting the concept of care within a comprehensive moral theory, enabling the concept of care to withstand several criticisms. The virtue ethics Halwani considers is neo-Aristotelian eudaimonistic virtue ethics.⁶

In virtue ethics, to have a virtue is to have something that makes its possessor good: “a virtuous person is a morally good, excellent, or admirable person who acts and feels...as she should” (*Virtue Ethics*).⁷ Virtue ethics, in the neo-Aristotelian tradition, focuses on excellences of character. First, a virtue is a character trait. It is “a disposition which is well entrenched in its possessor, something that, as we say ‘goes all the way down,’ unlike a habit such as being a tea-drinker” (*Virtue Ethics*). To have the virtue of honesty, say, is certainly not reducible to a single specific act of truthfulness, nor can it be reduced to a person who usually (or even always) is truthful; virtues demand more than observance of certain actions or achieving target consequences, though consistently preforming actions and achieving consequences in line with the virtue at hand is essential. In addition to right action, and achieving target consequences, virtues call upon the reasons and affective states the agent employs.

Right action in virtue ethics refers to the target or end of a virtue. A feature of a virtue is “the characteristic targets it aims at, such as the well-being of others in the case of beneficence and the control of fear in the case of courage” (Audi, 180). The priority of

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⁶ Later references in this work to virtue ethics should be considered as this type of virtue ethics, unless otherwise mentioned.
⁷ The following introduction to virtue and eudaimonia is a summary of content from the Stanford Encyclopedia of Philosophy entry on virtue ethics, by Rosalind Hursthouse.
conceptualization is important; right action is understood via the virtue at hand and its characteristic targets, thus the virtue is conceptually prior to the right action in that you need to understand the virtue before you can know what the right action is, and not the other way around. Therefore, an “act may hit the target of a virtue – realizing its end – without the act being an act from a state of virtue” (Swanton, 29); one can, for example, realize the target of beneficence without being beneficent.

Reasons for action are a central feature of all virtues. The truthful businessman who calculates that a reputation for truth telling will be financially beneficial, or who fears that he might be caught, falls short of begin genuinely honest. The honest person recognizes that honesty is an end worth seeking in and of itself; “an honest person's reasons and choices with respect to honest and dishonest actions reflect her views about honesty and truth…Valuing honesty as she does, she chooses, where possible, to work with honest people, to have honest friends, to bring up her children to be honest” (Virtue Ethics).

A further demand of the virtues is that of having the proper affective response. The person who does the right action for the right reasons may yet do so begrudgingly or with some other form of reluctance. The concept of the virtues contains the ideal that the virtuous person does what the virtue calls for without a struggle against contrary desires.

The concept of eudaimonia is also central to understanding neo-Aristotelian virtue ethics. The standard translations of eudaimonia are 'happiness' and 'flourishing.' The variety speaks to an inadequate English translation for the ancient Greek term. Flourishing is something that animals and even plants can do, but eudaimonia is often
regarded as something only rational beings can achieve. On the other hand, a contemporary understanding of ‘happiness’ connotes an affective state which is subjectively determined; I, and only I, can determine whether and when I am happy or not. Aside from certain extreme instances of self-deception, if I consider myself to be happy, then I am; I cannot be wrong about being happy just as I cannot be wrong about being in pain.

With ‘flourishing,’ however, there is no difficulty in comprehending that what I might think of as a flourishing life might be wrong, and in this way, ‘flourishing’ is a better translation than ‘happiness’ for eudaimonia. It is easy for people to misjudge whether their life is (or more often, is close to) a eudaimon life. Not only is it easy to deceive oneself, but it is easy to have a mistaken conception of what is involved in eudaimonia, of what it is to live a flourishing human life. Eudaimonia, thus, is patently a value-laden concept of happiness. As such, it evokes notions of “true” or “real” happiness, that, while admitting of diversity in details, does have objective standards.

Virtue is conceptually entwined with eudaimonia. Most virtue ethicists concur that living a life in accordance with virtue is necessary, though perhaps not sufficient, for eudaimonia. Virtue does not simply promote eudaimonia; it is, at least partially, constitutive of eudaimonia. In eudaimonistic virtue ethics, “the good life is the eudaimon life, and the virtues are what enable a human being to be eudaimon because the virtues just are those character traits that benefit their possessor in that way, barring bad luck” (Virtue Ethics). The conceptual relationship extends both ways; in considering a virtue-candidate, that is, whether or not a certain character trait is indeed a virtue, one would need to establish whether it promoted eudaimonia on the part of the
agent. In this way, the individual virtues are conceptually dependent on the concept of eudaimonia.

So, the concept of virtue is of something that makes its possessor good: the virtuous person is the morally good person who acts, thinks, and feels as he should. Doing so promotes eudaimonia on the part of the virtuous person. That we include the features of act, thought, and feeling, is important. It is the case that a kindly child may intend, by natural inclination, the right action, but will often fail to have a full understanding of why it is the right action. A reliance on inclination is what Aristotle means by ‘natural virtue’ — “a proto version of full virtue awaiting perfection by phronesis or practical wisdom” (Virtue Ethics).

The concept of phronesis is best understood “by thinking of what the virtuous morally mature adult has that nice children, including nice adolescents, lack. Both the virtuous adult and the nice child have good intentions, but the child is much more prone to mess things up because he is ignorant of what he needs to know in order to do what he intends” (Virtue Ethics). Consider the plausible example of children when they do harm to those whom they are intending to benefit. This comes about because they do not know how to secure the benefit or perhaps because they lack a precise understanding of what is beneficial and harmful, and are thus often mistaken. Both adults and children can have phronesis to greater and lesser degrees. However, when children make such mistakes, we recognize that they are rarely, if ever culpable.

Adults, on the other hand, are rightly held to a higher standard: “adults are culpable if they mess things up by being thoughtless, insensitive, reckless, impulsive, shortsighted, and by assuming that what suits them will suit everyone instead of taking
a more objective viewpoint” (*Virtue Ethics*). Having phronesis involves knowing what
the actual benefits are and knowing how to achieve them effectively. Phronesis grants
the capacity “to recognize, in any particular situation, those features of [a situation] that are morally salient” (*Virtue Ethics*). The complexity of distinguishing the morally
salient features of a situation from the morally non-salient is what phronesis
accomplishes.

Virtue ethics, then, is a normative theory that evaluates and prescribes not
merely actions we should take, nor only the consequences we should strive for, nor
intention distinct from action and consequences. Virtue ethics gives an account of the
kind of person we ought to be and the kind of life that we ought to live, in other words,
it tells us what constitutes a good life. It conveys the prescription of the kind of person
we ought to be through the lens and language of virtues. On such an account, actions
and their consequences are also given a place; the kind person does kind acts,
consistently achieving target consequences in line with the virtue of kindness, but also
does so at the right time in the right way towards the right people with the right
rationale and with the right affective state.

**The Virtue of Care**

Halwani argues that care ethics ought to be subsumed under virtue ethics. The
concept of care should be taken out of the framework of care ethics, in which it is the
single defining concept, and put into the framework of virtue ethics as one virtue
alongside others. I must note here that care ethics has divided champions. Different
care ethicists argue for different notions of care. Halwani and I focus on Noddings’
version of care because it is one of the seminal versions in the field. The concept of care she develops emphasizes salient features of moral consideration that, before the ethics of care, were widely glossed over in other normative systems. Noddings’ concept of caring includes motivational displacement and engrossment. The “intuitive appeal” (Halwani, 164) of caring is bound up with featuring those two concepts in an account of caring; “much of the interest in [care ethics] stems from the fact that it attends to those areas in life, such as friendship, parenting, love, and marriage” (Halwani, 164) which are often left unaccounted for in other ethics.

Please recall, however, Noddings’ direct rejection of the claim that care, as she considers it, is, or could be, a virtue in the framework of virtue ethics. She does use the term virtue in several places in her work, but she clarifies her colloquial use of the term by noting that “we shall not let [the mention of] ‘virtue’ dissipate into ‘the virtues’ described in abstract categories. The holy man living abstemiously on top of the mountain, praying thrice daily, and denying himself human intercourse may display ‘virtues,’ but they are not the virtues of one-caring” (Caring, 80). Her segregation of the ideas is due to her rejection that the concept of care can be considered within a system of virtue ethics without fundamental alterations to the concept of care.

The concern is that if care were considered to be a virtue, the caring agent would “get saddled with paying too much attention to [her] own character” (Halwani, 22). The one-caring, in engaging in care, must be occupied with the cared-for, that is, others with whom she is in relationships. In this way, care is relationship oriented as opposed to self-oriented or individual-oriented. Framing care as a virtue supposedly

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8 The most popular theories of the time (1984), deontology and consequentialism, were guilty of this.
confounds this orientation. Virtues, as just expounded upon, are partially understood by the notion of them promoting eudaimonia on the part of the person executing the virtues; virtues are, a priori, conceptually dependent on eudaimonia. In the case of care as a virtue, this would mean that care would partially be understood by, and be able to be prescribed because of, its effect on the agent who is doing the caring (the effect being that it contributes to one’s own flourishing). Care within care ethics, on the other hand, is considered ethically basic. Care is the sole ground (not something else, even partially, like eudaimonia) for considering, evaluating, and prescribing moral thinking, behavior, and emotion. Any deviation from considering care as ethically basic might result in some sort of concept of care, but not the concept of care that Noddings developed.

The concern is twofold: 1) in considering care as a virtue, a caring agent would end up being preoccupied by herself and her own character, and 2) that taking care as a virtue is incompatible with considering care to be ethically basic. The first concern is a mischaracterization of what happens in virtue ethics. When an agent preforms a kind act towards someone, it is the case that he may obliquely intend for that kind act to help him develop or maintain a good character. However, it is only an oblique intention. If he is genuinely engaging in the virtue of kindness, then his direct intention is not to benefit himself, but merely to be kind to that other person for kindness’ sake. Any awareness of the notion that preforming kind acts benefits himself is not part of the motivational path that virtue ethics advocates. Virtue ethics does not espouse doing kind acts with the sole motivation of the agent wishing to reach or approach eudaimonia; kind acts should be engaged in because kindness is intrinsically worth engaging in.
The second concern, that taking care as a virtue is incompatible with considering care to be ethically basic, and that a deviation from considering care as ethically basic will result in a fundamental change in the concept of care, depends on what is meant by ethically basic. If you will recall, care ethics takes relationships to be ontologically basic, and thus care as the normative factor that would inform what is ethically basic. Virtue ethics holds the individual as ontologically basic and an individual’s flourishing as ethically basic (Halwani, 168). Noddings view of care as ethically basic is entwined with taking relationships to be ontologically basic. Insofar as virtue ethics does not employ a relational conception of a person as ontologically basic, then it apparently conflicts with considering care as ethically basic.

Clarification needs to be given, however, on what is meant by stating that an individual’s flourishing is ethically basic. First, proponents of virtue ethics consider flourishing as ethically basic in that it takes seriously the topic of what constitutes a well-lived life, and it includes considerations of a well-lived live in its normative descriptions and prescriptions. Second, proponents of virtue ethics claim that it is rational to be virtuous “because being virtuous provides one’s best chance to lead a flourishing life” (Halwani, 169, emphasis added). From these two factors, however, one cannot conclude that virtue ethics takes an individual’s flourishing to be ethically basic in the sense that it advocates individuals to violate others in some sense when their own flourishing is at risk. The point is relevant because if it were the case that furthering one’s own flourishing trumps virtuous activity, then the concept of care would regularly be violated. However, the virtues, we must recall, are partially constitutive of a
flourishing life. It is necessary to be virtuous if we are to achieve a eudaimon life. Being virtuous is not a mere tactic that a person can adopt when it is advantageous.

The concern that a deviation from considering relationships as ontologically basic will result in a fundamental alteration in the concept of care is unproblematic. The concept of care retains its relevant properties and functions when taken as a virtue; “a virtuous, caring agent would act in a caring manner, and would feel the requisite emotions, when the situation calls for care” (Halwani, 169). Moreover, considering the emphasis that virtue ethics places on humans function in society and in relationships, virtue ethics is able to accommodate care as a virtue that would not be rare and heavily circumstantial (consider magnificence), but would be fundamental for almost everyone, holding a place of centrality in the ethical dimensions of human life.

The critique that virtue ethics holds the individual as ontologically basic where care ethics holds relationships as ontologically basic still holds. But, this is not problematic in subsuming the concept of care in virtue ethics. What is important in this project is that the concept of care and its ethical implications are incorporated into virtue ethics. What is not essential is that virtue ethics incorporates care ethics’ ontology. The concept of care as a virtue retains its centrality in the relevant ways in virtue ethics without any of the feared alterations to its fundamental features.

Another interpretation of ‘ethically basic’ that Halwani wrestles with is understanding care as basic in the sense of not being conceptually secondary to another item, that is, as theoretically or conceptually prior. Consequentialism, for example, might argue that “caring relationships are conducive to over-all better states of affairs, but theoretical priority is still given to the latter. Thus, caring actions would have to
be considered as “merely instrumentally good” (Halwani, 185). Better states of affairs would have theoretical priority over caring actions in consequentialism.

Again, in virtue ethics, the virtues are bound tightly to the end of flourishing. The two (virtues and flourishing) cannot really be separated. It is rational to live a virtuous life insofar as it gives one their best shot at achieving eudaimonia, but eudaimonia is not some separate thing considered independent of the virtues. If a virtuous agent were in danger, it would not be the case that he would refuse to act in a brave way, as that would pose a danger to his life, and dying goes against a flourishing life. It “is not a tactic an agent adopts when it so suits the agent” (Halwani, 169). One ought to act virtuously for the sake of acting virtuously, which simultaneously corresponds to the end of eudaimonia. Care as a virtue, along with every other virtue, can thus accurately hold to being ethically basic in this sense.

Beyond Noddings’ concerns about whether the concept of care can be considered as a virtue without major alteration, we must consider how care aligns with the definitional features of virtues. Halwani suggests we think of care as a virtue alongside the other virtues⁹ in virtue ethics. There are features that all virtues share that care also holds. One feature of virtues, as Aristotle outlines them, is that they lie between a mean of vices, one of excess and one of deprivation (Nicomachean Ethics, 1107a). Bravery, for example, lies between rashness and cowardice, respectively. The vices are bastardizations of the virtue; rashness resembles in many ways bravery, yet fails in taking that type of action too far, beyond what phronesis would support and away from the orienting direction of eudaimonia. Care can also be articulated this way. The vice of

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⁹ He does not specifically articulate which virtues care stands alongside, but the impression is given that it would include the usual suspects, including kindness, bravery, generosity, and so forth.
deprivation for care could be callousness or coldness regarding those with whom one is intimate. The vice of excess would be self-sacrificing which would entail consistently caring for others to a degree or frequency that results in harm to one’s self.

Another central concept of virtue is how virtue relates to action. Aristotle gives three conditions for virtuous action. He states that “first [the agent] must know that he is doing virtuous actions; second, he must decide on them, and decide on them for themselves; and, third, he must also do them from a firm and unchanging state” (Nic. Ethics, 1105a30-1105b).

Without the first condition, it is difficult to distinguish the virtuous from the vicious: “it is the former, because they are virtuous, who engage in their actions with knowledge rather than accidentally and by stumbling through their daily lives. The idea is that virtuous agents be able to tell the difference between actions that are good and right and those that are not, and this is part and parcel of Aristotle's requirement that decent agents be morally wise” (Halwani, 170). This is a plausible demand for care. Regardless of how spontaneous and unmediated we believe caring actions ought to be, we should also want them to “issue from reflective and morally committed agents” (Halwani, 170). When considering instances of excellent caring acts that come to mind, we do not often associate them with thoughtlessness and being bereft of reason.

The deliberation for a specific act, however, might not take place in temporal proximity to the action; one can go through the deliberation process at some point prior to the circumstances calling upon the action, perhaps even prior to knowledge of the circumstances. Consider a young boy who, for whatever reason, decides that from now on, he will make a focused effort to be honest. At some later point, when an opportunity
for advantage or benefit due to dishonesty comes about, he does not need to deliberate in that moment about what to do. He had already decided to be honest generally, and can thus respond to the situation with spontaneous honesty. The same holds for the virtue of care. When a woman finds out that she will soon be a mother, she might reflect and consider what kind of parent she wishes to be. One choice she may make, be it considered in these terms or others, is to be a caring parent. When the opportunity for care arises, then, she is able to respond to it with spontaneous, yet reasoned, care.

Aristotle's second condition, that the agent must choose the virtuous action, and decide on them for the sake of themselves, requires that the virtuous agent acts justly because the action is just, honestly because the action is honest, courageously because the action is courageous, and thus, caringly because the action is caring. In other words, Aristotle finds that to act justly, say, for some other reason, perhaps because other people are looking and you do not want to get into trouble, is a failure of justice. The action itself and consequences might be the same in both cases, but there is a difference in intention. The parallel with care is evident: “a caring person can act caringly with all the needed and felt emotion while also acting for the right, [caring] reasons” (Halwani, 170).

The firm and unchanging state that Aristotle speaks of in his third condition is the agent's character. Reliability is the concept at hand. A virtuous agent, because of his moral education, habituation, and upbringing, is reliably virtuous. The reliability of an agent not only concerns her actions, thoughts, and achieved consequences, but also her affective states and motivation. An essential part of the virtuous agent's moral training is that of her emotions, and so when she acts from a stable state she not only
does the right thing for the right reasons, consistently achieving the right consequences, but she also has the right emotional reaction and motivation.

Beyond the concept of care aligning to Aristotle’s conditions of virtues, care aligns well with the principles of eudaimonia and phronesis, and is even enhanced by them. With the added conceptual framework of eudaimonia and phronesis, the concept of care that Noddings focuses her ethics on is grounded and oriented in a way that helps us better evaluate certain situations in which care is at hand. More will be said on this below.

**Objections to Care and Care Ethics**

Halwani’s project of subsuming care into virtue ethics is motivated by the potential of salvaging the important concept of care from two objections raised against care ethics. The first criticism, by Victoria Davion, concerns engrossment and motivational displacement. The concern is that if one genuinely cares for someone who is, or does, evil, then the one-caring might himself become or do evil. Halwani considers that “if engrossment and displacement are, respectively, allowing oneself to be transformed by the cared-for and adopting the goals of the cared-for, then in caring for someone who is evil, the one-caring allows himself to be transformed by the cared-for and to adopt immoral goals, and such a person, the one-caring, simply cannot be viewed as a moral paradigm” (Halwani, 163). Thus, something is needed to regulate care so as to prevent moral corruption, and care ethics has no such regulative principle. The second, which Halwani summarizes from Claudia Card, asks the question of how we are “to think of our moral obligation to the people that we are not in caring relations with
… we seem to need another moral concept that would ground our obligations to those who are not cared-for” (Halwani, 163).

Halwani begins his discussion of the first criticism with the question: “Is it sufficient that the goals of the cared-for be [merely] believed by her (the cared-for) to be good in order for her friend, the one-caring, to promote them? Or should the goals be genuinely good?” (Halwani, 165). He uses the following case. Halwani has female friend, X, whose romantic partner, Y, has begun to be verbally and psychologically abusive. Given X’s years of love for her partner and her closeness to the situation, she is unable to recognize the hopelessness of their relationship, and instead clings to hope of things improving. Halwani is able, having the perspective that is often granted to those not tied up in the problem, to plainly see that the relationship, and Y’s attitude towards his friend, is unrecoverable. In such a case, is it important that the goals and interests of his friend, the cared-for, be genuinely good in order for Halwani, the one-caring, to support them? Is it merely enough that X believes that her interests and goals are good? X is interested in preserving the relationship and convinced that it is a good goal to pursue things further with Y. Halwani, on the other hand, believes both that X’s judgment is misguided and that the relationship is not merely unsalvageable, but actually harmful to X.

The colloquial answer to this question is that Halwani should not support X’s goal; we deem it prudential to convince X, perhaps as gently as we can, how such a relationship is harmful and looks to continue being that way. However, as it is the case that caring, for Noddings, is the single moral value, then
her account will be crippled by such a case: if the one-caring refuses to support and promote the goals of the cared-for, then the one-caring would be acting under a diminished ethical ideal on Noddings’ account … [by such a case] we have clearly laid out the need for an ethical scrutiny of caring relationships, so that one does not end up caring for another no matter what the other’s goals are. (Halwani, 166)

Care ethics has no grounds on which one could argue with such a friend that the goals she has are bad and that those another have for her are better.

The danger of not having a way to ethically scrutinize goals, dreams, or aspirations of the cared-for extends beyond cases of the one-caring being prescribed to allow self-destructive in the cared-for. Namely, if the cared-for is evil or well-entrenched in evil doings, then the one-caring, in adopting the cared-for’s aspirations, goals, and dreams through the process of engrossment and motivational displacement, may be morally corrupted. Imagine the cared-for to be a mobster, and one of his top desires and goals is to be downright dreaded due to his tendency to inflict harm onto those who displease him, aiding him in a quest of power. A practical condition of achieving this goal is that he must inflict harm on people who displease him. The one-caring, were she to adopt this goal, would be caring for the cared-for by, perhaps, supporting or aiding in the torture of another. The one-caring, in trying to be a good, ethical person (constituted by being a caring person, as per the definition of “ethically good” established in care ethics) ends up supporting the torture of another. This possibility, that actions prescribed as good and ethical can lead to evil deeds, such as supporting torture merely for the sake of another’s ambition, is the process of moral corruption; the one-caring is corrupted by the cared-for’s evil.
This is a relevant concern because, after all, real life mobsters and other violent criminals who tend to be associated with “evil-doing” do have intimates. The engagement with discovering what is good for the cared-for (not the cared-for’s perhaps mistaken notions of his own goods) constitutes a pivotal feature of what is needed to partake in good caring and to distinguish good caring from bad caring, and where caring is appropriate and not. Noddings explicitly notes that the objective or motivation of the one-caring’s care is “towards the welfare, protection or enhancement of the cared-for” (Caring, 23). This involves “stepping out of one’s own personal frame of reference into the other’s. When we care, we consider the other’s point of view, his objective needs, and what he expects of us” (Caring, 24, emphasis added). This notion of “objective needs” or goods is thus a crucial component of the caring process, but it is one that Noddings does not fully address. Noddings avidly rejects including abstract principles in her care ethics, yet it seems that without the calibrating or orienting principle of some sort, care in care ethics is directionless.

The claim that care needs ‘ethical scrutiny’ contains, contrary to Halwani’s evaluation, two components.\(^{10}\) The first is that such scrutiny, to be effective, must utilize a calibrating concept by which to evaluate and distinguish good goals, interests, etc. on the part of the cared-for from bad ones. Without such a calibrating concept, the one-caring is in danger of supporting evil goals. The second component is that the agent must have a means by which she can understand how she ought to employ this calibrating concept in the practical world.

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\(^{10}\) Halwani only considers the second component, but not the first.
Halwani suggests that practical reason, phronesis, would fulfill the role of the means by which one could determine “how to best care for the other. He goes on to say “the regulative role of reason\(^{11}\) would allow the one-caring, be it the offspring [, the friend,] or the parent, to decide whether to continue to be in such a relationship [with the cared-for] and so to continue to be caring or not” (Halwani, 174). Genuine caring is not so simple as to want to aid the cared-for in any old goal, but only the ones that actually better and help the cared-for. A mother will not want to adopt and promote her son’s emerging drug habit, even though recently getting and using drugs is a goal of importance from his point of view. Given this consideration, the one-caring would be selective in what goals she adopts and promotes. Furthering evil goals and consequences, or self-destructive ones, would not be actually better nor help the cared-for, and thus would be excluded. In excluding those goals, the danger of moral corruption is averted.

The unanswered factor in Halwani’s text is how the one-caring is to determine what is actually better and helpful for the cared-for. Given the neo-Aristotelian framework directing this thesis, I suggest eudaimonia be the calibrating concept that the one-caring ought to utilize to identify what is actually better and helpful to the cared-for. Eudaimonia, if you may recall, is a value laden concept. It employs an objective notion of what may be considered good for a human being, though it admits of a certain degree of diversity in the details given the specific human being at hand.

In the self-destructive case of a mother who has a son with an emerging drug habit, she may deliberate upon whether the life and activities of a drug addict promote

\(^{11}\) Note that Halwani, in “Care Ethics and Virtue Ethics,” uses the term “reason” in most places as shorthand for “practical reason” or “phronesis,” and should be read as such.
the cultivation of virtue within the addict, that is, whether such a life leads to or aligns with a eudaimon life. An exhaustive analysis of such a case is beyond the bounds of this thesis. Appealing to an intuitive evaluation, the life of a drug addict would not be a life in which one might be encouraged to cultivate virtue. The intuitive analysis would likely go so far as determining that such a life characteristically promotes vice. The mother may conclude that, though she recognizes (via engrossment) her son’s goal of using more drugs, she will not adopt that goal, and will not do so for the reason of appeal to her son’s flourishing. Given that she has the virtue of care, she will actually acquire the goal for her son to stop doing drugs; the mother’s engrossment and motivational displacement in her son is manifest in her desire to end his drug use.

A similar process would follow for the more dramatic cases of the cared-for being evil. The one-caring ought to deliberate upon whether the life and activities of a mobster will promote the cultivation of virtue. In this case, the life and activities of a mobster promote vice. Depending on the specific circumstances at hand, the one-caring would need to determine, again using phronesis, whether to merely not adopt those particular goals and encourage other, more virtuous ones, or perhaps to abandon the relationship altogether.

The second objection to care ethics that Halwani considers is the question of how we are to consider our moral relations to people whom we are not in caring relations with, that is, non-intimates. Care makes sense when dealing with intimates. Its function is unclear when dealing with distant strangers. On Halwani’s evaluation

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12 I think Noddings’ inclusion of the proximate stranger as someone we can care for to be problematic. This is, however, beyond the scope of this paper. What I am positing here is that care is a priori limited in
of Card, Care Ethics “does not give us a way to ground our obligations to non-intimate others, especially strangers, who, as far as the one-caring is concerned, comprise the bulk of humanity” (Halwani, 176). In subsuming the concept of care into virtue ethics, however, the objection would be adequately addressed, for a virtue ethics that includes care as a virtue would not have care as the sole virtue of how to respond to others. A virtuous person would also have the virtue of justice, amongst others,\(^\text{13}\) that would give prescriptions on actions and obligations to others. In considering justice, we find a virtue with a primary function of deciphering or revealing our obligations to strangers (Halwani, 176). Therefore, virtue ethics is not only able to give a full and detailed account of how to care for intimates, but also can account for strangers and everything in between.

The target of the two objections is important. Both objections conclude that care ethics has deficiencies. Specifically, the moral corruption objection was an objection to how caring is directionless within care ethics. The objection can be resolved if the concept of care is brought into, and enriched by, the virtue ethics framework, specifically by the features of eudaimonia and phronesis. Card’s stranger objection points out the limitation of an ethic that only appeals to one normative concept (care). That objection is not a problem for virtue ethics, even one that includes not need to. The concept of care is not altered when it is considered a virtue; it is still oriented overwhelmingly towards intimates and, relevantly, unable to give clear

\(^{13}\) Consider kindness, generosity, and compassion.
prescriptions regarding strangers.\footnote{I shall establish in the final chapter that service work is primarily oriented towards strangers, and care as the central virtue is problematic in accounting for the demands of service work.} Virtue ethics can call upon other virtues, thus the overall ethic can address a larger swath of moral life.

In this chapter, I have articulated a conception of care. I have also argued that the concept of care can be subsumed into, and be enhanced by, virtue ethics as a single, albeit important, virtue alongside others. The motivation for subsuming care into virtue ethics is that care, if it is the sole normative concept being appealed to in ethical evaluations, has prescriptive limitations. If care is taken as a virtue alongside other virtues, it still has the conceptual limitations in scope, but this no longer constitutes a problem; the other virtues can be called upon to address the areas that care does not concern.
In the first chapter, I gave an account of the virtue of care. I considered Noddings’ conception of care in care ethics, and then suggested how that concept of care could be brought into, and be enhanced by, virtue ethics as a virtue. In this chapter, I will focus on the virtue of compassion. The primary conceptual feature of compassion, I will suggest, is suffering. I will begin by developing a notion of suffering that is grounded in a particular kind of essentialism. I will then explain how suffering features in a definition of compassion. Finally, I will compare the virtue of compassion to the virtue of care.

CIRCUMSTANCES

Alasdair MacIntyre, in *After Virtue*, discusses the historical notion of virtue in ancient Athenian culture. A central feature in ancient Athens was in how their culture understood virtue to be bound up with society and the interactions therein: “to be a good man will … be at least closely allied to being a good citizen” (MacIntyre, 135). This is why, for example, banishment was such a significant punishment in ancient Athens. Given that “the virtues are precisely those qualities the possession of which will enable an individual to achieve eudaimonia and the lack of which will frustrate movement towards that telos” (MacIntyre, 148), to have no community to engage with meant not just a lack of security, convenience, and socialization; social interactions were
a prerequisite for the execution of many of the virtues, and thus to remove one from society was to remove one from the potential to engage in many of the virtues.

Two relevant points emerge from MacIntyre’s evaluation. First, community plays an important role in virtue ethics. The more immediately relevant point MacIntyre puts forward is the more connection between the circumstances of a life and the pursuit of eudaimonia. Situations and circumstances of a life can influence one’s ability to pursue virtue and thus to achieve or approach eudaimonia. This point is explicitly recognized by Aristotle in his holding that, “happiness evidently also needs external goods … we cannot, or cannot easily, do fine actions if we lack the resources” (Nic. Ethics, 1099a, emphasis added). He explains his position by noting features such as having a low birth (a poor family) or being childless and alone as not aligning well with our notion of a flourishing person.

In some cases, external hardships such as poverty likely would not render the pursuit and execution of virtue impossible, but such circumstances often at least inhibit an agent from the virtuous life. A man who has immediate and warranted concerns of how to feed and shelter himself has his attention diverted away from living excellently. We can understand that he is more concerned with achieving a bare minimum standard and not so much the lofty standard of living well. That he might scrape and struggle his way through his circumstances into living excellently is certainly possible, but if that transpires, we admire him all the more for it. We recognize that he overcame hardships that normally hinder a pursuit of an excellent life where a financially stable person would, all other things being equal, have an easier time of things.
I am arguing in this thesis that A) *certain circumstances necessarily inhibit, but do not necessarily prevent, the pursuit and exercise of virtues*\(^{15}\). It is important that the claim be phrased in the negative. This thesis is neither arguing B) that the presence of amicable circumstances necessarily promotes the pursuit and exercise of virtue, nor C) that the presence of amicable circumstances is necessary for an agent to engage in virtue and to flourish.

In regards to the negative thesis A), imagine a person who is already extraordinarily virtuous and who falls horribly ill. Such a person may have a higher tolerance to unfortunate circumstances and even in such a state may execute and grow in virtue, thus furthering him on the path towards eudaimonia. In such a case, however, it seems right to say that the ill person is hindered in pursuing virtue by his illness. His

\(^{15}\) What about the person whose hardships, let us say it was torture, actually enabled her to grow in virtue? In *Ethics for the New Millennium*, by the 14\(^{th}\) Dalai Lama, an example is explored of monks who were tortured by the Chinese for years and later escaped. The Dali Lama noted that some of them were the strongest people he knows now due to their hardships. Their extreme experiences makes ‘normal’ hardships seem like nothing at all, and they can effortlessly conduct themselves with integrity and virtue (though he did not use those exact terms) in the face of what would normally be considered arduous circumstances.

The connection between the monks’ hardships and their strength of character as he explains it is, I think, ambiguous. Consider the following example: Imagine a case of a professional basketball player who, by all accounts, is not a very virtuous person. He was often inconsiderate, if not cruel, towards others, selfish and self-centered, and so forth. He gets into a car accident and becomes paralyzed. He loses his wealth, his fame, and his physical mobility. He is often in pain. He ends up working as a basketball coach for kids who are wheelchair ridden because he has few other skills and it is the best paying job he can find. Over time through his experiences there, he learns humility, kindness, and how to genuinely care for others.

This sounds like a possible movie plot, if B rated. In a sense, it seems as if his hardships moved him to become a more virtuous person. He certainly would not have worked at the camp if he had not had the injury, and thus the injury plays a role in the narrative of how he grew in character. But, his injury is only *indirectly* related to his becoming more virtuous. It was the work with the children over time, along with an open mind, that had the direct impact on his character. That the activities he underwent at the camp could influence his character, we can imagine, would be the case regardless of whether he was injured or not. The character-changing event was not due to the injury, but was due to his long term experiences with the children. The injury played a role in the story, but not directly in his cultivation of virtue. Without his experiences at the camp, he would not be able to develop the virtues he did. The injury alone is not sufficient, whereas the time spent with the children plausibly is. The basketball player’s accident was not a blessing in disguise, just as the monks’ torture ought not be considered some sort of positive event, even though things ended up all right.
illness prevents him from engaging in activities generally, and thus his opportunities to engage virtuously in his activities are also reduced. He is limited, perhaps, to exhibiting and practicing virtues from his bed while the illness persists. He can no longer engage in the other regular activities of his life, which provide the majority of opportunities to exhibit virtue, for his condition significantly consumes his attention and time.

More precisely, it is not the illness per se that limits his activities, but the symptoms of his illness. States such as a weakened body, a fevered mind, or bodily pain all inhibit activities. The symptom analysis follows for the other circumstances that inhibit activity. It is not the fact of being impoverished, but the symptoms of poverty, that inhibit activity, just as it is not the fact of being injured, but the symptoms of being injured (such as pain, hindered mobility, etc.).

It is plausible to imagine that if the ill man were not sick, he would likely grow even further in virtue than the amount of growth he achieved while ill. Alternatively, for the immature brute who has not developed much virtuous character and whose tolerance to hardship is relatively low, the pain of the same illness might be so overwhelming that the pursuit or execution of any sort of virtue would be unlikely. Over time, we can imagine that whatever kindness, courtesy, and generosity he had in his character would actually start to retrogress. This is a fairly accessible picture to imagine: the sick person who becomes more angry and callous towards others as his hardships persist or grow.

It is not the case that amicable circumstance directly promote virtuous or eudaimon living (B). Many variables influence a person’s cultivation of virtue. Good circumstances alone cannot cause people to become more virtuous; amicable
circumstances merely allow people to do the activities that may directly influence character, namely, practicing virtuous acts. Virtue ethicists, we must remember, hold that the repetition of virtuous acts over time, say being honest, kind, or generous, cultivates those virtues in a person’s character; only after significant practice with exercising kind acts will the person cultivate the virtue of kindness. Practicing kind acts exposes us to the right sort of deliberation that kindness requires, the right sort of affective state, rationale/motivation, target outcomes, and so forth. Good circumstances do not, in any direct sense, guarantee virtuous development, whereas the absence of amicable circumstances may directly interfere. When a person is significantly ill or injured, a practical consequence is that his attention and time is consumed by the hardship. Insofar as his attention is on his condition, he is not able to engage in the practice of virtue. The presence of amicable circumstances operates as a foundation that is neither necessary nor sufficient, but often relevant, to the process of people becoming virtuous.

It is also not the case that C) the presences of amicable circumstances is necessary for an agent to engage in virtue and to flourish. For example, consider the following case: a person has suffered from multiple sclerosis (MS), an incurable, often chronically painful, though non-terminal condition, for many years. In spite of her condition, we find it completely plausible that she is a virtuous person. In all likelihood, if most of us were to magically change positions with her for a week, we would find her hardship debilitating in many ways. For many people, waking up with a simple headache is enough to change their disposition towards others for the worse. With a sudden onset of advanced MS, it is likely that most people would struggle to be as
virtuous as they were when they were healthy. That the woman is genuinely virtuous while having a burden that the rest of us do not have testifies to the strength of her character.

To review, eudaimonia, or human flourishing, is a central concept in virtue ethics. It orients us to the targets of the virtues. Virtue is the primary vehicle that moves us towards a flourishing life. What Aristotle recognized is that an agent’s being in certain circumstances can result in his being inhibited or prevented from engaging in virtue and thus in pursuing eudaimonia. However, even if these negative circumstances do not obtain for a certain agent, that person (just like many of us) might still not live a virtuous, flourishing life. My argument focuses on conditions whose absence inhibits the pursuit of virtue but whose presence does not promise the achievement of virtue. The next important question is, what kinds of circumstances have this impact?

**CAPABILITIES**

Martha Nussbaum, in *Human Functioning and Social Justice* and *Capabilities and Social Justice*, defends Aristotelian essentialism. She defines essentialism as “the view that human life has certain central defining features” (*Human*, 205). She holds that if we are able to identify a group of especially significant, basic features of a human life, then we are able to ask what political and social institutions are, and ought to be, doing with respect to them (*Human*, 214). She argues that “without an account of the good,

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16 Nussbaum uses the term essentialism in a way that breaks away, to some degree, from its traditional meaning. I am not entering into the discussion on what essentialism is at this point, but merely engaging with her use of the term.
however vague, that we take to be shared, we have no adequate basis for saying what is missing from the lives of the poor or the marginalized or excluded” *(Human, 229).*

In *Human Functioning*, Nussbaum argues for a specific list of central features of a human life\(^\text{17}\). She starts from the position that there is indeed a “shared general consensus about the features whose absence means the end of [a good] human life” *(Human, 215).*\(^\text{18}\) A good human life, on an Aristotelian account, is a human life in which its functions are executed excellently. The appeal to human functioning with respect to the essential features of human being is called functionalism. In a common explanation of functionalism, one inquires what the function of a knife is, to which the answer is to cut. An item that did not and could not cut could not be considered a knife. One must then ask what features allow the knife to cut well, to which one answer is that the knife must be sharp. Sharpness, thus, is an excellence, or a virtue, of a knife. We might go on to

\(^{17}\) Nussbaum’s essentialism offers two levels in what she calls the thick vague conception. Important to note here is the second level:

**Basic Human Functional Capabilities**

1. Being able to live to the end of a complete human life, as far as is possible
2. Being able to have good health
3. Being able to avoid unnecessary and non-beneficial pain and to have pleasurable experiences
4. Being able to use ones senses; being able to imagine, think, and reason
5. Being able to have attachments to things and persons outside ourselves
6. Being able to form a conception of the good and to engage in critical reflection about the planning of one’s own life
7. Being able to live for and with others
8. Being able to live with concern for and in relation to animals, plants, and the world of nature
9. Being able to laugh, to play, and to enjoy recreational activities
10. Being able to live one’s own life and nobody else’s …

The argument in this thesis is focused on the normative claim that there are shared characteristics in any good human life that ought to be pursued. How she arrives at this list and defends each element on it is beyond the scope of this thesis. Arguments for or against the inclusion of any specific item on her list is not a debate I will enter into. In this thesis, I focus on the arguments that encourages the development of such a list in general (that all humans have certain base functions and capabilities that relate to higher level, that is, excellent, sorts of human functioning).

\(^{18}\) Note, here, that Nussbaum is arguing for a stronger claim than I am. Her argument claims that certain circumstances necessarily prevent a good life, while I am arguing the weaker claim that those circumstances necessarily inhibit a good life. Her arguments and justification for her stronger claim can be used just as easily to support my weaker claim.
add having a good handle and strong material, amongst other qualities, as also constituting virtues of a knife. The point is, virtues allow the function to occur in a better way than if that virtue were absent. However, even without having a certain virtue, let us say sharpness, a knife may still cut things, it just cannot cut things well; the dull knife, after all, can cut, too.

A human being, like the knife, not only has multiple virtues, but for Nussbaum, humans also have multiple functions. Eating, for example, is one of the intuitive examples of functions of a human life that Nussbaum discusses. Humans need nourishment. If a thing does not need nourishment, then it cannot be human, just as something that does not cut cannot be a knife. Performing or executing human functions excellently is how we ought to understand human virtues. That being said, human functions are not the central feature of Nussbaum’s take on essentialism. Instead, she develops, from functionalism, what she calls the capabilities approach.

The capabilities approach asks whether or not a person is capable of fulfilling certain functions given their circumstances. The capability approach is not as concerned with whether or not the agent actually executes the functions in an excellent way (that is, whether the agent is virtuous), but rather it focuses on whether the agent’s circumstances inhibit her capability to achieve excellent human functioning.

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19 Nussbaum notes that there are two thresholds to consider when investigating capabilities. One threshold she considers is the complete absence of capability for certain sets of functions in a person, such as not needing to eat. Such beings would not be considered to live a human life; they are cut off from distinctly human ways of being. She focuses, however, on a second threshold, which she finds more practically relevant. At this threshold, we find the “level at which a person’s capability is … worthy of a human being. The idea thus contains a notion of human worth or dignity” (Capabilities, 130). It is not enough, following the Aristotelian tradition, to live merely a human life. Rather, a worthy, dignified, and good human life should always be sought.
In conditions of starvation, for example, the function at hand is eating, and the starving person’s condition of starvation inhibits his capability to execute this function in an excellent way. Nussbaum argues “that a life [that] has been so impoverished that it is not worthy of the dignity of the human being [may be] a life in which one goes on living, but [would do so] … not being able to develop and exercise one's human powers … A starving person just grabs at the food in order to survive, and the many social and rational ingredients of human feeding can't make their appearance” (Capabilities, 130).

The starving person is constrained by his circumstances to solely focus of the mere function of feeding to the degree that he has little or no ability to engage in feeding (as Nussbaum names it) in any sort of excellent way.

There are additional factors beyond external circumstance that determine whether or not the agent actually executes functions in an excellent way. Most relevantly, the agent’s own choices, attitudes, and actions are essential to living a flourishing life. As discussed above, a person can have every external advantage at her fingertips and yet may not live a flourishing life. Possession of favorable circumstances does not entail that that a person will live a good life, but insofar as lacking acceptable circumstances inhibits a person’s capability to fulfill essential functions excellently, lacking acceptable circumstances does entail a hindered pursuit of living a good life. External circumstances are certainly not the only important thing in pursuing a good life, nor even the most important thing. However, given that this thesis is an investigation into how to serve others well, circumstances of others are especially relevant in that it is an externally changeable feature; if you are hungry, I can give you food, and this change did not come from within you. A person cannot directly change
another person's internal states, such as making them to be kind, generous, or hard
working. Those kinds of alterations are concealed from direct intervention in a way
that circumstantial alterations are not. A starving person can be helped many ways in
his starvation with reliable results. He might be given food or money, given a job so
that he can provide his own, or taught skills so that he can pursue work in the long run.
Helping a person to overcome viciousness is far more complicated and beyond the scope
of this thesis. Circumstances, and the capabilities that are hindered or allowed by those
circumstances, thus have a unique role for the person who is concerned for the well-
being of others.

While it is the case that this thesis is operating in a neo-Aristotelian
eudaimonistic framework, the majority of rational adults (even those who do not
endorse eudaimonism) would agree that the lack of items on Nussbaum’s list (see
footnote 4), negatively influence an array of capabilities. Towards this end, Nussbaum’s
list of the capabilities is intentionally and necessarily vague. This vagueness is in
accordance with varied cultural, social, and personal conceptions of human goods. The
goods discussed in this thesis are meant to align with our intuitive encounters with
things that are so basic and fundamental that they would intuitively be accepted by
rational adults in other cultures and times as essential goods. This claim, however,
needs to be defended.

Every rational adult has some sort of notion of what constitutes a good life. It
may not be well defined or even consistent, but we all have our beliefs on the matter;
perhaps many of us are only confident about features that do not align well with our
notion of a good life. Julia Annas, in Intelligent Virtue (Annas, 119ff), observes that we all
have moments in which we recognize not being satisfied with everything in life. This dissatisfaction may lead to self-reflection. What is wrong with the life I have? What would make it better? Aristotle outlined one picture of what should be considered a good life in his notion of eudaimonia, but such a life is certainly not universally agreed upon, even in the narrow category of the Western philosophical tradition\(^\text{20}\). Many disagree on the major features of a good life, and nearly everyone disagrees about the details, especially if one is coming from a different culture. Nussbaum’s project thus focuses on finding the *shared* base features that support an array of higher capability sets. We may disagree about social issues, notions of right and wrong actions, and more, but we do not disagree that basic levels of health are better than illness or injury. We do not disagree that torture, starvation, and slavery are anathema and are not states that any would wish to live in.

Aristotle acknowledges that a eudaimon life cannot be prescribed precisely or exactly. It will vary, perhaps dramatically, depending on the individual. Perhaps a flourishing life for me might involve being a professional teacher. This might be the case, plausibly, due to my inclinations, interests, and personality. Not everyone’s inclinations, interests, and personality are well suited for teaching, however, and so for those, a life of professional teaching would not align with their flourishing. Maybe a life focusing on carpentry, botany, or painting would better align with their flourishing. Aristotle’s point, though I accept it and it is relevant to the argument here, is not the same point that I am trying to make; I am making a wider claim. Some reject the entire concept of eudaimonia and the type of theory that supports it. Even the majority of

\(^{20}\) Consider the hedonistic egoist, the utilitarian, and the Kantian deontologist, to name but a few.
these people, however, have concepts of what constitutes a good life. The modest claim here is that the majority of people will at least agree that having certain basic capabilities is beneficial to their notion the good life, whatever that may be.

I mentioned above that one might take issue with Nussbaum’s list of essential functions and capabilities, as it is developed in a neo-Aristotelian eudaimonistic system. However, the capabilities she develops are so basic, so elemental, that most of those who do not endorse a eudaimonistic framework recognize them as central, too. The specific items on her list of human capabilities were developed to meet broad cross-cultural scrutiny. Individuals who would otherwise have divergent views on what constitutes a good human life would endorse it; “The list is supposed to provide a focus for quality of life assessment and … aims to select capabilities that are of central importance, whatever else the person pursues” (Capabilities, 131).

If a person were to lack *enough* of the base features of his life, it would stop being plausible or perhaps even possible for him to pursue a life that would be considered good by any standard.21 It is important to note the distinct role that ‘good human life’ plays in this investigation. Keeping in mind the Aristotelian context of these claims, it is not being said that someone who lacks these base features is not human. Rather, Nussbaum and I are arguing for a minimum threshold of what constitutes conditions that could support an agent’s pursuit of a flourishing life.

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21 There very well might be others worse off than such a person, P … others who would exchange their life for P’s life if given the chance, but that does not mean that P has a *good* life, just a better life than the other. Additionally, a life that does not meet the minimum threshold should not be regarded as a bad life in the sense that it is not a life worth living, or that it would automatically be a mercy to end such a person’s life.
SUFFERING

The examples of situations that are capability reducing that I have been using (viz. starvation, illness, and injury) are all colloquial examples of states that bring about suffering. Suffering, in this thesis, is a state of physical or mental pain that affects the person such that the person’s experience and/or pursuit of a good life is inhibited. In the virtue ethical framework of this thesis, the definition of suffering translates into a state of physical or mental pain that inhibits the person’s exercise and cultivation of virtue, and thus, from the pursuit of eudaimonia.

We can tolerate much of the pain that we encounter in our lives. Imagine the case of an average adult getting a paper cut. It is not that she does not feel the pain, but the pain, and her tolerance to it, is such that she can endure the pain so that it does not significantly interfere with her life and activities. Contrast this to a person who has a car accident which results in a severe wound, say dismemberment of the person’s arm. The pain of such an experience would overwhelm nearly anybody, substantially interfering with the agent’s activities. Therefore, pain is not the same thing as suffering. If, in a particular moment, we are unable to tolerate the pain we are enduring such that the pain inhibits our exercise or cultivation of virtue, then we are suffering.

This means that the same pain may make us suffer in one instance and not suffer in another, though the same pain is present. We can work to manage our pain, developing our tolerance. Consider a professional boxer. The boxer, having been hit so many times in his training and matches, has developed a tolerance to the pain of getting hit, enabling him to endure the pain in such a way that it does not immediately interfere

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22 Broadly construed
much with his activities. Should that same boxer, at the very beginning of his training, be hit but a couple of times by a professional boxer, I imagine that he could not endure the pain to the same degree.

Many pains, especially less extreme ones, are experienced differently by different people. One person may be able to tolerate a pain so well that it does not cause her suffering, that is, it may not inhibit the person’s exercise and cultivation of virtue. Another, experiencing the same pain, might not do as well. Different people have developed different tolerances, and thus different people suffer to different degrees due to the same hardships. The paradigmatic four-year-old has less tolerance to both physical and mental pains than an average adult. A skinned knee or bump on the head will engender a full-blown interruption to the child’s life, though it is short-lived, wherein he nearly exclusively experiences the pain and his lack of ability to tolerate it. The adult, were she to experience a similar injury, would likely be distracted to some degree by the pain, but her life and activities would not be severely affected, even at the height of the negative sensation.

Lastly, suffering is not only brought about by physical states, but also by mental states. Grief, disappointment, fear, and much else, also produce suffering in people. For the purposes and scope of this thesis, however, I will primarily be focusing on suffering due to physical hardships.

On Nussbaum’s capabilities list are many of the intuitive notions of what we think of when we consider that which the lack of would bring about suffering. She includes bodily health (both injury and sickness), states of hunger and thirst, the

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23 See footnote 17
absence of access to shelter, the presence of pain, and more. However, this thesis is not concerned with whether or not individual items on Nussbaum's list ought to be included; that defense is beyond the scope of this thesis. Relevant here is the relationship between human capabilities and functions and the situations that inhibit these capabilities and functions that result in suffering. Capability-reducing circumstances, thus, is one source of potential virtue inhibition, and thus one source of suffering.

Though dramatic examples lend themselves well to an exploration of suffering, it is important to note that sources of suffering, as just elucidated in the child/adult and boxing examples, are, to a certain degree, subjectively encountered. What brings about suffering for one does not necessarily bring about suffering for others. Also, note that while capability reducing circumstances are one source of potential suffering, I am not claiming that they are the only source. Financially stable, healthy, well-fed people, that is to say, people whose circumstances do not inhibit their capability to preform essential functions, suffer as well. In other words, suffering is caused by more than circumstances of hardship.

I have argued above that there are essential base capabilities that all humans share, and that if circumstances in a life were such that these basic capabilities were inhibited, then that person would suffer. This gives us a shared foundation on which to understand suffering. Suffering is not limited to physical forms, nor are they limited by Nussbaum's full list. Many other forms of human suffering that a human can experience depend sharply on the person at hand. Circumstances that may cause one person to suffer may not cause another to suffer, or perhaps not to the same degree.
This thesis is concerned with the question: what virtue would allow a service provider to consistently do excellent service work? Care and compassion are both plausible candidates. The first chapter of this thesis focused on the concept of care. I began with care given that, as a normative concept, care is a relatively well explored and discussed notion in the literature, and, additionally, has a seminal conceptualization (from Noddings). However, care is not the only intuitively plausible normative concept that might feature in a discussion of service work; on the surface of things, compassion seems to apply just as well. However, unlike care, the virtue of compassion does not have a seminal conceptualization nor a dominant authoritative canonical understanding.

Chris Frakes, in *When Strangers Call: A Consideration of Care, Justice, and Compassion*, notes that compassion does arise as a feature of moral theories in the Western philosophical tradition often enough, but when it does, it does so with mixed evaluations. Some philosophers (such as the Stoics, Kant, and Nietzsche) deem it a misleading sentiment “that overvalues external goods and narrows the compassionate person’s attention in way detrimental to preserving a larger public” (Frakes, 82). Others (such as Aristotle, Rousseau, Hume, and Schopenhauer), who recognize the influence of external forces as playing a possible role in inhibiting a good life, deem attention to such forces to be warranted. This attention takes the form of compassion. From this recognition, they see “part of the good of compassion as providing for the basic needs of all, which furthers the overall goal of equality” (Frakes, 82).

Not all of the features the proponents of compassion give to it should be endorsed. One problematic feature sometimes associated with compassion is a feeling of
sorrow or sadness (Frakes, 83). The upshot of such an association would be that in feeling sorrowful compassion, one would be interrupted from merely being caught up in their own issues and motivated to respond to the other. However, the danger in connecting compassion to sorrow is that sorrow could easily slip into “anguish, which results in incapacitating the onlooker rather than readying her or him to respond to the suffering other” (Frakes, 83). Given that I am pursuing an account of a normative feature that moves and enables us to respond to suffering, associating compassion with something that is plausibly incapacitating is not helpful.

Aristotle considers compassion²⁴ to be a pain that accompanies witnessing an undeserved evil (Rhetoric, 1386a). The pain moves us to relate to, and thus have interest in, the other. This characterization seems to have more promise as a conceptual foundation for establishing what is morally relevant when helping others in need. However, including a notion of desert in the concept of compassion unnecessarily limits when compassion can take place.

Compassion may be appropriate for persons undergoing a deserved evil as well as for those undergoing an undeserved evil. The main sentiment of compassion is that we do not wish others to suffer. Aristotle contends that we ought not feel any ‘pain’ at suffering that is deserved. However, if we are trying to give an account of what is morally salient in responding to others in need, that is, in responding to others who are suffering, then our normative concept should be able to extend to all instances of suffering, even if that suffering is, in a sense, deserved. It may be that the demands of

²⁴ The Greek word at hand is eleos, which may also be interpreted as pity. If the pity translation is used, then I am merely distinguishing compassion from Aristotelian pity, not rejecting Aristotle’s characterization of compassion.
justice take priority over our compassion in certain cases, determining that we ought not interfere (allowing the suffering to take place), but that does not mean that compassion necessarily ought to be absent. The ‘pain’ we feel in encountering another’s suffering may still be appropriate.

The feeling of ‘pain’ the compassionate person experiences can be fleshed out by the notion of empathy. Empathy is a process that engenders an affective state or emotion in a person in response to the state of another. The affective state produced by empathy is not negative in all cases; empathy also takes places when one witnesses the good fortune of a friend or loved one, for example, and correspondingly produces within the empathizer a feeling of joy or happiness (perhaps). The sort of affective state engendered in the agent would depend on the sort of state the other is in.

Another feature of empathy is that it is not the case that the empathizer simply imagines himself in the circumstances of the other and imagines what he would feel if he experienced those things. Empathizing entails internalizing what the other is feeling and experiencing as the other experiences them. For example, suppose my aquaphobic acquaintance, Lesley, were to fall into a pool, get out, and then break into tears. Merely imagining myself in such circumstances is insufficient to grant understanding of why Lesley is crying and what she is feeling. I am not afraid of water, so falling into a pool would not scare me. Understanding what Lesley is experiencing as Lesley would experience it importantly allows me to internalize and adopt her fear of water and what it would feel like should I fall into water with such a fear. Thus, to empathize with another is to adopt the other’s internal state of affairs as if they were your own, understanding what the other feels and experiences as if you were the other. The
empathy employed in compassion features the focus on the suffering of others and entails a response of unsettled or disquieted concern. This, then, constitutes the feeling of ‘pain’ the compassionate person experiences when witnessing another who befalls evil.

Aristotle also posits that compassion is a pain at the sight of some evil “which we might expect to befall ourselves … soon” (Aristotle qtd. by Frakes, 83). Frakes speculates that Aristotle is talking about a belief of similar possibility. Like desert, this is another unnecessary component of compassion. Our possibility of enduring the same suffering that we are witnessing in another does not play a role in determining how, or if, we ought to respond to that suffering. It is the case that compassion often coincides with the belief of similar possibility, but that does not mean that they are conceptually related. What matters is the understanding that is granted by empathetic internalization. It matters that I understand, to some degree, the kind of suffering the other is going through, not my relation to such a fate.

In When Strangers Call, Frakes considers compassion as a neo-Aristotelian Virtue. Several important features of compassion arise when considering common elements possessed by all virtues. One of these, as Aristotle established, is that an essential element of the virtuous agent is that when he exercises virtue, it is pleasant for him to do so. This could be problematic for compassion; we do not want to say that we ought to take pleasure in the suffering of others. Frakes draws upon courage as a comparison. He observes that courage and compassion are atypical virtues in that they

\[25\] Emotions are notoriously tricky to unravel and understand. They are not analytically reducible in any clear sense. The feeling of concern is a dissatisfied, negative affective state, which moves the agent to attend to the source of the concern. In the case of encountering another who is suffering, one’s empathy establishes that other and their suffering as the target of the agent’s dissatisfied state.
characteristically involve the agent in some sort or pain. For the courageous person, it will likely be a physical pain. For the compassionate person, the pain will be produced by the agent empathizing with the suffering of another. Frakes goes on to say that “in the case of courage, one takes pleasure in the thought of doing the noble, even though one’s actions as a warrior may lead to pain or death” (Frakes, 84). Compassion can be analogous to courage in this way; the demands of the virtue of compassion need not include taking pleasure in the suffering of others. We can have a sense of pleasure in doing that which is noble, namely, alleviating suffering. This pleasure can be present in the agent at the same time as the pain produced by the agent’s empathy.

Another feature of all virtues is that they exist as a mean in between at least two vices. The vice of deficiency for compassion would be indifference or apathy, in which the agent would have no concern for the suffering of others. The apathetic agent’s characteristic response to encountering suffering in others would be a lack of inward (emotional) and outward (action) response. The vice of excess for compassion has no clearly identifiable term, but would be characterized by having damaging inward responses that would emotionally wound the agent, as well as unhealthy degrees of self-sacrifice.

Another possible way to think about it is that when we encounter suffering, and empathize with that other’s suffering, yet still do nothing about it, there is a bipartite pain occurring. We feel pain for the other via our empathy and we feel pain at our failure of response (pangs of conscience, perhaps). In a real person, such feelings would likely be all mixed together into a bundle of negative emotion, yet a bit of introspection would plausibly allow one to identify the two desperate contributing factors. When we feel pleasure in being compassionate, it does not entail that we are happy overall, but it means that we are not facing that bipartite pain.

We can imagine a plausible picture of someone who works in, say, a refugee camp, and who, in response to the plight he encounters there, is an emotional wreck. Additionally, he barely sleeps, eats, or takes care of himself in the other standard ways due to his acute focus on trying to alleviate the hardships of the camp members.
In considering each of the above components, it is now possible to give a definition of compassion: *The virtue of compassion is a comportment of empathy towards the actual or potential suffering of others along with the disposition to properly respond to that suffering.* Three characterizing components of any virtue are its target, reasons, and affective state. The target or end of compassion is to relieve or prevent the suffering of specific individuals or groups. Given the definition of suffering, this means that compassionate people work to alleviate or prevent the hardships which the sufferer endures. This constitutes the reasons for action and general aim of one’s deliberation in compassion. The specific content of deliberation would depend on what sort of hardship is at hand and what specific situation the agent and sufferer are in. The proper emotional state is empathetic concern for the other in response to knowledge of the presence of suffering.

Compassion, like any other virtue, has a passive state. The virtuous person still possesses her virtues when they are passive, that is, her virtues still reside in her even when they are not being exhibited. A person who characteristically responds to her fear of danger in excellent ways is still a brave person, even if she is not immediately facing danger or feeling fear; she has the virtue of bravery but it is only passively present in

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28 If someone were starving, context such as why he is starving, and to what degree, would play a role in how to best respond. If his starvation is due to extreme poverty and a lack of opportunity, a simple gift of a meal might not be sufficient.

29 One cannot feel, act, nor even think compassionately towards suffering people that one does not know exists or that are suffering. There is no target for the agent to respond to. This is an exceptionally low-level requirement, however. When one says that he knows that there are starving children in Africa, he likely does not know much about any individual starving children. He does not know their names or where they live or what language they speak. Perhaps he has seen some pictures in a documentary or non-profit fundraiser advertisement, or perhaps he merely read a newspaper article about it. The individual children are certainly strangers to this person, yet this knowledge permits compassion to begin to take place. Alternatively, I am unable to extend my compassion to all those whose suffering and/or existence I am unaware of. However, one may still have the virtue of compassion, albeit only present only passively.
her given that she is not currently threatened. Likewise, to be a compassionate person entails that one thinks, feels, and acts in line with compassion when, and only when, the appropriate circumstances obtain. Compassion is manifest in response to the suffering of others. When there is no suffering, compassion cannot be expressed, for there is no proper target of the feeling and/or act.

**Care and Compassion**

Care and compassion are closely related concepts, even to the degree that the two terms are frequently regarded as synonymous in colloquial usage. However, Frakes argues that a more detailed investigation reveals care and compassion to be disparate at multiple levels.

In considering the respective scopes of the two virtues, Frakes calls upon Noddings’s definition of care as being “‘charged with the protection, welfare, or maintenance of something or someone’” (Frakes, 81). Care involves engrossment and motivational displacement, which allow the one-caring to support the interests, goals, values, and dreams of the cared-for. To be caring includes having a caring attitude as well as undertaking caring actions, and this attitude and these actions occur constantly, consistently, rather than only at monumental moments. Thus, as Noddings develops it, a main feature of care is in its prescription of regular maintenance of the cared-for’s interests, goals, values, and dreams, as well attention to their fulfillment in the long-term.

To care for another is not merely regarding the prevention or removal of negative conditions in that other; the one-caring pays equal if not greater attention to
promoting positive conditions for that other. In considering care as a virtue, we have established that the positive end towards which the one-caring wishes to move the cared-for is eudaimonia. The mother wants her son not just to not suffer, but to flourish. Her attention and concern for her son as he grows up, in good cases, is often on striving to develop him and his lot in life. She seeks not just for his life to be free from harm, but also for it to be bursting with opportunity and good ends. She pays attention to the reputation of the school he is going and the type of people he spends time with. She cultivates and explores his passions, his natural abilities, and his aspirations for the future. She does not want her son to survive; she wants him to thrive.

Compassion, in contrast to this, “is appropriately directed to the other only when she or he is in a ‘negative condition’ … Thus, the compassionate agent desires the alleviation of suffering and the well-being of the other within this more restricted sphere” (Frakes, 81, emphasis added). The virtue of compassion, when compared to care, has a narrower range of concern. When one has a relationship of care for another, say a mother towards her young son, if the son is suffering, it is both appropriate to say that the mother cares for him in alleviating his suffering and that she is exhibiting compassion towards him in alleviating his suffering. If they were in an intimate relationship, failing to respond to his suffering would not just constitute a failure in compassion, but also in care.

Compassion and care are compatible and have some conceptual overlap. If the mother is caring, then attention is paid to the cared-for’s interests, goals, values, and dreams. Suffering inhibits those items; if the son is suffering, his engagement in, or pursuit of, his interests, goals, values, and dreams will be inhibited. Therefore, if the
mother is caring, then she will attend to his suffering. If the mother is compassionate, then she will empathize with his suffering and act to alleviate it. The difference is that there is no conceptual appeal to anything in the boy besides the fact that he is suffering. It does not matter that the boy is her son, nor what the boy’s interests and dreams are. It only matters that he is suffering. If the boy were to be working on his science fair project and needed help, the concept of care would still apply when the mother helped him, whereas the concept of compassion would not be applicable. The son is not suffering, and thus compassion cannot be given.

The concept of care indicates that there are restrictions regarding how many people one can care for. Again, engrossment and motivational displacement are necessary features in caring relationships. Engrossment allows the one-caring to learn about the interests, goals, and desires of the cared-for, but learning about those things within another takes time. It is not something the one-caring can be merely be told and then fully comprehend. Understanding someone’s dreams and aspirations in the way that the one-caring does of the cared-for is not something she can quickly list or recite. Knowing the simple detail that one’s son wants to become a firefighter when he grows up is not enough. Understanding what part of his personality attracts him to the work, what elements of his character fit well with firefighting, and why he respects firefighters and what they do requires a higher level of understanding, thus engrossment and motivational displacement require time to achieve. If the one-caring does not understand those elements, genuine caring of the sort that Noddings wishes to promote could not occur.
Not only does it take a time commitment with the cared-for to be able to care well, specific caring actions require one’s time. If a mother is not around at a particular instant to help her son, even if she is busy caring for her daughter, she cannot engage in care for her son. Therefore, there are practical limitations to how many people we can care well for. The more inclusive we are in whom we include in our caring relationships, the less likely we will be able to meet our primary responsibilities of good caring practices in our other caring relationships. Noddings rejects that we can care for everyone; “according to her view, the ideal of universal caring is misplaced for two reasons; first, we cannot realize such an ideal in practice, and second, this ideal would lead us to ‘substitute abstract problem solving and mere talk for genuine caring’” (Garland, 181). These features characterize the partiality of care. When an agent develops intimate relationships with others, that agent is better suited to care for those others and thus has reasons to prefer caring for them over caring for a non-intimate.

One objection to care in care ethics, as considered in the first chapter is how we are to consider our moral relations to people with whom we are not in caring relations, that is, non-intimates. Care makes sense when dealing with intimates. However, care’s function is unclear when dealing with distant strangers. Care considered independently “does not give us a way to ground our obligations to non-intimate others, especially strangers, who, as far as the one-caring is concerned, comprise the bulk of humanity” (Halwani, 176). The resolution to this objection is to subsume the concept of care into virtue ethics; a virtue ethics that includes care as a virtue would not have care

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30 I think Noddings’ inclusion of the proximate stranger as someone we can care for to be problematic. This is, however, beyond the scope of this thesis. What I am positing here is that care is by definition limited in scope. Noddings’ care focuses on intimates, and deals with them exceptionally well, and supposedly concerns proximate strangers, though to an unclear degree.
as the sole virtue of how to respond to others, and those other virtues may apply where care does not. Compassion would be one of those other virtues.

Compassion has its own practical limitations, though care and compassion have different conceptual foundations from which the limitations stem. Attending to the suffering of others also takes time. We all know about far more suffering than we are able to attend to, even if we devoted our lives to compassionate acts; if I am responding to starving children in Tanzania, then I am probably not addressing the water shortage in Haiti, nor volunteering at the homeless shelter in Boston. However, compassion does not have the limitation of needing pre-established, or requiring the development of, intimacy in order to be engaged in. We can engage strangers compassionately as strangers; what we can share with strangers is not their internal goals, dreams, aspirations, fears, etc., but rather a base shared feature of flourishing. We can connect with them in terms of the fundamental goods of a human life. We need know very little about strangers beyond knowing that, and how, they are suffering in order to be compassionate.

In this chapter, I have argued that certain circumstances necessarily inhibit, but do not necessarily prevent, the pursuit and exercise of virtues. Along with Nussbaum, I establish that humans are creatures with certain base-level features, what Nussbaum calls ‘basic capabilities.’ The absence of these capabilities at least hinders the performance of higher levels of functioning, that is to say, functioning excellently. Conditions of starvation and severe health problems, for example, inhibit capabilities such that those who experience those conditions are inhibited from excellent human functioning. Another way of phrasing it is that humans generally have a difficult time
pursuing a good human life when they are starving or battling serious health problems, whatever it is that they consider to be a good human life.

Additionally, the lack of base goods does not necessarily prohibit the sufferer a flourishing life. For example, one can be malnourished and still live a virtuous life. However, insofar as we recognize circumstances as at least influencing one’s ability to develop one’s own virtues, I argue that lacking base capabilities is a powerful, though not insurmountable, restriction to flourishing or moving towards a flourishing life. Those who encounter such hardships in an intolerable way thus suffer from their hardships. The relevant notion of suffering, as informed by Nussbaum’s essentialism, entails a state of physical or mental pain that inhibits the person’s exercise and cultivation of virtue, and thus, from the pursuit of eudaimonia.

The virtue of compassion is the virtue that is conceptually focused on how to appropriately respond to the suffering, or potential suffering, of others. It employs empathy in a dual role of being the appropriate emotive reaction when encountering suffering as well as motivating a response in the agent to that suffering. The overlying sentiment of compassion is to alleviate, extinguish, or when possible, prevent suffering.

In this chapter, I have given an account of how poor circumstances can inhibit one’s execution and pursuit of virtue and a eudaimon life. I follow Nussbaum’s capabilities approach, being a version of essentialism, to specify the sorts of circumstances that would necessarily have an inhibiting effect on anyone who encountered them. I then argue that those who endure such circumstances and who are so inhibited by their circumstances are suffering. I then develop a definition of compassion, considering historical takes on compassion and eventually focus it on
attending to the suffering of others. I end the chapter with a comparison between care and compassion.
CHAPTER 3

In this chapter, I will develop a notion of the activity of service work. I will then consider how having the virtue of care or compassion would affect the service provider in his or her service work activities. Finally, I will briefly consider the problem of paternalism in service work, poverty as it relates to service work, and some of the differences between the service provider and the professional whose work deals with the needs of others.

SERVING STRANGERS

Service work, as it is considered in this thesis, entails a type of activity aimed at promoting the welfare of a person or persons in need wherein the service provider uses his or her effort or skill in the activity and which does not result in immediate material gain on the part of the service provider. Terminologically, service providers are often considered to be volunteers, but the appellations do not always overlap. Nonetheless, I will use the terms ‘volunteer’ and ‘volunteer work’ in the remainder of this thesis as synonymous with ‘service provider’ and ‘service work,’ respectively. Additionally, unless otherwise specified, ‘the agent’ and ‘the provider’ will also refer to the service provider, and ‘the service recipient’ or ‘the recipient’ will refer to the persons who the service provider works to assist. Lastly, I recognize that people volunteer doing other activities besides those that directly focus on people, such as environmental projects. While distinctly

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counting as volunteer work, such activities are not being considered in this thesis; instead, I focus on service work that is directed towards humans.

There are several key features of service work. Methodologically, these features were determined using a bottom up approach; in examining what is already considered as service work or volunteer service that focuses on people, I consider what characterization would coherently unify them. First, service work is a type of activity. As such, it can be executed well or poorly, and by both virtuous and vicious people. In this way, service work is similar to many other activities, such as parenting. Some parents are overall vicious people, yet when they house, clothe, feed, and bathe their children (to whatever degree of competence), they are parents and performing at least some of the activities involved in parenting. It might be the case that, in particular instances, a vicious parent might execute the activity of parenting competently. More often, however, we anticipate that vicious people parent poorly. The point is, however, that poor executions of service work, like parenting, are still executions of service.

A second feature of service is that it is an activity in which the agent aims at promoting welfare. This may be problematic in that our intentions are not fully transparent to us. We are not aware of all of the internal influences (reasons, affective states, desires) that contribute to motivating our actions. Moreover, we cannot be sure of the degree a particular influence we have operates as a motivation for an action, that is to say, we are not able to identify our own primary motivation for our actions. However, it does not seem to be the case that we are utterly unaware of our intentions or

31 Think of a mobster who dotes on his daughter and conceals his violent and vicious character from her.
32 This is well outside the scope of this thesis, but consider David Rosenthal's 2005 book, Consciousness and Mind, for more information
the purposes of our actions. It may be hard to allocate the degree of influence a particular reason has on motivating our actions, and it may be the case that I do not know all of the reasons behind my doing an action, but I am aware of at least some of them. When I answer my phone, I am doing so, at least partially, because it rang. As I approach my car and reach into my pocket, I am doing so with the intention of getting my keys so as to open my car door. And, when one volunteers, even if it is for a selfish reason, one understands that the very possibility of volunteering means that one – in some way – aims to assist others in need.

For example, consider a scheming politician who, in considering his public image, might do some volunteer work from time to time. Let us say that what he focuses on in carrying out the volunteer work, say time at a soup kitchen, is to help his public image and thus his chances of reelection. It is not difficult to maintain that he is, indeed, aiming to assist others. People usually have multiple reasons for doing any given action. When I brush my teeth in the morning, I do so because I want to freshen up, because it helps me wake up, and because I enjoy fending off cavities. Moreover, perhaps I want to have clean teeth and a clean mouth because I have an important interview that day and I do not wish to offend my potential employer with bad breath. My desire for cleanliness is instrumental (clean teeth as a means of helping to make a good impression), yet when I pick up my toothbrush, I know what I aim at doing, and that is to clean my teeth. Even if the action I do is, in my mind, purely instrumental, I am still aiming at that activity.

In the case of the scheming politician, he may be only instrumentally engaging in the activity of helping people (towards the end of getting publicity or reelected), but
he is, in fact, engaging in an activity of helping people, and he does so with awareness that he is engaging in such an activity. All that needs to be understood by 'awareness' is that it is not accidental; he is not surprised that people are being helped. The point can be phrased differently: He knows that he is engaging in an activity that usually helps people in need (volunteering to give soup to the hungry). This is a fair presumption because if he were to be interviewed about it, he would likely cite his reasons on the fact that these homeless people are hungry and he wanted to do his part, or something of that ilk. Even though his actions are not genuine, his explanation (or ability to give such an explanation) proves he is 'aware' of what the consequences of his activity. So, the scheming politician is aiming at promoting the welfare of others. It is only an instrumental aim, but that is sufficient for this feature of service work.

Third, an elaboration on what is meant by ‘welfare’ and its promotion must be provided. The welfare of a person is an account of the person’s state of being in relation to the good or the good life; promoting one’s welfare is supposed to promote that person’s good. However, the concept of welfare as it informs service is conceptually indeterminate. Colloquially, welfare is often evaluated in terms of criteria such as health, happiness, or success, but more generally, in service, to promote another’s welfare is to promote what the agent believes is good for the other.\textsuperscript{33} If I think that what I am doing is helping you with your problems, then (if the other features of service also obtain) I am doing service work. It very well might be poor service work, but it would

\textsuperscript{33} There is a forthcoming discussion on what constitutes actual promotion of the welfare of the service recipient versus the here-mentioned perceived need. At this point, the necessary feature is that the agent thinks the given action will help others. This feature is necessary for the action to be considered service work. What is actually good for the recipient will be discussed later in the chapter...In characterizing the activity of service work, a neutrality or inclusiveness must be maintained so as to accommodate both good service and bad service as counting as service work.
still count as service work. On this account, accidental altruism (unwittingly helping someone) would not be regarded as service, but forced volunteering (perhaps court ordered) would. The forced volunteer (presumably) still knows that that her actions are meant to help others, even if she does not want to do it. On the other hand, the accidental altruist has no awareness of the possibility of his actions leading towards the aid of another.

A fourth feature of service work concerns how service differs from quotidian activities amongst friends and family. After all, friends and family (usually) often treat each other in ways aimed at promoting welfare and without resulting in material gain. However, service work can be conceptually distinguished from interactions between intimates. When one helps a family member in need, let us say one’s wife, he is fulfilling the demands of the relationship … he is doing what is demanded of him *as a husband.* For example, as a husband, should his wife be injured, he probably acts in a way so as to promote her welfare without resulting in material gain. This sounds like service work. However, in service work, if there were obligations entailed by a prior intimate relationship, then that activity would not count as service work. It is precisely the scope of obligations to intimates, and where that scope ends, that reveals the space of service work. It is the work done for others focusing on their welfare that is not covered by other obligations. What is appealed to in service work instead of the relationship is that the service recipient is a person who is in need. I am helping you regardless of who you are. You need help, and that is the necessary condition.

To articulate this fourth feature in a different way, consider this: why is the agent helping *them,* or perhaps, why is it *them* that the agent is helping? The question
cannot be properly answered if the agent appeals to *his own* motivation for helping generally (court ordered, pleasurable, instrumental, etc.). The question is about why it is *those particular individuals* that he is helping, and not others. If the answer includes something like, ‘because they need help,’ then it may count as service work. More importantly, however, for determining whether or not an action counts as service would be if the answer includes reference to the agent’s intimate relationship to that person (thus implicitly referring to the obligations that such a relationship entails). If it does, then it is not service work.\(^{34}\) When I help my mother paint her kitchen, or fix something, I do not claim, or even think, that I am doing volunteer work if queried; if asked why I was helping *her* specifically, I would likely say that she is my mother, implicitly indicating that sons do such things for their mothers as part of the responsibility of being in such a relationship.

Thus, one element of service that is not strictly necessary, yet almost exclusively tends to be the case, is that service is oriented towards strangers to the volunteer. Those strangers, that is, those people with whom the agent does not have a previously established relationship, might proceed to become acquaintances or some other level of intimate, but we usually start doing volunteer work for people we do not know well, or even at all. There may exceptions to their distinct separation. For example, in the 2012 movie, *Being Flynn*, the male protagonist, Flynn, works at a homeless shelter. One evening, Flynn’s father, with whom the protagonist has suffered an estranged and completely separated relationship for many years, begins staying at the shelter. Part of the richness of the story was that Flynn had to struggle through this dual level

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\(^{34}\) Recall, intimate relationships are the relationships that often take the form of family and friendships.
relationship with his father; one of service provider and recipient, and one of father and son. While cases of service to intimates does occur, such instances are in the minority.

Lastly, let us consider that service work is admittedly close to that of philanthropy, which entails donations of money or other material items. While donating is a type of activity, and one that can promote the welfare of others, philanthropy is to be considered as a distinct undertaking apart from service work in this thesis. Giving effort or skill, that is, giving service, can be distinguished from giving things (money or items) in that the evaluation process differs. Aristotle recognized this distinction in his consideration of virtues that have specific focuses on giving of things, specifically, generosity and magnificence. However, a discussion of philanthropy is outside the scope of this project.\(^{35}\)

Much of the world’s service work is organized by service organizations, such as in non-profit organizations (NPOs), non-government-agencies (NGOs), and even certain government agencies. The reason for this is practical. An organized group of service providers is often able to accomplish more together than they could independently, just as is the case in many other collective efforts (manufacturing, business, education, etc.). A service organization, that is, an organization whose

\(^{35}\) Is it not the case that service may entail the contribution of one’s own funds? Volunteer tutors, after all, sometimes give school supplies to their tutees. I think the answer must be no: service is giving skills and effort. If the agent gives things or money during a tutoring session, then, for that moment, the person would not be engaging in the activity of service; the person would be doing philanthropy. If a tutor, when she arrives, gives her tutee some notebooks, a backpack, and some pens/pencils, then for that moment, she is doing philanthropy, not service. Tutoring, after all, is not occurring in that period. The activities of service and philanthropy, already admittedly similar, can sometimes occur side by side in time, to the end of helping those in need. And, while it is certainly the case that there are others ways to help people besides service work, I am not concerned with those activities here.
primary purpose is to orchestrate the service of volunteers, will often utilize both employees and service providers to fulfill the end of promoting the welfare of service recipients. Having paid professional accountants, volunteer trainers/coordinators, grant writers, and so on, empowers the volunteers to be better equipped in their service work. Thus, it is the case that not all of those that are involved in a service organization are service providers; enabling service work is not necessarily the same as doing service work and may instead be a full time job.

I recognize a blurry line on this point. What about the person volunteers for a homeless shelter as an accountant with the sound belief that her contribution serving as an accountant will contribute more overall than serving as a regular volunteer? Let us presume that her accounting contributions indeed empower the volunteers that serve in the organization that is thus able to serve more people with better quality. Such indirect service is removed from the unmediated service roles that often come to mind when considering volunteering (working on the soup line, for example). However, the main orientation of volunteer work as a type of activity aimed at promoting the welfare of others in need and without resulting in immediate material gain on the part of the service provider still obtains for the accountant volunteer.

The difficulty grows even more as we consider the person who, without compensation, assists the accountant volunteer in some way that enables her to do volunteer accounting work. Even if this person does his assisting with the aim at promoting the welfare of the people at the homeless shelter, it is difficult to establish him as a service provider. In cases where the activity is mediated from the direct service
being provided, a closer investigation would need to be initiated on a case by case basis to determine whether it counts as service or not.

Before considering how specific virtues apply to service, it is important to note that the virtues in virtue ethics most clearly address, describe, and prescribe what individuals do and ought to do. Prescriptions for individuals inform, but are not constitutive of, prescriptions for organizations. There are likely significant and important differences when considering what an organization ought to do when compared to what an individual ought to do. This thesis is concerned with individual service providers, not service organizations.

**The Virtue for Service**

With this characterization of service being employed, compassion, not care, would be the relevant virtue for an agent to have that would allow him or her to consistently engage in service work excellently. Service work is an activity that focuses on the promotion of welfare of others in need. This state of need can be best understood, and enriched, if considered as a state of suffering. Compassion is the virtue that addresses the suffering of others.

If we consider paradigm/non-contentious cases of those who need help, we might consider visibly injured or sick people, or perhaps those who are visibly starving. The underlying question is, what does medical attention or food so importantly provide for such people? It is more important to give the starving person food than any old Joe. To say that the reason why it is more important to attend to the starving person is that he is starving is circular. It is not merely because he desires it (even if his desire is
extreme); others may have an extreme desire for money or power that the service provider would not involve herself in. The underlying reason why service providers ought to attend to the starving is that such people’s ability to pursue the good life, whatever that might be for them, is inhibited by their circumstances.

I argued in chapter two that certain circumstances necessarily inhibit, but do not necessarily prevent, the pursuit and exercise of virtues. I defended and explained that claim through the capability approach, in which the basic capabilities of human functioning, if hindered, would necessarily inhibit one’s ability to execute and pursue a eudaimon life (whatever specification of eudaimonia one might have). Circumstances of hardship, such as starvation and malady, constitute one way in which one’s capabilities can be hindered. Suffering is a state of physical or mental pain that affects the person such that the person’s experience and/or pursuit of a eudaimonia is inhibited. Circumstances of hardship can be a cause of suffering. Those who are in need of their welfare being promoted (service recipients) are most often in a state of need because of a circumstantial hardship; they (for example) do not have access to enough food, to clean drinking water, or to medical attention. Their need is a need because it is a source of suffering; they are inhibited from pursuing the good life while those circumstances obtain.

The state of need of a recipient is not necessarily determined by what the service recipient believes (nor what the provider believes); a person is in need if they are suffering. Practically speaking, the majority of the time, the best way to find out if another is suffering is to communicate with the person. Most of the time, we know when we are suffering and, generally at least, the best way to ease that suffering (how
their welfare may best be promoted). Moreover, we do not like to suffer, so when someone comes along and offers help, if there are not additional complications, then we take them up on their aid. The truly starving person, if offered help, will in most cases ask for food when queried, and will be able to specify what he or she can or cannot eat, that is, what will suffice. There are some exceptions to this. We can imagine a person so dehydrated that they are experiencing delusions, and might believe they need things which would actually be detrimental to them in such a state (desiring milk, say, instead of hydrating fluids). Other situations, such as if encountering a severely injured and also inebriated person who does not want help, may yield similar complications. This is why the state of need is not necessarily determined by what the recipient believes or wants. The person is in a state of need if they are suffering, and what service recipients actually need is their capabilities to be improved. To determine how their capabilities are to be improved, in all but the most obvious cases, will practically need to include the suffering person’s input.

Compassion, again, is a comportment of empathy towards the actual or potential suffering of others along with the disposition to properly respond to that suffering. This virtue in an agent constitutes the characteristic that allows the agent to engage in service work excellently. It is the precise features that a compassionate person has (a comportment of empathy and the disposition to respond to the suffering of others) that allow him to characteristically serve people well. The compassion of a compassionate agent allows her to make the right evaluation of what sort of suffering the other is

36 Added details to the scenario in which the suffering person would not wish to accept help, such as if the helping agent was not trusted by the suffering agent.
37 Imagine a person who just mistakenly walked on a land mine and was injured, but not killed. If we witnessed this, we would not need to consult the person on how to help him.
experiencing (most often by consulting with the other), of what actions will best alleviate that suffering (again, most often by consulting with the other), and how to go about fulfilling the prescription with emotional and contemplative appropriateness.

Care is not the appropriate virtue in many service work instances. The conditions of engrossment and displacement are unnecessarily demanding conditions to demand of an agent in all instances of service work; the agent does not have to be caring to characteristically do excellent service work. When the service recipient comes to a soup kitchen, the volunteer need not initiate a relationship leading towards engrossment and motivational displacement. It is sufficient for the volunteer to identify with the recipient as a person who is suffering (regardless of degree), and whose suffering is (at least partially) constituted by not having enough food or access to it.

To care well is a more demanding process such that merely giving the service recipient some soup would not be sufficient. Care would demand more, such that if the demands of care were attended to, the service provider would be occupied with each individual to a greater degree. A caring agent is not merely concerned with the cared-for’s state of suffering, but is concerned with their interests, dreams, and aspirations. If the need and welfare of the recipient can be explained in terms of suffering, then service work can be examined as attending to the suffering of others. Demanding care of the service provider would prescribe that the agent attend to more than just the recipient’s suffering. This is hardly a bad thing for an agent to involve himself in, but it would go beyond the purview of what service work is explicitly focused on and demands of its providers.
To further exemplify the point that caring is overly demanding, in any given soup kitchen, there are many suffering individuals that come to receive services. As a service provider who focuses on compassionate responses to those recipients, one can attend to many or all of them. If one attempts to respond to those recipients with care, one would not be able to attend to as many. This thus constitutes a potential conflict with demanding care from service providers in all cases; to do your service work well might entail merely attending to the suffering of those you are serving and not to their greater lives (interests, dreams, etc.). The same problem does not follow for compassion; it would not make sense to say you are performing your service work well and not attending to the suffering of those you are serving.

Other virtues in addition to compassion may very well aid the service provider in doing excellent service work given the circumstances, however, compassion will always help the service provider. There may be situations in which a compassionate person needs to display a certain form of courage in order to exercise his compassion. For example, we may imagine this is the case for some volunteer physicians who preform triage in a warzone. Insofar as such providers are attending to the suffering of others, compassion would still aid in their service work. The same argument follows for care; there might be cases in which a compassionate person needs to act with care in order to exercise his service well, but, again, insofar as such providers are attending to the suffering of others, compassion would still aid in their service work. And, importantly, in all the cases where care is not required, compassion still would be.
EVALUATING AND ASSESSING SERVICE: THE PROBLEM OF PATERNALISM

Promotion of another’s welfare can fail, that is, it can be evaluated as poorly done, at two levels. One way it can fail would be in not promoting what was intended by the provider – a volunteer unknowingly passes out spoiled food to recipients at a soup kitchen. The second way promoting another’s welfare can fail would be by promoting a conception of the good that is wrong – a psychopath kidnaps and tortures people in hopes of toughening them up due to his belief that society has become weak and soft.

The first level of failure is straightforward; any activity that has a certain end or goal as a necessary feature of the activity can be undertaken with incompetent or insufficient means, resulting in a failure of achieving the ends of the activity. If one is trying to help hungry people with nourishment and sustenance, and one accidently gives those hungry others spoiled food, one’s end would not be met. The incompetent or insufficient means *might* include things such as not having the relevant skills or knowledge, starting but not being able to finish a project, or having incomplete or false assumptions (in the case of service work, this would include assumptions about the recipient’s, history, his circumstances, or his culture\(^{38}\)). Any instance of service work that does not achieve the intended outcome would be considered a failure of service, and it would be a failure according to the provider’s own lights.\(^{39}\) One might note that the

\(^{38}\) Giving a meal of fish to a person with a seafood allergy would result in a failure of achieving the ends of the provider’s activity, namely, to nourish the recipient, and it is based on the assumption that fish would nourish the recipient.

\(^{39}\) Through personal experience, I can testify that in a service project, particularly larger ones, specific target outcomes can change or be altered mid-project. As you get into the thick of things (hopefully working alongside those you are serving), you can come to better understand what would be helpful and/or achievable. So, if the provider does not achieve the intended outcome because the original outcome is re-
volunteer is not always to be blamed in such cases; for example, there might have been a change in circumstances beyond the volunteer’s control that influenced the consequences for the service recipient. It thus may not be the case that the volunteer is guilty of any wrongdoing, yet such an instance of service work would nevertheless still be a failure of service.

The second level of failure requires a normative ethical theory in order to make the evaluation of whether the welfare that is being promoted is actually good or mistakenly thought to be good. This feature of service grants explanatory force in that we are able to evaluate certain poor executions of service work. Recall periods in history in which natives were pressed by conquerors, colonizers, or missionaries to adopt the newcomer’s dress, traditions, language, and culture, and to abandon their own. This was, at least sometimes, viewed by the colonizers as helping the natives – making the so-called savage peoples more civilized. Some of this effort was done by force or coercion, and some, perhaps by some of the missionaries, was done in the style of service. In those instances of service, there would be strong arguments that the missionaries had misconceptions of what constituted promoting the recipients’ (the natives’) welfare. A last note is that the two types of failure are not mutually exclusive. An instance of service work can fail on both fronts; the provider can both have a misconception of the good and failingly act in ways to promote that “good.”

The second type of failure introduced the risk of paternalism. There are many opportunities where paternalism may be injected into service work. Recall that I have evaluated as problematic mid-course, then the latter target would then become the new standard to measure this failure test by once the project is over (be it complete or incomplete). The service provider already evaluated her earlier target as insufficient according to her best understanding what would be helpful and/or achievable.
used the term ‘what the agent believes to be good for the recipient’ a number of times in defining and discussion service work. This phrase itself indicates the potential problems with paternalism in service work. First, let is consider what paternalism is.

While the definition of paternalism is not entirely agreed upon, David DeGrazia offers a compelling definition of paternalism as “the interference with, limitation of, or usurpation of individual autonomy justified by reasons referring exclusively to the welfare or needs of the person whose autonomy is being interfered with, limited, or usurped” (DeGrazia, 31).\(^{40}\) It is important to note that paternalism is normatively neutral, that is to say, paternalism does not hold by definition that it is justified or unjustified. Colloquially, an action being labeled as paternalistic is often regarded as a condemnation of the act. However, consider a mother who stops her son from chasing a ball out into a busy street. She is distantly interfering with her son’s autonomous intent of moving where he wishes, and she is doing so, presumably, out of appeal to her son’s welfare. This is a paternalistic act,\(^{41}\) yet it is also not a contentious case; the mother is doing the right thing and her paternalistic act is justified. Contrast this to a case where a patient, say, a 65 year old with late stage terminal cancer, autonomously chooses not to continue with chemotherapy treatment (against the doctor’s advice), but the doctor goes against the patient’s wishes and gives the treatment anyways. Adding details to

\(^{40}\) Consider also Tom Beauchamp and James Childress’s definition from their seminal bioethics text, *Principles of Biomedical Ethics*, as “the intentional overriding of one person’s preferences or actions by another person, where the person who overrides justifies this action by appeal to the goal of benefitting or preventing or mitigating harm to the person whose preferences or actions are overridden” (Beauchamp, 215). While this definition is accessible and intuitively applicable, it has the disadvantage in not mentioning autonomy, which is the most comprehensive concept that relates to what is at risk of violation by paternalistic action.

\(^{41}\) More precisely, the mother protecting her son in such a case is an instance of soft paternalism, in which the person whose autonomy is being overridden has either temporarily or permanently reduced autonomy – children usually do not have well developed rational or deliberative abilities.
the circumstances of this case might make an evaluation of the doctor’s paternalistic action contentious, but there are certainly variations of such a case wherein the doctor’s paternalism is clearly unjustified.

Autonomy is the central concept employed in the definition of paternalism, thus paternalism cannot be properly understood without an understanding of it. The word autonomy comes from ancient Greek (auto and nomos) and translates into self-rule or self-law. This etymological fact serves as an excellent introduction to autonomy. Beauchamp and Childress, in their seminal bioethics text, Principles of Biomedical Ethics, investigate autonomy as being tripartite. The first condition for an agent having autonomy is the agent’s intentionality. Intentional actions, they argue, “require plans in the form of representations of the series of event proposed for the execution of an action” (Beauchamp, 104). An act needs to correspond to the actor’s conception of the act at hand for it to be intentional. The consequences of the intended act can be unexpected, however.

The second condition of autonomous action is of understanding. Simply put, an act cannot be autonomous if the agent does not adequately understand it (reasons behind it, relevant circumstances, likely consequences, etc.). Only substantial understanding is necessary, not absolute. When a patient is being informed about alternative treatments to address the patient’s malady, it is not the case the patient, to make an autonomous choice, must understand everything about the malady and the treatments (details such as the chemical makeup of a drug, for example, would be

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42 I am drawing upon bioethical conceptualizations of autonomy because the concept of autonomy has received immense and rich attention in the medical field. Concerns for patient autonomy have had an influential role in shaping the procedural landscape of hospitals and other health care arenas.
superfluous). While the patient does not need to know and understand everything, the patient does need to know and understand a substantial or sufficient amount. What counts as substantial is not wholly agreed upon, but one account looks to the reasonable person standard, which establishes the substantial amount of information and understanding of that information as what a reasonable person would want or need to make such a decision as the patient faces.

The third condition of autonomy is of noncontrol. A person must be “free of controls exerted either by external sources or by internal states that rob the person of self-directedness” (Beauchamp, 104). What is key here is the authentic voluntariness of the act. Authenticity here means that the agent’s motives are representative of the motives he would normally want to have (consider the detoxing alcoholic whose motives are temporarily altered by the detoxification process). Demanding noncontrol does not, like understanding, require the person to be absolutely free of controls, but merely to be substantially free. A similar problem of identifying what counts as substantial freedom from controls is debated in the literature, but that is beyond the scope of this thesis.

On this consideration of autonomy, then, an act or choice is paternalistic when an agent, A, is making an intentional, understood, non-controlled choice or act, then a separate agent, B, interferes with A’s autonomous choice, decision, or act with reasons citing A’s welfare or needs.

The final connection important here is how paternalism and autonomy relate to the virtue of compassion and service work. Let us recall that compassion is oriented

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43 See Beauchamp and Childress for an overview of that discussion.
toward promoting the compassion recipient in terms of their capabilities, which in turn appeals to the notion of eudaimonia.\textsuperscript{44} While there is great diversity (and vagueness) in the literature about what constitutes a eudaimon life, there are shared features and types of features of what is often or always included. For example, it would not be argued that characteristically being in a state of illness or injury are in line with a flourishing life.

Likewise, it is hard to imagine a eudaimon life that is substantially lacking in any of the three conditions of autonomy. A person who consistently acted in unintentional ways, or who consistently did not understand the relevant details regarding their actions, or who consistently was being heavily influenced by some internal or external sanction is not in line with living a flourishing life in the neo-Aristotelian tradition. A virtue, remember, is not merely a disposition to do a certain kind of act. A virtue is the disposition to do a certain kind of act \textit{for the right reasons}, and with the right affective states or responses, and so on. This immediately relates to autonomy; if an agent is not acting autonomously, then he, by definition, cannot be acting virtuously, for he cannot be acting for the right reasons. A life void of virtue, again by definition, cannot be a eudaimon life. This is why, in most cases, attending to the suffering of others must involve consultation with the suffering other; if we violate their autonomous wishes, even if we are trying to help them, then we are inhibiting their pursuit of a eudaimon life, which is what the final end of compassion is geared toward.

\textsuperscript{44} To spell this out, suffering is a state of reduced capabilities. The limited capabilities entail an inhibited state of pursuing or engaging in virtue. Engaging in virtue is the necessary, though perhaps not sufficient, condition of pursuing or achieving a eudaimon life.
Therefore, compassion, in considering a eudaimon life to be the target state that the compassion-recipient should be oriented towards, generally entails promoting autonomy for the recipient. This means that in cases where an agent is suffering and does not wish to accept the compassion that would relieve her suffering, *if she is autonomous*, then the compassionate response might be to not interfere. One would suppose that cases where an autonomous suffering agent does not wish to have their suffering alleviated are rare. Nobody, generally speaking, likes to suffer, and the usual response to our own suffering is to want that suffering to end. Recall that suffering in this thesis ought not be identified with the colloquial use of the term. It is a more specific, and often more severe, state from what we usually consider as suffering. It is not contentious to say that human beings do not like it when they are literally starving or that they do not like it when they are severely injured or ill. Our autonomous response to such states is most often to get out of, or to try to get out of, those states. Granting that, there still remains the plausible, though rare, cases where someone autonomously chooses to remain suffering, and if such transpired, then compassion would prescribe acting (or refraining from action) in accordance with those wishes.

That the suffering person is sufficiently autonomous is relevant when the person’s wish is to remain suffering. If the person is not sufficiently autonomous (suppose the person is heavily intoxicated and injured, but does not wish to receive treatment), then we ought to act to alleviate her suffering in line with our best information of her autonomous wishes. Again, in rare cases with extraordinary circumstances, this process might be complicated. In most cases, though, we can correctly assume that the suffering person does not like it when he or she is starving or
enduring some malady, and his or her autonomous wish would be to alleviate his or her suffering, namely, to receive food or to be healed.

Paternalism has been a problem in the history of service work. I will leave a discussion of the history of service to a dedicated work. Relevant here is one of the above-mentioned ways in which promoting another’s welfare can fail, namely, promoting a conception of the good that is wrong. Imagine a case in which an organization wished to promote the welfare of a group of people in sub-Saharan Africa. The service providers notice that the tribe repeatedly endures periods of starvation and disease. More important to them, however, are the supposed cultural and spiritual shortcomings of the tribe. The good that the service providers wish to promote is in “improving” the tribe’s culture such that they (the tribe members) would adopt the more “civilized” mores of the service providers, including their language, dress, and spiritual practices. This, the service providers reasoned, would eventually have the added benefit of an improved quality of life.

On a neo-Aristotelian evaluation of this case, the organization’s actions would constitute a failure of service. Evaluating the tribe’s encounters with starvation and disease as a negative feature is right enough, but the cultural state of the tribe as such was not a state of suffering, and therefore not a feature that needed a response on behalf of the service providers. Locating or identifying the right thing as the cause of suffering is essential in compassion as well as for excellent service work.

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45 You might begin with William Easterly’s *The White Man’s Burden.*
PROFESSIONAL WORK AND POVERTY

The final feature mentioned in the definition of service work is that the service provider does not get any material gain. This excludes professionals who are involved in altruistic fields, such as medical practitioners. While I deem it plausible that the conclusions I argue for in this thesis may extend fully or partially to some professionals, the fact that they are doing their work as a job for compensation is an ethically relevant detail that deserves specific attention. As such, professionals lie outside the scope of this thesis. If a professional were to volunteer their time and skills, say a doctor going to a cite of a natural disaster, then the exclusion criteria would no longer obtain for that activity.

I do wish to note that certain service providers, such as Peace Corps Volunteers (PCVs) and AmeriCorps Volunteers (ACVs), do receive some money from the service organization during their service period. However, such volunteers still count distinctly as service providers and not as professionals. What PCVs and ACVs receive is a modestly sized⁴⁶ (and aptly named) “living stipend” or “living allowance.” PCVs and ACVs are long-term volunteers (a Peace Corps tour is 27 months, most AmeriCorps tours are 1 year, though there is some diversity in that). If no living allowance were provided, then the only way a person could volunteer with such organizations would be if they independently saved enough money to live on during their service term. The living stipend such volunteers receive is not meant to compensate the volunteer for their service, but rather to enable the volunteer to be practically capable of doing the

⁴⁶ As a Peace Corps Volunteer in Malawi from 2007-2009, I received approximately $123 every three months
service work over such a period (volunteers need to eat, too). Volunteers are not being paid; they are being sustained.

Much of the service work in the world is devoted to those who are impoverished. Consider two notions of poverty: 1) poverty as a financial state where one does not have a certain amount of money, and 2) poverty as a general scarcity or dearth of resources such that they are not able to attend to their essential needs. Service work’s attention to poverty is more in line with the second understanding of poverty than the first. It is not that they do not have a certain amount of money; it is that they are in a state where they do not have access to essential resources, like medicine, food, or shelter. Now, in the world we live in, if you do not have enough money, then you likely do not have access to such resources, but service work is not concerned with the money as such, but merely its instrumental value in granting those who have it access to resources. As such, many service organizations, seeking sustainable solutions, will help the needy, impoverished man not just by giving him food, but by training him and helping him to get a job. The job provides money and with the money, he can buy his own food and not fall to the point where he needs service work.

In this chapter, I have argued for an account of service work, and the necessary features in an activity for it to be considered service. I then argue that the promotion of welfare and the state of need are best understood through the lens of suffering. If the state of suffering can be equated with the state of need, and the promotion of welfare can be specified by attending to the factors that inhibit the recipient’s capabilities, then compassion would be the virtue that would consistently aid the provider in his service work. Care might be helpful, or even necessary, in certain service cases, but the
demands of care are more extensive than the demands of compassion, and thus a service provider who attempts to adequately *care* for all of her service recipients in all cases would sometimes be practically limited by her attempt; she would not be able to attend to as many people. Finally, I argue that the autonomy of the recipients must be respected in service work on pain of violating the target ends of compassion.

The first chapter of this thesis developed the notion of care. Through care ethics, I developed a notion of care and argued that it can be considered as a virtue in neo-Aristotelian virtue ethics without any substantial alterations to the concept. I also discussed inherent limitations of the scope of care concerning strangers.

The second chapter focused on Nussbaum’s conception of essentialism to develop a notion of a type of suffering. With the concept of suffering in tow, I argued for a definition of the virtue of compassion that focuses on the suffering of others. I then contrasted compassion to the virtue of care, and considered the scope of compassion as it compares to the scope of care.

In the final chapter, I developed an account of service work that is inclusive of colloquial notions of service and volunteering. I then conclude that compassion, not care, is the most relevant virtue that a service provider can cultivate to aid him in his service work.
WORKS CITED


